

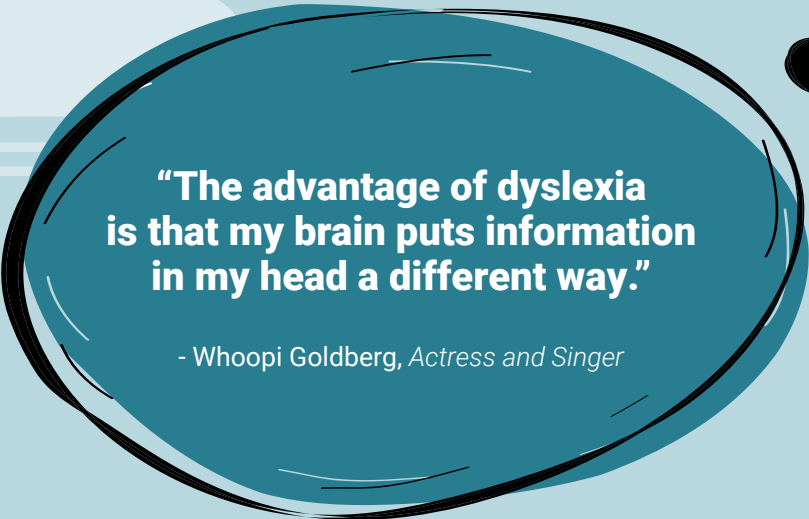
DYSLEXIA

SUPPORT **Guide**

This guide supports teachers, administrators and parents with material needed to assist students with dyslexia.

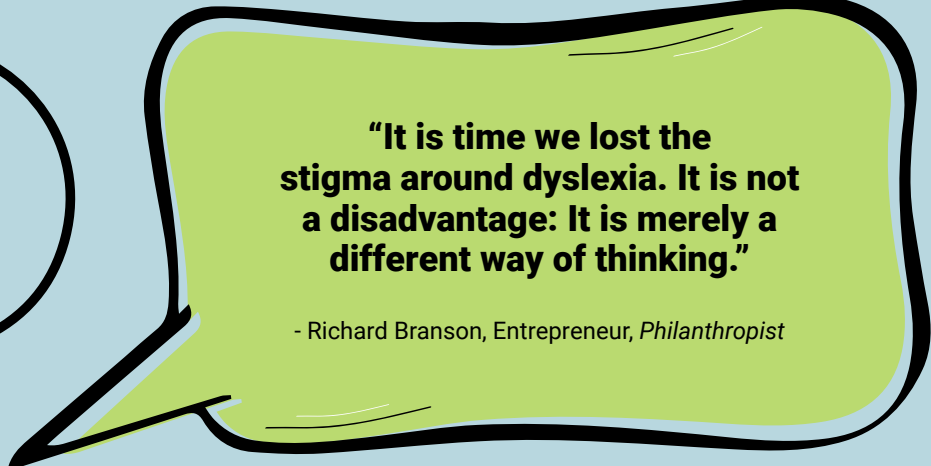


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EDUCATION



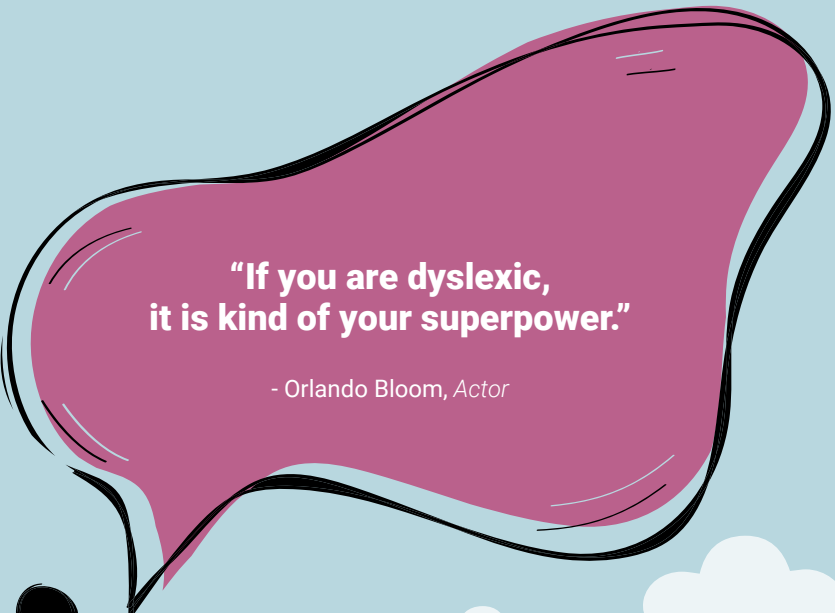
**"The advantage of dyslexia
is that my brain puts information
in my head a different way."**

- Whoopi Goldberg, *Actress and Singer*



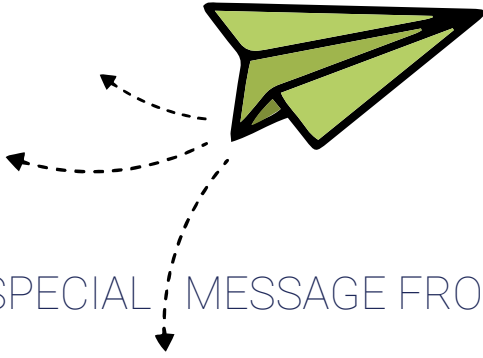
**"It is time we lost the
stigma around dyslexia. It is not
a disadvantage: It is merely a
different way of thinking."**

- Richard Branson, *Entrepreneur, Philanthropist*



**"If you are dyslexic,
it is kind of your superpower."**

- Orlando Bloom, *Actor*



A SPECIAL MESSAGE FROM

CAREY M. WRIGHT

ED.D. STATE SUPERINTENDENT OF EDUCATION

The Mississippi Department of Education created the 2022 Mississippi Dyslexia Support Guide in collaboration with state and national stakeholders with expertise in dyslexia, education, policy, and legislation. The guide is intended to provide schools and families with the necessary tools to identify students with dyslexia and provide the needed supports to maximize student success.

Mississippi has made great gains in the area of literacy in recent years because of the hard work and dedication of our educators and families. With the support of this guide, schools and families will be better equipped to help students achieve their goals. Through this guide, teachers and families will gain a deeper understanding of dyslexia, accommodations, modifications, and instructional strategies to support students.

The Mississippi Department of Education is committed to partnering with schools and families to ensure all students are provided with appropriate learning opportunities to be successful.

Carey Wright

DYSLEXIA

SUPPORT

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Section 1: Introduction

SECTION 1: INTRODUCTION

1. Purpose

The purpose of this Dyslexia Handbook is to provide guidance for Mississippi school districts, teachers, and parents in the identification and instruction of students with dyslexia.

This support guide provides current information concerning the terms dyslexia, accommodations, modifications, and instructional strategies to meet the unique needs of students with dyslexia.

Education is and will continue to be a major feature in the development of promising practices and the competitive spirit to meet the challenges of the next century that are in progress throughout our nation. It is important that Mississippi students have the opportunity to use their individual strengths in a way that enhances their quality of life within society. Students with dyslexia desire to be a part of meeting and conquering such challenges. With careful planning and support, these students can achieve goals that lead to success inside and outside of the educational environment.

2. Definition

The following definition of dyslexia was endorsed by the Board of Directors of the International Dyslexia Association (IDA) on November 12, 2002:

Dyslexia is a specific learning disability that is neurobiological in origin. It is characterized by difficulties with accurate and/or fluent word recognition and by poor spelling and decoding abilities. These particular difficulties typically result from a deficit in the phonological component of language that is often unexpected in relation to other cognitive abilities and the provision of effective classroom instruction. Secondary consequences may include problems in reading comprehension and reduced reading experience that can impede the growth of vocabulary and background knowledge.

Components of the 2002 IDA Definition:

Dyslexia is: “A specific learning disability...”

The broad term “learning disability” does not specify the area of difficulty well enough to determine interventions or placement for students.

“Neurobiological in origin ...”

The student with dyslexia is born with a brain that is structurally and functionally different from the brain of a student who does not have dyslexia. Some of these differences negatively impact phonological processing skills, rapid naming, word recognition, reading fluency, and comprehension.

“Characterized by difficulties with accurate and/or fluent word recognition...”

The student with dyslexia has difficulty being consistent in identifying sight words accurately and in reading with appropriate expression and rate. According to the National Reading Panel (2000), “Fluency is the ability to read quickly, accurately, and with good understanding.”

“A deficit in poor spelling and decoding abilities...”

The student with dyslexia usually does not spell or decode words intuitively nor learn these skills implicitly. Phonics rules governing spelling and decoding should be taught directly and explicitly for best results.

“A deficit in the phonological component of language...”

Students with dyslexia have a core deficit in phonological processing skills (phonological awareness, phonological memory, and rapid automatic naming). Phonological awareness usually has the most pronounced deficit, particularly in phonemic awareness (recognition, segmentation, deletion, and manipulation of sounds in spoken words). The student with dyslexia may also have difficulty with phonological memory and rapid naming. Phonological memory is the ability to temporarily store bits of verbal information and retrieve them from short term memory (Shaywitz, 2003). Rapid naming is the ability to quickly retrieve the name of a letter, number, object, word, picture, etc., from long term memory.

“Often unexpected in relation to other cognitive abilities...”

Students with dyslexia exhibit reading difficulties despite demonstrated cognitive abilities in other areas. According to Shaywitz (2003), a key concept in dyslexia is “unexpected difficulty in reading in children and adults who otherwise possess the intelligence, motivation, and reading instruction considered necessary for accurate and fluent reading.”

3. Common Misconceptions

Myth #1: Reading and writing letters backwards is the main sign of dyslexia.

Fact: Some students with dyslexia write letters backwards and some do not. Letter reversal is not necessarily a sign that a student has dyslexia. Young students commonly reverse letters. It is not unusual to see them confuse b and d or p and q until the age of 8.

Myth #2: Dyslexia does not show up until elementary school.

Fact: Characteristics of dyslexia can be seen in preschool, or even earlier. Dyslexia can affect language skills that are essential skills of reading. Some signs that a preschooler may be at risk for dyslexia include difficulty rhyming and being a late talker.

Myth #3: Kids with dyslexia just need to try harder to read or are being lazy.

Fact: Research shows that the brain functions differently in students with dyslexia. It also shows that reading can actually change the brain over time. Effort has nothing to do with it. It is the type of instruction that makes a difference, not how hard students are trying. With good instruction and practice, students with dyslexia can make lasting gains in reading.

Myth #4: Dyslexia goes away once students learn to read.

Fact: Appropriate interventions can make a lasting difference in helping students with dyslexia learn to read. However, being able to read does not mean that they are cured. Dyslexia is a lifelong learning difference that can affect more than just basic reading skills.

Myth #5: Dyslexia is a vision problem.

Fact: Vision problems do not cause dyslexia. Students with dyslexia are no more likely to have eye and vision problems than other kids. Students with dyslexia may have problems with visual perception or visual processing which causes difficulty recognizing details in images and processing what their eyes are seeing, but they are not part of dyslexia.

Myth #6: Students who do not speak English cannot have dyslexia.

Fact: Dyslexia exists all over the world and in all languages. It often takes longer to determine if a bilingual student has reading issues more so than their peers. If a bilingual student is having trouble reading in their first language and their second language, it is a good indication that they may need to complete a dyslexia screener to identify if they have any further dyslexia characteristics.

Myth #7: Dyslexia is caused by not reading enough at home.

Fact: Reading at home and being exposed to reading is important for all kids. Dyslexia does not happen because of a lack of exposure. It is neurobiological in origin.



Section 2: Dyslexia Legislation

SECTION 2: DYSLEXIA LEGISLATION

1. 2021 MS Code Title 37 Chapter 173- Dyslexia Therapy Scholarships for students with Dyslexia Program

a. Scholarship

The Mississippi Legislature developed a dyslexia law (MS Code § 37-173) that established the Mississippi Dyslexia Therapy Scholarship for Students with Dyslexia Program that provides the option to attend a public school other than the one to which assigned, or to provide a scholarship to a special purpose nonpublic school of choice, for students with a diagnosis of dyslexia. Students in grades 1 to 12 who have been properly screened and diagnosed with dyslexia shall be eligible to receive scholarship assistance under this program.

Parents may exercise the option to remove their child from a traditional public school setting to be enrolled in a public or special purpose nonpublic school which meets the standards for appropriate specific instruction designed to meet the unique learning needs of young students with dyslexia. These schools should have the following objectives:

- Emphasize the importance of early interventions
- Provide intensive high-quality instruction of students in reading, spelling, writing, language arts, phonological awareness, and fluency training, but shall not preclude instruction in math, social studies, science, art, music, and physical education based on the curriculum requirements of the State Department of Education.

Parents of a public school student with dyslexia may request and receive from the state a Mississippi Dyslexia Therapy Scholarship (MDTS) for the child to enroll in and attend a special purpose nonpublic school **if** they meet the following criteria:

- The student has spent the previous school year in attendance at a Mississippi public school or any other state approved nonpublic school in the state that emphasizes instruction in dyslexia intervention.
- The parent or legal guardian has obtained acceptance for admission of the student to a nonpublic school that is eligible for the program under Section 37-173-19 and has requested from the department a scholarship within thirty (30) days before the date of the first scholarship payment. The request must be through a communication directly to the department in a manner that creates a written or electronic record of the request and the date of receipt of the request. The Department of Education must notify the district of the parent's intent upon receipt of the parent's request.

A student is not eligible for a Mississippi Dyslexia Therapy Scholarship (MDTS) while he or she is:

- Enrolled in a school operating for the purpose of providing educational services to youth in Department of Juvenile Justice commitment programs;
- Participating in a homeschool education program;

- Participating in a virtual school, correspondence school, or distance learning program that receives state funding under the student’s participation unless the participation is limited to no more than two courses per school year;
- Lacking regular and direct contact with his or her private school teachers at the school’s physical location.

For purposes of continuing the educational choice a MDTs shall remain in force until the student returns to a public school or completes grade 12, whichever occurs first. The parent or legal guardian may remove the student from the nonpublic school and place the student in a public school upon reasonable notice to the MS Department of Education (MDE).

The parent is not required to accept the offer of enrolling in another public school in lieu of a request in a MDTs to a nonpublic school. However, if the parent chooses the public school option, the student may continue attending a public school chosen by the parent until the student completes grade 12.

If a parent chooses a public school within their district, the school district shall provide transportation to the public school selected by the parent. However, if the parent chooses a public school in another district, the parent is responsible to provide transportation to the school of choice.

Each local school district shall make an initial determination of whether a student diagnosed with dyslexia meets the eligibility criteria under the Individuals with Disabilities Education Act (IDEA) to have an Individualized Education Program (IEP) developed and to receive services. If a student’s diagnosis of dyslexia does not result in an IDEA eligibility determination, then the district must proceed with their process for determining if the student is eligible for a 504 Plan under the Rehabilitation Act based on the presumption that proficiency in spelling, reading, and writing are essential for the student to achieve appropriate educational progress. Each local school district shall develop interventions and strategies to address the needs of those students diagnosed with dyslexia which provide the necessary accommodations to enable the student to achieve appropriate educational progress.

The interventions and strategies shall include, but not be limited to, the use of the Three-Tier Instructional Model and the utilization of provisions of the IDEA and Section 504 to address those needs.

After a dyslexia evaluation is completed, the resulting diagnosis must be accepted by the school district for purposes of determining eligibility for placement within a dyslexia therapy program within the current school or to receive a MDTs for placement in a dyslexia program in another public or nonpublic school.

These provisions do not prohibit a parent of a student diagnosed with dyslexia, at any time, from choosing the option of a MDTs which would allow the student to attend another public school or nonpublic special purpose school.

If the parent chooses the special purpose nonpublic school option and the student is accepted by the nonpublic school pending the availability of space for the student, the parent must notify the MDE thirty days before the first scholarship payment and before entering the nonpublic school in order to be eligible for the scholarship when a space becomes available for the student in the nonpublic school.

The parent of a student may choose, as an alternative, to enroll the student in and transport the student to a public school in an adjacent school district which has available space and has a program with dyslexia services that provide daily dyslexia therapy sessions delivered by a MDE licensed dyslexia therapist, and that school district shall accept the student and report the student for purposes of the district's funding under the Mississippi Adequate Education Program (MAEP).

A parent who applies for a MDTS is exercising his or her parental option to place his or her child in a nonpublic school. Each participating parent and student shall adhere to the following:

- The parent must select the nonpublic school and apply for the admission of his or her child
- The parent must have requested the scholarship at least thirty days before the date of the first scholarship payment
- Any student participating in the MDTS for Students with Dyslexia Program must remain in attendance throughout the school year unless excused by the school for illness or other good cause
- Each parent and each student have an obligation to the nonpublic special purpose school to comply with the nonpublic special purpose school's published policies

Eligibility requirements for nonpublic schools to participate in the scholarship program

To be eligible to participate in the MDTS for Students with Dyslexia Program a nonpublic school must:

- Be a state accredited special purpose school
- Provide to the Department all documentation required for a student's participation, including the nonpublic schools and student's fee schedules, at least thirty (30) days before the first quarterly scholarship payment is made for the student.
- Be academically accountable to the parent or legal guardian for meeting the educational needs of the student by, at a minimum, annually providing to the parent or legal guardian a written explanation of the student's progress.
- Maintain in this state a physical location where a scholarship student regularly attends classes.

The inability of a nonpublic school to meet the requirements of this subsection shall constitute a basis for the ineligibility of the nonpublic school to participate in the scholarship program as determined by the Department.

The qualified personnel to facilitate the educational process of learning and instruction for children with dyslexia who attend the schools shall consist of the following:

- An administrator or director with additional training in the characteristics of dyslexia;
- A dyslexia therapist licensed by the Department in dyslexia therapy;
- Dyslexia therapists-in-training participating in a department approved dyslexia therapy graduate internship program; and
- Licensed elementary teachers under the supervision of a state department licensed dyslexia therapist.

Teachers and other school personnel in the special purpose nonpublic school shall be subject to criminal history record checks and fingerprinting requirements applicable to other public schools.

No liability shall arise on the part of the state based on the award or use of a Mississippi Dyslexia Therapy Scholarship.

MS Code § 37-173-16 was created to provide the steps schools must take for the education and care of students with dyslexia and other related disorders. It provides the following information for teacher training:

- The State Department of Education shall require public school districts to conduct four hours of in-service training in dyslexia and related disorder awareness education every three years for all licensed educators and paraprofessionals responsible for instruction.
- Standard 1 and Standard 2 of the International Dyslexia Association’s “Knowledge and Practice Standards for Teachers of Reading” 2018 Edition shall be the minimum content used for the dyslexia training. [KPS Publication for Teachers of Reading](#)
- Additional content of the training shall also include the indicators and characteristics, screening process, evidence-based interventions, and accommodations for students with dyslexia and other related disorders.
- The training, which may be provided through live in-person instruction, online course instruction or through a prerecorded video presentation, shall be delivered by an individual who holds a State Department of Education License No. 203 in Dyslexia Therapy and a national certificate as a Certified Academic Language Therapist.

b. Screening Students for Dyslexia

The purpose of the screening is to locate students who are “at risk” for reading difficulty as early as possible. Effective July 1, 2017, MS Code § 37-173-15 mandates that each local school district screen students for dyslexia in the spring of Kindergarten and the fall of Grade 1 using a State Board of Education approved screener. Each local school district shall adopt a policy to ensure students will be screened by a screener approved by the State Board of Education in the spring of kindergarten and the fall of Grade 1. The components of the screening must include:

- Phonological awareness and phonemic awareness
- Sound symbol recognition
- Alphabet knowledge
- Decoding skills
- Encoding skills
- Rapid naming

The MDE Approved Screener List and the Sample parent letter for students who do not pass the dyslexia screener can be found on the MDE Dyslexia Website.

If a student fails the screener, the parent must be notified of the results and informed that this is not a diagnosis of dyslexia. The school may use the information from the screener to develop interventions appropriate for the child’s needs. However, the school district may perform a comprehensive dyslexia evaluation or subsequent dyslexia evaluations if they deem necessary. Subsequent dyslexia evaluations may be administered by licensed professionals including:

- Psychologists, licensed under Chapter 31, Title 73, Mississippi Code of 1972;
- Psychometrists, licensed by the Mississippi Department of Education, and in accordance with Chapter 31, Title 73, Section 27, Mississippi Code of 1972;
- Speech Language Pathologists, licensed under Chapter 38, Title 73, Mississippi Code of 1972.

2. 2019 MS Code Title 37 Chapter 23-Exceptional Children in General Education

a. Dyslexia Grant

In accordance with Mississippi Code §37-23-15, pilot programs adopted by the MDE, shall provide remediation in an appropriate multisensory, systematic language-based general education program or programs as determined by the school’s district, in the areas in need of remediation for those students who do not qualify for special education services.

The MDE seeks competitive written proposals every three years from Mississippi Public School Districts for implementing dyslexia programs in grades K – 12. It is the intent that these dyslexia projects support the needs of identified students in accordance with the College- and Career-Readiness Standards, the State Board of Education Goals, and State Board Policy 41.1 on the Intervention Process.

Submitted applications are reviewed and scored by a highly qualified evaluation team consisting of but not limited to certified dyslexia therapists. Funds for this grant are subject to appropriations by the state government.

3. 2018 MS Code Title 37 Chapter 19-Teacher Opportunity Program

a. Certified Academic Language Therapist Supplement (CALT)

The following employees shall receive an annual salary supplement in the amount of Six Thousand Dollars (\$6,000.00), plus fringe benefits, in addition to any other compensation to which the employee may be entitled:

Any licensed speech-language pathologist and audiologist who has met the requirements and acquired a Certificate of Clinical Competence from the American Speech-Language-Hearing Association and any Certified Academic Language Therapist (CALT) who has met the certification requirements of the Academic Language Therapy Association and who is employed by a local school board or is employed by a state agency under the State Personnel Board. The licensed speech-language pathologist, audiologist, and certified academic language therapist shall submit documentation to the MDE that the certificate or endorsement was received before October 15 in order to be eligible for the full salary supplement in the current school year, or the licensed speech-language pathologist, audiologist, and certified academic language therapist shall submit the documentation to the MDE before February 15 in order to be eligible for a prorated salary supplement beginning with the second term of the school year. However, the total number of certified academic language therapists eligible for a salary supplement shall not exceed twenty (20).

4. 2018 MS Code Title 37 Chapter 106-Critical Needs Teacher Forgivable Loan Program

In a typical year, about twenty (20) awards are made for each of the two active cohorts, for a total of about forty (40) awards. Due to budget constraints, no awards will be made to new or renewal applicants for the 2021-22 year.

Program Overview:

Critical Needs Dyslexia Therapy Teacher Forgivable Loan (CNDT) are available to students seeking a first master's degree in Dyslexia Therapy in an approved program of study based on the Orton-Gillingham teaching approach. Students must be seeking a Class "AA" Mississippi educator license with a 203 (Dyslexia Therapy) designation. Loans will be made to cover the full cost of tuition, materials and required fees. Loans will be forgiven for recipients who serve as dyslexia therapists in public or charter schools/districts in Mississippi for one year for every year of funding received. Loan recipients who choose not to fulfill the service obligation will be required to repay the loan in full, with interest.

Eligibility Requirements:

- Be fully admitted as a regular student in an approved Dyslexia Therapy program based on the Orton-Gillingham teaching approach leading to a first master's degree and a Class "AA" Mississippi educator license. Currently, the approved program of study is offered at Mississippi College, the University of Southern Mississippi, and William Carey University.
- Have and maintain a 3.0 cumulative college GPA on a 4.0 scale.
- Hold a valid Class "A" Mississippi educator License.



Section 3: Screening Students for Dyslexia

Section 3: SCREENING STUDENTS FOR DYSLEXIA

1. Reporting Data to MDE

During the spring semester of each year districts are required to submit dyslexia screener data to the MDE Intervention Office. This data contains information regarding pass and fail percentages and is used to determine if students are being identified as having any characteristics of dyslexia. Schools are required to submit their data using the Dyslexia Screener Data Form found on the MDE Dyslexia Website. The data form is emailed to dyslexiadata@mdek12.org for submission yearly.

2. Making Instructional Decisions

Schools should utilize the information that they gain from the dyslexia screener to develop appropriate interventions.

Kindergarten students are screened in the spring of kindergarten. If they fail the dyslexia screener teachers should conduct a Teacher Support Team meeting to determine an appropriate intervention. They may also place these students on a watch list for the next school year. In doing so, they will be identified when they are given the screener again in first grade.

First grade students are screened in the fall of each year. If the student fails the screener schools are encouraged to conduct a Teacher Support Team meeting to discuss the overall performance of the student ensuring that all available data is discussed (universal screeners, classroom performance, teacher observations...). After reviewing multiple data points the student may be placed in a Tiered Intervention Program to meet their academic needs. After appropriate interventions have occurred school districts should follow the Three Tier Process and consider the Child Find Process.

3. Communicating with Parents

All parents must be notified if their child fails the dyslexia screener. Schools can call the parents, schedule a meeting, or send home a parent letter. Schools should inform parents of the components that the student failed and provide them with activities/strategies that they can utilize to support their student's growth.



Section 4: General Characteristics

Section 4: General Characteristics

Many students with dyslexia exhibit the same characteristics, but not all students with dyslexia are the same. These students come with a variety of challenges, gifts, strengths and weaknesses. It is important to understand the many different characteristics of students with dyslexia. Once we are able to understand the characteristics then we can better support them academically and behaviorally.

1. Phonological Processing Ability

Insufficient Phonological Processing Ability is the most common deficit in dyslexia. Joseph K. Torgesen (1995) defines phonological awareness as the “sensitivity to, or an explicit understanding of, the sound structure of spoken words and the ability to identify, think about, and manipulate the individual sounds.” Students with characteristics of dyslexia may show deficits in the following components:

a. Phonological Awareness

The phonological processing skill that has the most impact on the student’s ability to understand the alphabetic principle is phonological awareness. Successful readers have well-developed phonological awareness. Deficits in phonological awareness result in difficulty learning phonics through traditional teaching strategies and require interventions using a multisensory teaching method to develop these skills.

Phonological awareness skills normally develop in the following order and should be taught in the following hierarchy:

- Blending
- Segmentation
- Rhyme and Alliteration
- Manipulation

The most complex level of phonological awareness involves the smallest unit of speech and is referred to as phonemic awareness. This is the ability to recognize the number of sounds in a word, then isolate and name those sounds.

Development of this skill progresses in the following order:

Skill	Task	Activity
Sound blending	starting with two-phoneme words	go, at, it
Sound matching	initial, final sound in a word	car, cat, cub Mat, hot, rut
Sound isolation	initial, final, medial sound in a word	man /mmm/ cat /ttt/ log /ooo/
Sound segmentation	starting with two-phoneme words	am /aaa/ /mmm/
Sound manipulation	substitution, deletion, addition, reordering of sounds in words	Hot – pot Cat – at Tree – trees Pat - tap

Examples of tasks to build phonemic awareness:

Skill	Task	Activity
Phoneme isolation	Requires recognizing individual sounds in words	"Tell me the first sound in the word cat."
Phoneme identity	Requires recognizing the common sound in different words.	"Tell me the sound that is the same in map and pot."
Phoneme categorization	Requires recognizing the word with the odd sound in a sequence of three or four words	"Which word does not belong: bin, bun, rag?"
Phoneme segmentation	Requires breaking a word into its sounds by tapping out or counting the sounds or by pronouncing or positioning a marker for each sound	"How many sounds are in the word tree?"
Phoneme deletion	Requires recognizing the word that remains when a specified phoneme is removed	"What is smile without the /s/?"

b. Phonological Memory

Phonological memory is remembering a sequence of unfamiliar sounds, storing sound sequences within words in short-term memory and effectively recalling words from short-term memory, and reading and spelling long words.

Strong phonological memory skills are predictive of successful decoding skills, reading accuracy, and larger vocabularies.

Examples of tasks to build phonological memory

Skill	Task	Activity
Letter retrieval	Name letters in a series	m-r-f-l, t-o-e-r
Number retrieval	Name numbers in a series	4-3-6-5, 9-5-3-1-4
Nonsense word retrieval	Repeat nonsense words	flit, roan

c. Rapid Automatic Naming

Automaticity in naming is learned by first learning the name of something, and then having to name it under increasing levels of stress and distraction. Rapid automatic naming is the efficient retrieval from long term memory of phonological information, such as, individual sounds in words, pronunciations of common word parts, and pronunciations of whole words.

Strength in the rapid automatic naming skill is predictive of continued development of adequate reading fluency and rate. Graham Nauhaus (2002) considers rapid automatic naming (RAN) to be an integral part of reading and is highly correlated with success in reading.

Examples of tasks to build rapid automatic naming

Skill	Task	Activity
Color Naming	Name colors in a series	Red, blue, green, yellow
Letter Naming	Name letters in a series	L, b, r, s
Number Naming	Name numbers in a series	4-6-7-9
Word naming	Name words in a series	Cat, mop, way, any

“Although some children will learn to read in spite of incidental teaching, others never learn unless they are taught in an organized, systematic, efficient way by a knowledgeable teacher using a well-designed instructional approach.” (Louisa Moats, 1999)

NOTE: Research demonstrates that phonological awareness is more closely related to success in reading than intelligence (Torgesen, 1995).

2. Alphabetic Principle

The alphabetic principle is connecting letters with their sounds to read and write. To master this principle, students must have the phonological awareness skills that were mentioned above. These skills prepare students as they begin to recognize individual sounds in spoken words. Students must first understand that words are made up of letters that represent sounds of speech and secondly understand how to translate the letters in printed words into the sounds they make to read. Students with dyslexia may have difficulty in the following areas:

- Naming the letters of the alphabet
- Letter-sound relationships
- Recognizing and forming letter shapes
- Directionality when writing
- Alphabetizing

3. Classroom Performance

Students with dyslexia may not exhibit characteristics until they are in a classroom setting. Characteristics of dyslexia may be identified by classroom teachers when students begin utilizing the following skills:

- Accurate and fluent word recognition
- Decoding
- Spelling
- Reading text
- Reading comprehension
- Written expression
- Short attention span
- Handwriting/penmanship
- Oral language development
- Mathematics

NOTE: Be aware that students with dyslexia possess variable and diverse strengths and deficiencies. Dr. Sally Shaywitz (2005) stated, “A dyslexic child has a weakness in decoding, but that weakness is surrounded by a sea of strengths.” In the identification process, be sure to notice any co-existing complications and/or assets that may either exacerbate or “mask” the student’s difficulties with print language tasks.

4. Characteristics by Age Group

Difficulties may vary in degree from person to person. Some of the characteristics that are noted in one age group may also be found in other age groups. Keeping in mind that students with dyslexia will exhibit characteristics differently and at different stages.

a. **Preschool Years** (time from birth to the time a child enters kindergarten)

- Trouble learning common nursery rhymes such as “Jack and Jill” and “Humpty Dumpty”
- A lack of appreciation of rhymes
- Mispronounced words; persistent baby talk
- Difficulty in learning (and remembering) names of letters
- Failure to know the letters in his own name
- Not speaking as much as other children
- Misidentifying common objects (spoon for fork)
- Trouble following multi-step directions

b. **Kindergarten and First Grade**

- Failure to understand that words come apart; for example, that batboy can be pulled apart into bat and boy and that the word bat can be broken down still further and sounded out as: “b” “aaaa” “t”
- Inability to learn to associate letters with sounds, such as being unable to connect the letter b with the “b” sound
- Reading errors that show no connection to the sounds of the letters; the word big is read as goat
- The inability to read common one-syllable words or to sound out even the simplest of words, mat, cat, hop, nap
- Complains about how hard reading is, or running and hiding when it is time to read
- May have poor fine motor coordination
- Often uses an awkward pencil grip (fist, thumb hooked over fingers, etc.)
- May be impulsive and prone to accidents
- A history of reading problems in parents or siblings

c. **Second Grade through Sixth Grade**

- Very slow progress in acquiring reading skills
- Lack of a strategy to read new words
- Trouble reading unknown words that must be sounded out
- May confuse small words: at – to, said – and, does – goes
- Stumbling on reading multisyllabic words
- Omitting parts of words when reading
- Fear of reading out loud; avoidance of oral reading
- Oral reading filled with substitutions, omissions, and mispronunciations
- Makes consistent reading and spelling errors including:
 - Letter reversals – d for b as in dog for bog
 - Word reversals – tip for pit
 - Inversions – m and w for u and n
 - Transpositions – felt and left
 - Substitutions – house and home

- Oral reading that is choppy and labored, not smooth or fluent
- Oral reading that lacks inflection
- Reliance on context to discern the meaning of what is read
- Ability to understand words in context rather than read isolated single words
- Inability to finish tests on time
- Substitution of words with the same meaning for words that can't be pronounced, such as car for automobile
- Spelling with words not resembling true spelling; some spellings may be missed by spell check
- Trouble reading mathematical word problems
- May transpose number sequences and confuse arithmetic signs
- May have trouble remembering math facts
- May be slow to learn new skills; relies heavily on memorizing without understanding
- May have trouble learning to tell time
- May have trouble planning
- Reading that is very slow and tiring
- Excessive time on homework that otherwise would not take as long
- Untidy handwriting
- Extreme difficulty learning a world language
- Lack of enjoyment in reading, and the avoidance of reading books or even a sentence
- Reading accuracy improves over time, though it continues to lack fluency and is laborious
- Lowered self-esteem
- History of reading, spelling, and foreign language problems in family members

d. Secondary and Adults

- Childhood history of reading and spelling difficulties
- Word reading becomes more accurate over time but continues to require great effort
- Lack of fluency
- Embarrassment caused by oral reading
- Trouble reading and pronouncing uncommon, strange, or unique words such as people's names, street or location names, items on a menu
- Problems retrieving words
- Slow and labor-intensive reading and writing
- Extreme fatigue from reading
- May pay too little attention to details or focus too much on them
- May misread information
- May have an inadequate vocabulary
- May have an inadequate store of knowledge from previous reading
- Frequent sacrifice of social life for studying
- Trouble understanding jokes or expressions of speech
- Avoiding activities that involve reading
- Preference for books with figures, charts, or graphics
- Reluctance to read for pleasure

- Spelling that remains inaccurate and a preference for less complicated words that are easier to spell
- May reverse letter sequences – soiled for solid, left for felt
- May be slow to discern and to learn prefixes, suffixes, root words, and other reading and spelling strategies
- Spells the same word differently on the same page
- Repeated reading and rereading material in order to understand
- May procrastinate or avoid writing
- May have trouble answering open-ended questions on tests
- May have trouble summarizing and outlining
- Difficulty managing homework assignments and deadlines
- Higher math skills such as algebra are a struggle
- Significant discrepancy between the student’s grades and scores on standardized tests including ACT
- Trouble learning a world language
- Trouble with navigation
- Trouble expressing ideas



Section 5: Supporting Students with Dyslexia

SECTION 5: SUPPORTING STUDENTS WITH DYSLEXIA

Research shows that multisensory instruction that is Orton-Gillingham based is the most effective way to teach students with dyslexia.

1. Strategies and Techniques

There are many appropriate strategies and techniques to support students with dyslexia. Keep in mind that all students are individuals and may respond to different techniques and approaches. Below are different strategies and techniques that may be utilized.

- Multisensory instruction in decoding skills
- Utilize multiple learning modalities when teaching new information in all subject areas
- Repetition and review of skills
- Intensive Intervention (see information in the MTSS Section)
- Small group or individual instruction
- Teaching comprehension strategies
- Utilize graphic organizers for written assignments
- Provide a class syllabus to give both the student and the parents an outline of the class and advanced notice of larger projects
- Support students who have a difficult time taking notes by allowing them to focus on the lesson as opposed to filtering the lecture for important information:
 - Provide a copy of class notes prior to or after class
 - Set up student partners to share and compare notes
 - Allowing students to take a picture of the board
- Set up progress checkpoints for large/long term assignments to support those students with time management and organization issues
- Check for understanding when delivering multi-step instructions
- Select reading materials/books that are available on audio (reserve through the public library if your school or the student is unable to purchase)
- Teach students to use resources such as Spark Notes to support reading comprehension for longer reading assignments
- Begin each day's lesson by summarizing both previously taught information and information from today's lesson. This helps students with dyslexia to organize the details of the lesson
- When beginning a lesson or unit, provide students with a list of vocabulary words; they can then use them to create a glossary to help them study
- To compensate for trouble with organizing and separating important information from inconsequential information, provide study guides prior to tests or exams to give them specific topics to review and study
- To support open lines of communication, set up opportunities for students with dyslexia to get extra help as they may feel uncomfortable asking questions out loud
- Provide alternate methods of "writing reports" such as creating PowerPoint presentations, building models and giving oral reports; allowing students with dyslexia opportunities to demonstrate their knowledge in a positive way

2. Multi-Tiered System of Supports (MTSS)

Mississippi has defined Multi-Tiered System of Supports as a framework for effective team-based problem solving that is data-informed, evidence-based, and flexible enough to meet the academic and behavioral needs of all students. It is adaptable to meet the unique needs of districts and schools where a collaborative team should meet to make informed decisions. MTSS is NOT a single curriculum or program. It is a framework to guide schools and districts as they make instructional decisions for student intervention placement.

MTSS is made up of the following components:

- Shared Leadership
- Family, School, and Community Partnerships
- Data-based Problem Solving and Decision Making
- Layered Continuum of Supports
- Evidence-based Instruction, Intervention, and Assessment
- Universal Screening and Progress Monitoring

a. Three-Tiered Instructional Model

The Mississippi State Board of Education's Policy 41.1 requires that districts and schools follow a three-tiered instructional model consisting of:

- Tier 1: high-quality classroom instruction,
- Tier 2: focused supplemental instruction,
- Tier 3: specifically designed intensive interventions as prescribed.

This systematic approach supports struggling learners, as well as advanced learners, through the selection of evidence-based instruction and intervention in response to both academic and behavioral needs. The system includes on-going progress monitoring of the effectiveness of instruction to ensure that all Mississippi students graduate from high school ready for college and career. Such a model enables early identification of students in need of supports and allows for appropriate supports to be put in place as soon as a student starts to fall behind.

The policy, as approved by the Mississippi State Board of Education, may be viewed in its entirety in Appendix A of the MTSS Guidance Document which may be found on the MDE Intervention Website.

Tier I: High Quality, Core Instruction

Universal Instruction, often referred to as high-quality core instruction, is the classroom experience for all students. The importance of high quality, evidence-based practices in the classroom cannot be overstated. Universal instruction includes a wide variety of strategies used to engage students in learning while incorporating the science of reading. Universal instruction is not a one-size-fits-all solution. Universal instruction should include scaffolding and differentiation to meet the varied needs of learners in the classroom.

Providing visual models, tools, vocabulary cards, anchor charts, and strategically grouping students during whole class and small group instruction are all considered universal supports for students. The careful selection of which supports are advantageous for which students require teachers to utilize a variety of formative assessment practices to plan their instruction carefully.

Tier II: Targeted Supplemental Intervention

Even with the best efforts and well-designed core instruction, some students will need additional support. The hallmark of supplemental supports is the act of intensifying instruction, in time and frequency while narrowing focus. Therefore, targeted, evidence-based supports expect a degree beyond universal and must be provided in addition to universal instruction. Targeted intervention and support may be implemented by the classroom teacher, a support teacher, or other personnel adequately qualified to teach the defined intervention. The delivery of an intervention and the resources used should result from data analysis and student need(s).

Tier III: Intensive Individualization

When the progress in targeted intervention is not adequate for a student to be successful, it may be necessary to again increase time and intensity and further narrow focus through implementation of an intensive individualized intervention.

Tier 3 interventions may take a variety of forms. A skilled intervention provider might design an intervention or implement a research-based program that aligns well with the specific needs of the student. For many students who struggle significantly, the instructions may need to be broken into smaller steps or more time may be necessary for the student to master the learning objective. Although some students might naturally understand ideas and apply them across topics and settings, some students who struggle might need instruction explicitly and repeatedly linked within their learning experiences.

b. Addressing Dyslexia within MTSS

Mississippi's public schools are required to accept a diagnosis of dyslexia from a licensed psychologist, psychometrist or speech language pathologist. Once the evaluation is received the Teacher Support Team will determine the most appropriate supports to put in place to allow for student success. When determining these supports, teams should look at all available and relevant data. Supports may consist of, but are not limited to, services provided by a dyslexia therapist, placement in Tier II or Tier III intervention, Orton-Gillingham or multisensory based intervention programs, classroom accommodations, modifications, and accommodations on state testing.

c. Monitoring Progress

Progress monitoring is a process used to assess a student’s academic and behavioral performance and measure student improvement or responsiveness to instruction and intervention. Progress monitoring can be formal (quantifiable, norm-referenced tools) or informal (teacher-developed, formative tools) and can be implemented with individual students or an entire class. The frequency of progress monitoring will increase with the intensity of an intervention or additional challenge. Like universal screening, progress monitoring is a process, and therefore data should include multiple pieces of evidence with a focus on individual student improvement.

Ongoing progress monitoring is an essential component of MTSS as it is necessary for the design and redesign of appropriate supports for students. Progress monitoring should be administered at specific intervals as determined by the TST and the intervention plan. This data should directly reflect the target deficit area(s) addressed during intervention time.

3. Additional Supports

a. The Reading Classroom

The Reading Classroom focuses on learning to decode and derive meaning from text.

At the elementary level, students should be receiving instruction in whole and small groups. Some students may work independently, while others may be involved in small group intervention time with the classroom teacher. The classroom should be equipped with supplies and materials, including a classroom library that includes decodable readers in the early elementary grades, necessary to support quality reading instruction and utilizing the science of reading.

At the secondary level, students should be “reading to learn”. This means students who have not yet learned to decode words may struggle to keep up with their grade and age level peers. Because of this, reading instruction for decoding at the secondary level becomes more explicit and specific to the student’s needs. This instruction should be provided by a highly qualified reading instructor or specialist, and students should be working individually or in small groups.

The reading schedule should prioritize reading instruction that is based on the 5 essential components of reading (phonological awareness, phonics, fluency, vocabulary, and comprehension). Students should participate in a variety of reading activities and may need additional intervention instruction. Students who require explicit instruction may need an evidence-based instructional plan that is specific to their individual strengths and deficit areas. The intervention process may be different from school to school, but all schools must provide the necessary support.

b. Assistive Technology

Assistive technology can help students with dyslexia overcome challenges, such as slow note-taking and poor handwriting, allowing them to demonstrate their knowledge of the content without the barriers that may otherwise exist. Below are several examples of assistive technologies that can be utilized in the classroom. However, this list is not exhaustive. Before purchasing any programs or apps, determine the effectiveness of the technologies by talking with others about their own experiences utilizing the technologies with students. (NOTE: *Local school districts have discretion over which technology partners and products are utilized in their districts. For legal advice regarding technology services, please contact your local school board attorney.*) Once technologies are selected for use in your classroom, train students and staff members on the safe and effective use of the assistive technologies and the appropriate times to utilize them.

Accessibility Features on Devices and in Internet Browsers

Research the accessibility features available in the device's operating system and chosen internet browser, as many will provide options such as text-to-speech, zoom, and color filters, that can be beneficial for students with dyslexia.

Remove Distractions in Print Material

Students can easily become overwhelmed by a full page of text, struggle with visual tracking, and/or battle to maintain their focus while reading; therefore,

- Keep document formatting simple and clean.
- When possible, ensure the font selection is simplistic (Times New Roman, Arial, or similar) and font size is not too small (12 pts or larger).
- Set the line spacing to more than single spacing to assist with tracking while reading.
- Ensure borders, graphics, or images are at a minimum and are not touching the text so as not to become a distraction.
- Provide "clean" copies of printed materials, free from black streaks, smudges, or distorted text which can reduce readability.

Remove Distractions from Web-Based Material

Many internet browsers, such as Safari, Microsoft Edge, and Firefox, provide options for "Reader View" which will remove videos, images, advertisements, and other distractions on web pages to allow students to focus on the text. Additionally, the "Reader View" function may also allow for increasing font size, line spacing, and color contrast that can assist with focus and readability. For Chrome browser users, similar options are available through the free Mercury Reader add-on.

Text-to-Speech and Other Reading Supports

With text-to-speech technology, students with dyslexia can listen to words being read aloud while scanning the text on the screen. Some operating systems and internet browsers will offer text-to-speech features. However,

- Microsoft's Immersive Reader (available in many Microsoft products including Word, Outlook, Edge, FlipGrid, and Wakelet) and

- TextHelp’s Read&Write (available in Google Docs and Chrome), allow for greater functionalities such as dictionaries, visual dictionaries, line focus, and syllable identification, to provide additional reading supports.

(Note: There may be costs associated with some of these features.) For assistance with reading text that is not already located on the device, consider utilizing Office Lens, Microsoft’s free app for iOS or Android devices. Office Lens will digitize the text found in photographs, such as notes on a whiteboard or other printed documents, so that it can be read utilizing the Immersive Reader.

Speech-to-Text

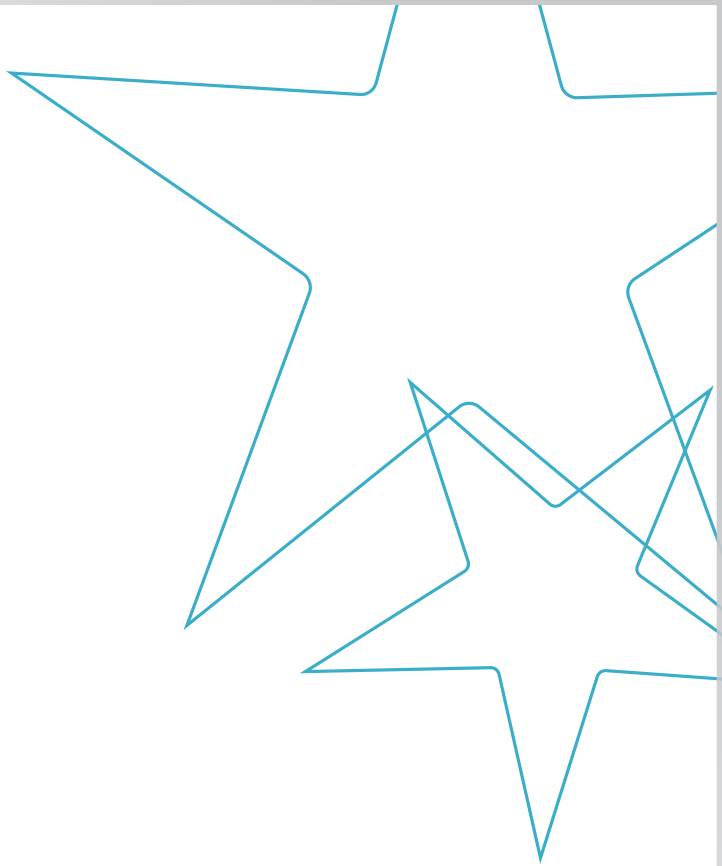
Speech-to-text technologies take the spoken word and translate it into text. Students with dyslexia can speak into a built-in or external microphone and their words will appear on the device screen. This can assist students with barriers to writing, such as handwriting speed or quality and spelling. However, students must be trained to speak their punctuation, by saying “comma” or “new paragraph” as needed. Many word processing programs have speech-to-text capabilities, but often this functionality must be enabled by the user. For example, the “Voice Typing” command in Google Docs can be activated by going to Tools > Voice Typing. Microsoft and Apple have similar functionality called “Dictation” that must be enabled in order to utilize this feature.

Note Taking and Studying

Having to simultaneously listen, process, and write can easily overwhelm students. If writing or taking notes is difficult, an audio recorder can record class content so information can be reviewed at a later time. This enables students with dyslexia to focus on the content instead of writing and spelling. Note-taking programs such as Evernote and Microsoft One-Note allow for easily bookmarking webpages, annotating images, and audio recordings. (Note: There may be costs associated with some features.) An additional study tool can be the use of Quizlet to create digital flashcards and play a variety of games to test the knowledge of the material. Quizlet flash cards allow for text and images, and the text can be read aloud for the student. (Note: There may be costs associated with some features.)

Spelling and Grammar Checks

Technologies that provide word prediction and spelling and grammar checks can help students with dyslexia focus on the content of their writing rather than the mechanics. Utilizing these tools on mobile devices can empower older students who are using their devices to communicate with others in the workforce or community. Programs such as Grammarly or Ginger provide spelling and grammar checks, along with explanations for the grammatical errors and possible corrections. (Note: There may be costs associated with some features.) For similar assistance on mobile devices, Grammarly is available for iOS, and Ginger is available for Android devices.



Section 6: Child Find

SECTION 6: CHILD FIND

Child Find is the ongoing obligation to identify, locate, and evaluate all children suspected of disabilities who need special education and related services as a result of those disabilities. A district should not violate its Child Find duty by repeatedly referring a student for interventions rather than evaluating the student's need for special education and related services.

1. Making Child Find Decisions

The request for a comprehensive evaluation can be made at any point. When a written or verbal request for an initial evaluation is made, a Multidisciplinary Evaluation Team (MET) composed of the parent, the child (if appropriate), and qualified professionals must be convened within fourteen (14) calendar days to review the request including all pertinent existing documentation. The public agency must invite the parent to participate; however, if the parent is unable to attend, the MET must proceed. The MET should also include a MET Chairperson who can allocate school resources for the evaluation and, if necessary, resolve disagreements in eligibility determination decisions. Day one is the day the parent, teacher, Teacher Support Team (TST) member or representative of another public agency makes the request to the LEA.

The MET has the sole responsibility for deciding whether or not to evaluate a child based on any and all documentation available. If the MET determines that the need for an evaluation is substantiated, Prior Written Notice, Informed Parental Consent, and Procedural Safeguards: Your Family's Special Education Rights must be given to the parent within seven (7) calendar days of the meeting. In these cases, the MET must obtain informed written consent from the parent before it can proceed with an initial evaluation (i.e., no individual assessments may be conducted prior to obtaining this consent). If the MET determines that the need for an Initial Evaluation is not substantiated at this time, Prior Written Notice and Procedural Safeguards: Your Family's Special Education Rights must be given to the parent within seven (7) calendar days of the meeting. In these cases, the MET may refer the child to the TST for focused supplemental instruction or intensive interventions using the Multi-Tiered System of Supports to promote the child's success in the general education curriculum. The following are examples of what may be reviewed when making decisions:

- The student's most recent spelling test
- Sample of the student's unedited writing (journal entry, creative story, etc.)
- The student's most recent progress report or report card
- A copy of most recent literacy screeners
- Any provided outside testing
- Dyslexia screener results
- Dyslexia checklists (see appendix)

2. Section 504

A student with a diagnosis of dyslexia may qualify or be deemed eligible for Section 504 if he or she is displaying or has a physical or mental impairment which substantially limits one or more life activities, has a record of such impairment, or is regarded as having such impairment. It is important to note that a disability must be the reason that the student cannot equally access or receive benefit from the school's programs or services. There are three prongs of the criteria: (a) physical or mental impairment, major life activity, and substantial limitation; (b) record of impairment; and (c) regarded as having such impairment. Section 504 is a civil rights statute NOT a special education statute. Therefore, it is the responsibility of general education staff and administration to implement those practices and procedures necessary for a school to fulfill this law's requirements. School districts should ensure a board approved Section 504 is in place. Parents are encouraged to connect with their local school district to obtain the process for determining eligibility within the district.

3. Special Education

School districts should recognize that some students who have an official diagnosis of dyslexia may qualify for Special Education Services under the eligibility category of Specific Learning Disability (SLD). A Free Appropriate Public Education (FAPE) must be available to all students who have been determined to be eligible for special education. FAPE is defined as appropriate special education and related services provided at public expense, without cost to the parent, and under public supervisions and direction. A FAPE must meet the requirements of the Mississippi Department of Education's State Policies Regarding Children with Disabilities under the Individuals with Disabilities Education Act (IDEA) of 2004 (State Board Policy 74.19). It is binding on all public agencies who receive payments under Part B of IDEA. A FAPE includes an appropriate preschool, elementary or secondary public education in the child's Least Restrictive Environment (LRE) and is provided in conformity with the child's Individualized Education Program (IEP).

A FAPE must be based on the child's individual needs and not based on a disability category. School districts should examine their district policies and procedures to ensure that they fully align with the state and federal regulations and consider implementing policies that allow for the use of the terms dyslexia, dyscalculia, and dysgraphia on IEP's. If the child's comprehensive assessment supports the use of these terms and if dyslexia is the condition that is the basis for the determination of the child's disability, then the IEP should address the unique educational needs of children with SLD resulting from dyslexia, dyscalculia, and dysgraphia. This should be addressed during IEP committee meetings with parents under IDEA requirements.

4. The Difference between IEPs and 504 Plans

Both Individualized Education Programs (IEPs) and 504 plans can offer formal help for PreK–12 students with learning and attention issues. They are similar in some ways but quite different in others. This chart compares them side-by-side to highlight the differences.

	IEP (Special Education)	504 Plan (General Education)
Basic Description	A blueprint or plan for a child's special education experience at school.	A blueprint or plan for how a child will have access to learning at school.
What It Does	<p>Provides individualized specially designed instruction and related services to meet the unique needs of the child.</p> <p>These services are provided at no cost to parents.</p>	<p>Provides changes to the learning environment to meet the needs of the child as adequately as other students.</p> <p>As with IEPs, a 504 plan is provided at no cost to parents.</p>
What Law Applies	<p>The Individuals with Disabilities Education Act (IDEA)</p> <p>This is a federal special education law for children with disabilities.</p>	<p>Section 504 of the Rehabilitation Act of 1973</p> <p>This is a federal civil rights law to stop discrimination against people with disabilities.</p>
Who Is Eligible	<p>To get an IEP, there are two requirements:</p> <ul style="list-style-type: none"> • Meets the eligibility criteria for one or more of the 13 specific disabilities listed in IDEA and state board policy • The disability must affect the child's educational performance and/or ability to learn and benefit from the general education curriculum 	<p>To get a 504 plan, there are two requirements:</p> <ul style="list-style-type: none"> • Has any disability or • is regarded or has record of having a disability <p>Section 504 has a broader definition of a disability than IDEA. Many students who do not qualify for special education, may still be eligible for Section 504.</p>
Independent Educational Evaluation	Parents may ask the school district to pay for an independent educational evaluation (IEE) by an outside expert as a second opinion. More information on IEEs can be found at Mississippi Special Education Procedures Volume III.	LEA policies should establish evaluation and grievance procedures for establishing eligibility.
Who Creates the Program/Plan	<p>There are strict legal requirements about who participates. An IEP is created by a committee that must include:</p> <ul style="list-style-type: none"> • The child's parent • At least one of the child's general education teachers • At least one special education teacher • School psychologist or other specialist who can interpret evaluation results • A district representative with authority over special education resources <p>With a few exceptions, the entire team must be present for IEP meetings.</p>	<p>The rules about who is on the 504 team are less specific than they are for an IEP.</p> <p>A 504 plan is created by a team of people who are familiar with the child and who understand the evaluation data and special services options. This might include:</p> <ul style="list-style-type: none"> • The child's parent • General and special education teachers • The school principal

<p>What's in the Program/Plan</p>	<p>The IEP sets learning goals for a child and describes the services the school will give her. It's a written document. Here are some of the most important things the IEP must include:</p> <ul style="list-style-type: none"> • The child's present levels of academic and functional performance—how she is currently doing in school • Annual education goals for the child and how the school will track her progress • The services the child will get—this may include special education, related, supplementary and extended school year services • The timing of services—when they start, how often they occur and how long they last • Any accommodations—changes to the child's learning environment • Any modifications—changes to what the child is expected to learn or know • How the child will participate in standardized tests • How the child will be included in general education classes and school activities 	<p>There is no standard 504 plan. Unlike an IEP, a 504 plan doesn't <i>have</i> to be a written document. A 504 plan generally includes the following:</p> <ul style="list-style-type: none"> • Specific accommodations, supports or services for the child, • Names of who will provide each service, • Name of the person responsible for ensuring the plan is implemented.
<p>Parent Notice</p>	<p>When a child's services or placement needs to be changed or adjusted, an IEP Committee meeting should be held. The LEA should also provide notice in writing <i>before</i> the change. This is called prior written notice. Notice is also required for any IEP meetings and evaluations.</p>	<p>Unlike Special Education, the federal regulations for Section 504 do not require or even mention that parents are to be a part of the decision-making committee. Including parents in the decision-making committee is a determination that is made by each school district and should be spelled out in the district's procedures for implementing Section 504. Parents should at least be asked and encouraged to contribute any information that they may have (e.g., doctor's reports, outside testing reports, etc.) that would be helpful to the Section 504 committee in making their determination of what the child may need. Schools are expected to make sound educational decisions as to what the child needs in order to receive an appropriate education.</p>

Parent Consent	A parent must provide written consent for the LEA to evaluate a child. Parents must also consent in writing before the school can provide services in an IEP.	While parental consent is not specifically stated it is implied for an LEA to evaluate a child. Districts should establish evaluation procedures to ensure appropriate identification of students with disabilities.
How Often It's Reviewed and Revised	The IEP committee must review the IEP at least once a year. The student must be reevaluated every three years to determine if they are still eligible for services.	504 Plans must be reviewed periodically.
How to Resolve Disputes	IDEA gives parents several specific ways to resolve disputes (usually in this order): <ul style="list-style-type: none"> • Mediation • State Complaint • Due Process Complaint • Resolution session • Civil lawsuit • Lawsuit 	Section 504 gives parents several options for resolving disagreements with the school: <ul style="list-style-type: none"> • Mediation • Alternative dispute resolution • Impartial hearing • Complaint to the Office of Civil Rights (OCR) • Lawsuit
Funding/Costs	Students receive services at no charge. LEAs do receive federal funding for special education services.	Students receive services at no charge. States do not receive extra funding for eligible students; however, funding can be revoked from programs (including schools) that don't comply. IDEA funds cannot be used to serve students with 504 plans.

Knowing which laws do what is a big part of understanding the difference between an IEP and a 504 plan.

5. Evaluations for Dyslexia

Evaluation describes the process of determining if someone has dyslexia. The word evaluation encompasses identification, screening, testing, diagnosis, and all the other information gathered involved when the student, his or her family, and a team of professionals work together to determine why the student is having difficulty and what can be done to help. School districts may choose whether or not they provide the evaluation.

If the school does not provide evaluations for dyslexia, the parent can have a subsequent evaluation performed. The resulting diagnosis of the evaluation must be accepted by the school district for purposes of determining eligibility for placement within a dyslexia therapy program or the three-tiered instructional model or students with a diagnosis of dyslexia may also receive a Mississippi Dyslexia Therapy Scholarship for placement in a dyslexia program in another public school or nonpublic special purpose school.

Parents who consider hiring a professional to complete the dyslexia evaluation should ask the following questions:

- Are you a licensed professional as described in MS Code § 37-173-15?
 - Psychologist
 - Psychometrist
 - Speech Language Pathologist
- Are you familiar with dyslexia?
- Have you had any training in diagnosing dyslexia? Where?
- What assessment tools do you use to diagnose dyslexia?
- How long will it take to complete the assessment?
- Do you need any information from me or the teachers to complete the assessment?

Licensed Speech Pathologists may also diagnose dyslexia, according to MS Code § 37-173-15. However, all Speech Pathologists do not have this specialized training. Therefore, use the questions above as a guide for choosing a service provider.

A dyslexia evaluation should include the following components: (The evaluation does not have to include all of these components, but a full evaluation should include most of these components)

- IQ assessment
- Reading fluency
- Reading comprehension
- Word reading/oral reading
- Written expression/writing samples
- Spelling
- Oral expression
- Listening comprehension
- Letter-word identification
- Passage comprehension
- Word attack
- Vocabulary knowledge
- Phonological awareness
- Phonological memory
- Rapid naming

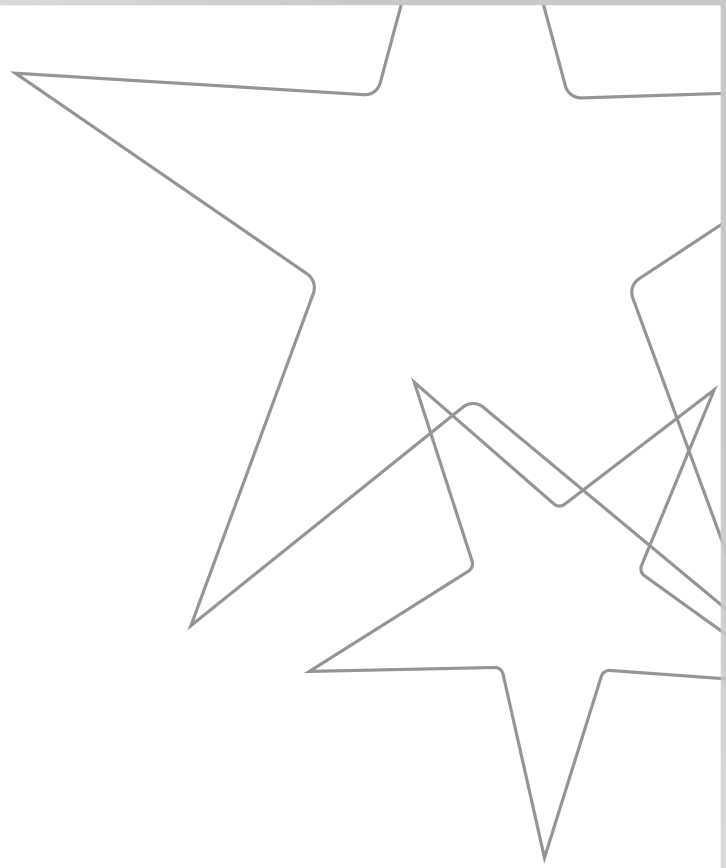
The evaluation report should provide the documentation necessary to determine eligibility for purposes of placement within a dyslexia therapy program. At the request of the parent, the diagnostic report may also be considered by a Multidisciplinary Evaluation Team (MET) who determines eligibility for Special Education services, if necessary. The parent of a child with dyslexia must advocate for the best possible education opportunities for that child. To be an effective advocate you must understand the diagnostic report and your child's rights.

Below is a list of typical assessments that may be used to diagnose dyslexia, and the areas they cover.

Name	Assessed Areas
Comprehensive Test of Phonological Processing (CTOPP-3)	<ul style="list-style-type: none"> • Phonological Awareness • Phonological Memory • Rapid Naming
Lindamood Auditory Conceptualization Test – Third Edition (LAC-3)	<ul style="list-style-type: none"> • Phonemic Awareness • Rapid Naming
Test of Auditory Analysis Skills (TAAS)	<ul style="list-style-type: none"> • Phonemic Awareness
Woodcock-Johnson Psycho-Educational Battery – Third Edition (WJ-3)	<ul style="list-style-type: none"> • Letter Word Identification • Reading Fluency • Passage Comprehension • Calculation • Math Fluency • Applied Problems (Mathematics) • Spelling • Writing Fluency • Writing Samples • Academic Knowledge
Texas Primary Reading Inventory (TPRI-revised)	<ul style="list-style-type: none"> • Graphophonemic Knowledge • Phonemic Awareness • Book and Print Awareness • Listening Comprehension • Word Reading • Reading Accuracy • Reading Fluency • Reading Comprehension
Phonological Awareness Test (PAT)	<ul style="list-style-type: none"> • Phonological Awareness • Phoneme-Grapheme Correspondences • Phonetic Decoding Skills
Woodcock Reading Mastery Test – Revised (WRMT-R)	<ul style="list-style-type: none"> • Phonological Awareness • Listening Comprehension • Letter Identification • Word Identification • Rapid Automatic Naming • Oral Reading Fluency • Word Attack • Word Comprehension • Passage Comprehension
Decoding Skills Test (DST)	<ul style="list-style-type: none"> • Decoding
Wide Range Intelligence Test (WRAT-3)	<ul style="list-style-type: none"> • Cognitive Ability
Gray Oral Reading Test – 5 (GORT-5)	<ul style="list-style-type: none"> • Reading Fluency • Reading Comprehension
Test of Word Reading Efficiency (TOWRE)	<ul style="list-style-type: none"> • Sight Word Efficiency • Phonemic Decoding Efficiency
Test of Written Language – Fourth Edition (TOWL-4)	<ul style="list-style-type: none"> • Writing
Oral and Written Language Scales (OWLS-2)	<ul style="list-style-type: none"> • Oral Language • Written Language • Expressive Processing • Receptive Processing

Process for requesting dyslexia testing at the school level

School districts independently decide the process for assessing students who are suspected of having dyslexia. The process may vary by district, but each district should have a procedure for addressing parent requests for testing.



Section 7:

Accommodations and Modifications

SECTION 7: ACCOMMODATIONS AND MODIFICATIONS

Accommodations and modifications are types of adaptations that are made to the environment, curriculum, instruction, or assessment practices in order for all students to be successful learners and for students with disabilities to actively participate with other students in the general-education classroom and in school-wide activities. Accommodations are an adaptation that helps a student overcome or work around a disability and modifications are an adaptation to instruction or the administration of an assessment that changes, lowers, or reduces performance expectations for demonstration of a learning outcome. The following examples are provided to support teachers as they provide these adaptations in the classroom.

1. Examples of Accommodations and Modifications (not an exclusive list)

Classroom:

- Provide books on tape, an electronic reader, or audiobook app that a student can listen to especially for content areas
- Create opportunities for oral reading on a one-on-one basis and only ask the student to read aloud in class if he or she feels comfortable/volunteers to do so
- Provide a text tracker or placement marker when reading from paper
- Allow students to use a highlighter to mark important parts of the text
- Use shared reading or reading buddies
- Provide an advance copy of notes or partial notes
- Allow the student to discuss material one-on-one after reading with a paraprofessional, student partner, or the teacher
- Provide outlines, summaries of chapters, vocabulary words, and preview questions before reading
- Give spelling tests orally
- Accept creative spelling on written work without penalizing
- Reduce amount of spelling words on homework/tests
- Provide manipulatives to use during spelling test (e.g., letter tiles)
- Allow student to dictate work to a parent or paraprofessional where they act as the scribe for the student
- Provide speech-to-text software
- Offer alternative projects instead of written reports
- Photocopy another student's notes or designate a notetaker who will share notes at the end of class
- Minimize the amount of copying from the board by allowing students to take a picture with a device or provide a desk copy of the notes
- Allow students to use a keyboard to take notes
- Allow students to respond to questions orally rather than writing each answer
- Use worksheets with minimal writing
- Allow the use of electronic spell-checkers
- Allow students to tape record lessons
- Have students sit near teacher (preferential seating)
- Use color coding to help the student organize desk, notes, and books
- Provide high contrast materials with limited visual clutter
- Give students a chance to pre-read before asking them to read aloud

Homework:

- Reduce homework, especially assignments requiring reading
- Provide a set of books/textbooks for student to keep at home
- Allow student to dictate answers to a parent, sibling, or tutor
- Allow typewritten homework

Suggestions for Instruction:

- Teach using all multisensory systems through all learning pathways: visual, auditory, kinesthetic, and tactile
- Break tasks down into smaller chunks
- Teach from easiest to most challenging material
- Systematically review concepts to enhance students' memory
- Teach phonemic awareness and letter knowledge, giving explicit instruction in sound identification, matching, segmentation, and blending
- Have students apply their decoding skills to increase fluent, automatic reading of text
- Have students process word meanings to develop an understanding of words and their uses as well as connections among word concepts (explicit vocabulary instruction)
- Make sure students understand what they are reading by frequently asking questions and having them stop and summarize as they read parts of the text
- Allow students to preview lessons (especially science and social studies) by reading ahead at home
- Teach students to compose writing in stages: generating and organizing ideas, initially with a group or partner; producing a draft; sharing ideas with others for the purpose of gaining feedback; revising, editing, proofreading, and publishing
- Explicitly teach students how to use graphic organizers to support understanding of concepts or to organize notes
- Use editing checklists

When reading is slow and laborious:

- Allow extra time for completing tests
- Shorten assignments
- Provide books on tape or an audiobook app
- Encourage students to preview reading to identify words they cannot pronounce
- Encourage students to discuss material with someone to enhance their comprehension

When students have a basic language problem:

- Encourage them to visualize the material and/or provide images, charts, maps, diagrams, etc.
- Allow for oral testing

When handwriting is laborious and barely legible:

- Allow students to use a computer for assignments
- Provide students with a copy of notes
- Allow students to record lectures
- Grade written work on content rather than form
- Provide time and guidance for proof reading, editing, and correcting

When students' oral responses are slow and labored:

- Allow prepared, short oral reports in class rather than instant, oral responses
- Accept phonological errors in oral responses without penalizing
- Allow the use of assistive technology such as Immersive Reader to support comprehension

Most commonly requested classroom accommodations:

- Untimed tests
- Reduced spelling list
- Oral reading only when prepared (reading out loud in class)
- Reduced homework load
- Grade on content, not spelling nor handwriting
- Reduced copying tasks
- Alternative assignments
- Avoidance or reduction of using essay tests
- Avoidance of multiple-choice questions due to the volume of reading required
- Class review sessions before tests

2. Statewide Assessment Accommodations

Students who have a documented diagnosis of dyslexia on file in accordance with Mississippi Code § 37-173-1 are afforded extended time accommodations for statewide assessments.

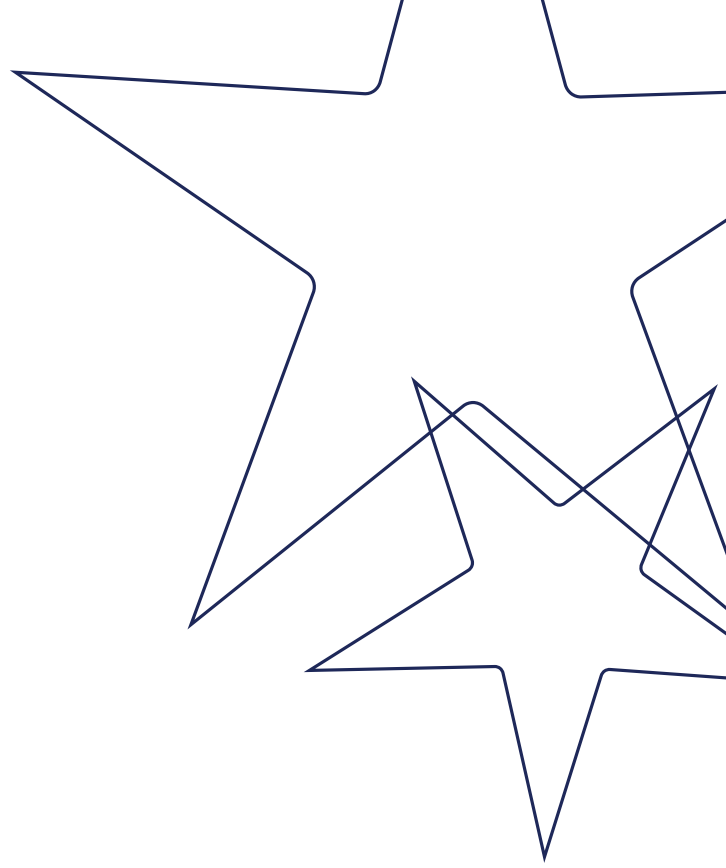
Mississippi Academic Assessment Program (MAAP)
Mississippi K-3 Assessment Support System (MKAS2)
American College Testing (ACT)
English Language Proficiency Test (ELPT)

#	Accommodation	MAAP*	MKAS2	ACT	ELPT
20/23	Extended time until the end of the school day	Yes	Yes	Yes	Yes
24	Administer the test over several sessions, specifying the duration of each session	YES	YES	Yes	Yes
25	Administer the test over several days, specifying the duration of each day's sessions	YES	YES	YES	YES

***Grades 3-8, EOC, Math, ELA, Science Grades 5 and 8, Biology I, and U.S. History**

***Grades 3-8, EOC, Math, ELA, Science Grades 5 and 8, Biology I, and U.S. History**

The MS Testing Accommodations for Students with Dyslexia form should be kept in the student's cumulative record as well as in the student's classroom.



Section 8: Special Populations and Comorbidity with Dyslexia

SECTION 8: Special Populations and Comorbidity with Dyslexia

Students with dyslexia may have additional barriers to overcome that may require special considerations and attention to ensure equal opportunity for success. They may also experience social and emotional challenges. All educators should be aware of these challenges and understand their relationship to dyslexia.

1. Dysgraphia

Dysgraphia is a nervous system problem that effects fine motor skills and is associated with impaired handwriting and sometimes spelling. This can interfere with learning to spell words in writing. Handwriting can be distorted, unclear, irregular, or inconsistent. It can occur alone or with dyslexia or with an oral and written language learning disability.

Typical Symptoms:

- Cramped grip, which may lead to a sore hand
- Difficulty spacing things out on paper or within margins (poor spatial planning)
- Frequent erasing
- Inconsistency in letter and word spacing
- Poor spelling, including unfinished words or missing words or letters
- Unusual wrist, body, or paper position while writing
- Labored handwriting

Supporting Students:

- Allow the student to use wide-ruled paper, graph paper or paper with raised lines to help with letter and word formation.
- Allow the student to use pencil grips or other writing aids to make writing more comfortable.
- Allow the student to use a computer to type written responses/ teach typing skills early.
- Acknowledge the condition and talk to the child about it to help them better understand it. *This allows them to take ownership of the condition and their learning.*
- Praise hard work and effort and offer positive reinforcement.
- Encourage stress relieving activities such as rubbing your hands together prior to writing. *This helps warm up fingers and get fine motor skills ready for the writing activity.*
- Allow the student to use a stress ball to improve hand-muscle strength and coordination.
- Use a highlighter to create lines to guide students with where to write as well as think about the letter form and size.

2. Dyscalculia

Dyscalculia is a disability with learning math concepts which makes it hard to understand and work with numbers. About half of students with dyscalculia also have reading issues so there is a strong connection with dyscalculia and dyslexia. It is estimated that 5 to 10 percent of people might have it.

Typical Symptoms:

- Trouble understanding concepts such as less than or more than
- Grasping the meaning of quantities or concepts like biggest and smallest
- Understanding the idea that numbers stand for a quantity
(*e.g., the numeral 5 is the same as the word five, and that these both mean five items*)

- Remembering/retaining and recalling basic math facts for addition, subtraction, multiplication, or division
- Counting money or making change
- Estimating time
- Judging speed or distance
- Understanding the logic behind math
- Difficulty with number sense or the procedural aspects of math even after repeated, lengthy practices
- Holding numbers in their head while solving problems
- Lining up numbers correctly
- Trouble understanding mathematical signs such as addition and subtraction
- Continuing to use fingers to count rather than using mental math
- Tending to be slower than their peers to perform calculations

Supporting Students:

- Math issues must be addressed separately from the other issue(s) that the student may have such as dyslexia
- Provide them with multisensory ways and manipulatives to deal with numbers
- Allow the student to write out a problem which may help them to see the relationships between the information or help them to organize information.
- Allow the student to draw the problem which may help visual learners to see relationships and understand concepts.
- Help the student to break multi-step math tasks into smaller subsets.
This will help them stay focused and see the connections in procedural problems.
- Use “real life” cues and physical objects to help the child manipulate the objects and make the concepts more concrete.
- Provide multiple opportunities for review.
This will keep skills fresh and allow students to build onto the next related concept.

3. Attention Deficit Hyperactivity Disorder (ADHD)

Attention Deficit Hyperactivity Disorder (ADHD) is a neurodevelopmental disorder that can cause above normal levels of hyperactivity and impulsive behaviors, or inattentiveness. According to the Center for Disease Control, there are three types of ADHD: predominantly, inattentive presentation, predominantly hyperactive-impulsive presentation, and combined presentation.

Typical Symptoms:

- 1. Inattentive Type** – which makes it hard to organize, finish tasks, pay attention to details, follow instructions or conversations, remain focused, or remember daily activities.
- 2. Hyperactive-Impulsive Type** – which causes difficulty sitting still for longer periods of time (for a meal, doing homework) inattentiveness, hyperactivity, and impulsivity.
- 3. Combined Type** – in which the person exhibits symptoms from both the inattentive and hyperactive-impulsive presentations are present.

Additional symptoms for the two categories: inattentiveness, and hyperactivity-impulsivity are listed below:

Inattentive:

- Makes careless mistakes in schoolwork, overlooks details
- Is easily distracted or sidetracked
- Has difficulty following instructions
- Does not seem to be listening when spoken to directly
- Has trouble organizing tasks and possessions
- Often fails to finish work in school or chores in the classroom or at home
- Often avoids or resists tasks that require sustained mental effort, including doing homework
- Often loses homework assignments, books, jackets, backpacks, sports equipment
- Daydreams often
- Forgets or loses things often

Hyperactive-impulsive:

- Often fidgets or squirms
- Has trouble staying in his/her seat
- Constant running, jumping, and climbing where it is inappropriate
- Has trouble playing quietly, talks too much
- Is extremely impatient, cannot wait for their turn/interrupts often
- Makes careless mistakes or takes unnecessary risks
- Always seems to be “on the go” or “driven by a motor”
- Talks excessively
- Blurts out answers before a question is completed
- Has trouble listening to directions
- Interrupts or intrudes on others’ conversations, activities, possessions
- Has trouble taking turns
- Has more accidents and injuries than others
- Has a hard time resisting temptation
- Has difficulty getting along with others

It is important to keep in mind that these behaviors can be exhibited by all children and a diagnosis is only for those students whose symptoms cause difficulties in both school and at home over an extended period of time.

Supporting Students:

Many children with ADHD are eligible to receive school services, such as special education services and accommodations. There are two laws that govern special services and make accommodations for children with disabilities:

- The Individuals with Disabilities Education Act (IDEA)
- Section 504 of the Rehabilitation Act of 1973

The support a child with ADHD receives at school depends on if they meet the eligibility requirements for one of two federal plans: an individualized education program (IEP) or a 504 Plan.

Classroom Supports for students diagnosed with ADHD:

- Encourage positive behaviors through a reward system or a daily behavior report card
- Provide specific organizational training for time management, planning, and organizing materials
- Keep classroom expectations consistent, clear, and concise and revisit as needed for reinforcement
- Limit proximity to distractions such as doors, windows, pencil sharpeners, high traffic areas, etc.
- Provide frequent and immediate feedback regarding both positive and negative behaviors
- Reward positive behaviors
- Provide opportunities for brain breaks
- Allow for flexibility within rules (such as providing them with a fidget toy or allowing them to stand when working)
- Break down work loads into smaller, more manageable chunks
- Offer alternatives to sitting in a chair, such as allowing the child to stand, using a balance buddy in their seat, or wobble stool, etc.

4. English Learners

English learners (EL) are students who speak one or more languages as their dominant language and are learning to speak English. For more information on identifying English learners in Mississippi, see the Mississippi English Learner Guidelines (Mississippi English Learner Guidelines) pages 13-17.

Dyslexia affects 1 in 5 humans, not just English readers. This means that students who are struggling to learn English may also be at risk for dyslexia. English learners are often missed in the identification of dyslexia. It may be assumed that because the student is learning the English language, that the cause of reading difficulties is due to the child's level of English language acquisition. While English is not as transparent as Spanish or German, it may not be the second language acquisition that is causing the struggle. There are multiple factors to consider when determining if an English learner student is having difficulty due to dyslexia including:

Has the student been provided with opportunities to learn reading skills in their native language? If the student has had limited or interrupted schooling or lack of opportunity to learn to read, this may be the cause of the reading difficulties as opposed to dyslexia.

Is the child provided with sufficient home support in learning English or learning to read? This can be due to multiple factors such as a parent's work schedule, or a parent's inability to read in any language. If this is the case, that lack of support should be addressed to determine its weight on the child's rate of progress in reading.

Does the child have the intellectual capability to learn to read at the same rate as his/her peers? Students with dyslexia have an average to above average IQ. If a student's IQ falls below this level, the struggle may be due to other cognitive disorders which should be investigated.

Is the child dealing with trauma that may affect his/her learning? This should be addressed with the parents and the school counselor when this is the case.

How long has the student been learning English? If the student is new to the language, difficulties may be due to needing more time to acquire English reading skills.

Typical Symptoms:

Some issues related to dyslexia are often the same issues faced by English learners (such as phonemic awareness and rapid naming) so it can be difficult to recognize signs of dyslexia in EL students. Typical symptoms may be present in both languages. While English learners may exhibit some signs of dyslexia, it is important to examine and assess the symptoms to determine if the cause of the difficulty is due to learning a new language or due to dyslexia or another reading disability.

- Reading well below the expected level for age
- Experience problems processing and understanding what he or she hears
- Difficulty finding the right word or forming answers to questions
- Problems remembering the sequence of things
- Difficulty seeing (and occasionally hearing) similarities and differences in letters and words
- Inability to sound out the pronunciation of an unfamiliar word
- Difficulty spelling
- Spending an unusually long-time completing tasks that involve reading or writing
- Avoiding activities that involve reading
- Difficulty reading, including reading aloud
- Slow and labor-intensive reading and writing
- Problems with spelling
- Mispronouncing names or words, or problems retrieving words
- Trouble understanding jokes or expressions that have a meaning not easily understood from the specific words (idioms), such as "piece of cake" meaning "easy"
- Spending an unusually long-time completing tasks that involve reading or writing
- Difficulty summarizing a story
- Trouble learning a foreign language
- Difficulty memorizing
- Difficulty doing math problems
- Trouble with phonemic awareness in their first language which can also cause learning letters and sounds in English to be difficult.

Although it can be difficult to identify dyslexia in children who are English Learners, it is essential that they are provided with all assessments, resources and services provided to all other students.

Supporting Students:

English learners struggling with dyslexia will need specific supports as determined by their dyslexia diagnosis as well as their level of language acquisition. This information should be found on the student's Language Service Plan. The supports may include but are not limited to:

- General accommodations/supports for students with dyslexia
- Best practices for supporting ELs in the classroom
(see Mississippi English Learner Guidelines Part Three: Instructional Strategies)

5. Gifted

In Mississippi, students who are identified as gifted are intellectually gifted. Gifted students who are identified as dyslexic, are often termed as twice exceptional - both intellectually gifted and learning disabled (as determined by an accepted standardized assessment). Gifted students are often overlooked when reading difficulties occur for multiple reasons).

Typical Symptoms:

Parents and teachers may fail to notice both giftedness and dyslexia. Dyslexia may mask giftedness, and giftedness may mask dyslexia. The International Dyslexia Association (IDA) lists several common characteristics of gifted students with dyslexia which include:

- Superior oral vocabulary
- Advanced ideas and opinions
- High levels of creativity and problem-solving ability
- Extremely curious, imaginative, and questioning
- Discrepant verbal and performance skills
- Clear peaks and valleys in cognitive test profile
- Wide range of interests not related to school
- Specific talent or consuming interest area
- Sophisticated sense of humor

Supporting Students:

- Audio Books
- Speech to Text
- Smart Pens
- Keyboarding
- Notes or partial notes provided
- Taking pictures of the notes on the board
- Provide alternative access to content and demonstration of knowledge
- Provide specific, systematic, direct reading intervention

6. Speech

Students with speech impairments may have difficulty with articulation (the production of speech sounds), fluency (the rhythm and flow of speech) or voice (the quality of pitch, resonance, or loudness). Students with language impairments may have difficulty understanding and being understood through communication; verbal, nonverbal, and written.

Typical Symptoms:

- Students may have deficits in the following areas:
 - Phonological awareness
 - Phonological memory
 - Phonological retrieval
 - Phonological production
- Language that extends to vocabulary and grammatical development

Supporting Students:

- Support oral language skills in sentence structure and syntax to help develop understanding written words.
- Support vocabulary development to assist the child in determining if their decoding was accurate.
- Work collaboratively with the speech language pathologist to reinforce speech language goals and classroom content goals.

7. Social Emotional Learning

A wide range of social and emotional characteristics can emerge in children with dyslexia as they struggle to read in a traditional setting. While we tend to think of dyslexia as a reading disorder, it also influences a child's social and communication skills. Since it can interfere with being able to retrieve words quickly, dyslexia can hinder a child's ability to interact with peers in a typical way and respond appropriately in social situations.

Typical Symptoms:

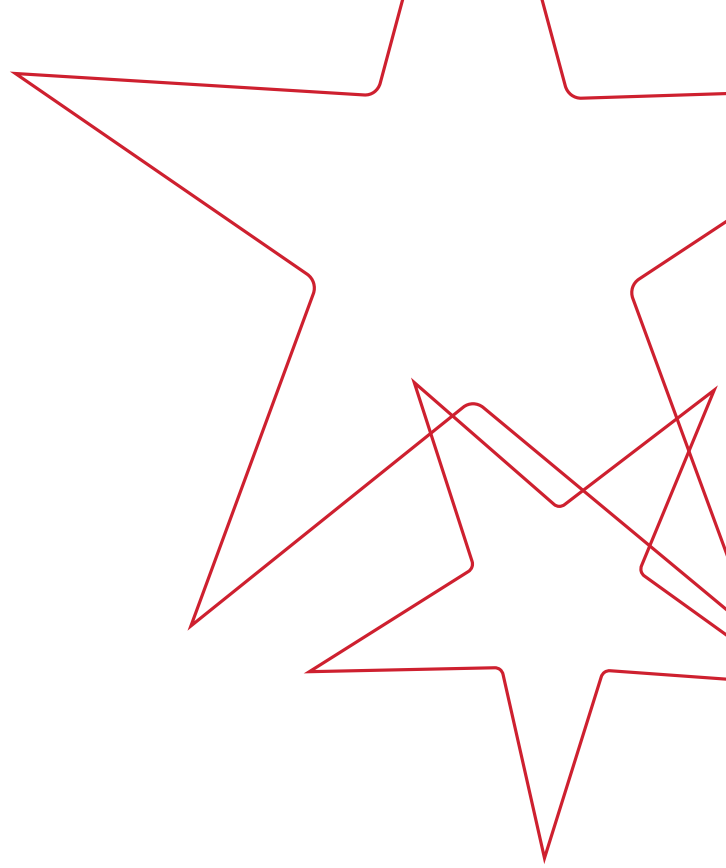
- Shows frustration and anxiety, as the child realizes he or she is lagging behind his or her peers
- Low self-esteem or lacking in confidence
- Exhibits health or behavior problems, emotional difficulties or wants to avoid school
- Avoids reading aloud

Supporting Students:

Understanding the characteristics that may emerge as a result of dyslexia may help to remediate some of the additional struggles related to the disability, but also may help us understand those who thrive despite (or because of) being identified with dyslexia.

Helping your child understand their learning disorder can give them the tools they need to manage their dyslexia – both academically and emotionally.

- Talk to the student about the specific difficulties that they may be experiencing: *"You know how you have a hard time reading signs, or copying notes from the board? That's dyslexia."*
- Acknowledge their struggles and praise hard work – even if the results aren't perfect: *"I understand how challenging that reading assignment was. I was so proud of how hard you worked on it."*
- Help the student identify specific strengths: *"That drawing you made of our family had such vivid colors and details. You're a great artist."*
- Combat negative self-talk: If your child starts saying things like *"I'm just stupid,"* don't ignore it, but encourage him/her not to be too hard on themselves.



Section 9: **Information for Parents and Families**

SECTION 9: INFORMATION FOR PARENTS AND FAMILIES

The parent or guardian may not be the first person to notice characteristics of dyslexia. Many times, it is the professional that is working with your child on a daily basis. This professional may come to you with concerns about how your child is progressing. It is important to listen to their concerns and consider if you may be seeing some of these same characteristics at home. This handbook can guide you through this process.

In some cases, you may want to reach out to your pediatrician for advice. Here are a few conversation starters that you can use with your pediatrician:

Conversation Starters for Pediatricians

1. My child has started struggling in school and his teacher wants to schedule a meeting...
2. Everything used to be fine but now that my child is in third grade, he is falling behind...
3. I have noticed that my daughter has always been behind her classmates but now it is affecting her classwork...

Questions to ask Diagnosticians

- How long have you been testing children for dyslexia?
- Where did you get trained to do this?
- What does the term Dyslexia mean to you?
- Will you use the term Dyslexia in your report? Why or why not?
- What are some of the tests you will use?
- What do you charge for testing a child?
- What is the process like? How long will it take?
- Will you meet with us when the testing is done and explain the results?
- Will you be able to refer us to an appropriate and qualified interventionist with experience in performing an evidenced-based program for dyslexia?
- How do you know the interventionist is qualified?
- Will you provide a written report as part of your fee? What will be in that report?
- If my child has dyslexia, will your recommendations section be written with legal terminology that will make it easy for my child to get the appropriate supports?
- Will your report include recommendations for accommodations such as assistive technology to help access reading and writing materials?

APPENDICES - APPENDIX "A"

Elementary School Dyslexia Checklist For Teachers

Instructions: Teachers complete this form to assist with the decision-making process of intervention selection and implementation.

STUDENT:

TEACHER:

DATE:

ACADEMIC POTENTIAL		
YES	NO	
		1. Does the student seem to have the academic ability to develop reading, writing, and spelling skills?
		2. Are the student's reading, spelling, or writing skills below what you would expect based on his/her academic potential?
		3. Does the student have a history of inconsistent success when completing assessments and/or assignments related to reading, writing, or spelling?
READING		
		4. Does the student have difficulty acquiring phonological processing skills such as blending, segmenting, rhyming, and manipulating sounds?
		5. Does the student have difficulty remembering a sequence of unfamiliar sounds?
		6. Does the student have difficulty effectively recalling basic sight words?
		7. Does the student have difficulty sounding out words?
		8. Does the student comprehend text when read aloud by others?
		9. Does the student lack fluency when reading aloud?
ALPHABET AND SPELLING		
		10. Does the student have difficulty writing the letters of the alphabet in sequence without a model?
		11. Does the student have difficulty naming the vowels?
		12. Does the student have difficulty using the correct short vowels in spelling words?
		13. Does the student have difficulty with spelling?
		14. Does the student make frequent spelling errors that involve changing the order of the letters within the word?
HANDWRITING SKILLS		
		15. Is the student's handwriting often illegible or messy?
		16. Does the student have problems with spatial orientation (e.g., before/after, left/right, top/bottom)?
OTHER		
		17. Does the student have problems with organization or memory?
		18. Does the student have problems with spatial orientation (e.g., before/after)?
		19. Does the student have difficulty "finding the right word" or seem to hesitate when trying to answer direct questions?

APPENDICES - APPENDIX "B"

Middle and High School Dyslexia Checklist For Teachers

Instructions: Teachers complete this form to assist with the decision-making process of intervention selection and implementation.

STUDENT:

TEACHER:

DATE:

ACADEMIC POTENTIAL		
YES	NO	
		1. Does the student seem to have the academic ability to develop reading, writing, and spelling skills?
		2. Are the student's reading, spelling, or writing skills below what you would expect based on his/her academic potential?
		3. Does the student have a history of inconsistent success when completing assessments and/or assignments related to reading, writing, or spelling?
READING		
		4. Does the student have difficulty decoding words with multiple prefixes and suffixes?
		5. Does the student have difficulty remembering a sequence of unfamiliar sounds?
		6. Does the student have difficulty effectively recalling basic sight words?
		7. Does the student have difficulty sounding out words?
		8. Does the student comprehend text when read aloud by others?
		9. Does the student lack fluency when reading aloud?
ALPHABET AND SPELLING		
		10. Does the student have difficulty spelling?
		11. Does the student often spell the same word differently in an assignment?
		12. Does the student have difficulty using the correct short vowels in spelling words?
		13. Does the student make frequent spelling errors that involve changing the order of the letters within the word?
HANDWRITING SKILLS		
		14. Does the student avoid writing?
		15. Is the student's handwriting often illegible? (letter formation, spacing)
		16. Does the student have problems summarizing and outlining? (process, organization)
OTHER		
		17. Does the student have problems with organization or memory?
		18. Does the student have problems with spatial orientation (e.g., before/after)?
		19. Does the student have difficulty "finding the right word" or seem to hesitate when trying to answer direct questions?

APPENDICES - APPENDIX "C"

Parent Reading Information Questionnaire

Instructions: Parents complete this form to assist the teacher in determining classroom supports and instruction, intervention selection, implementation, and resources needed to ensure successful outcomes for your child.

STUDENT:

TEACHER:

DATE:

ACADEMIC POTENTIAL		
YES	NO	
		Has anyone in your family experienced learning problems? If yes, explain.
		Are you concerned about your child's schoolwork? If yes, explain.
		Does your child receive any special instruction at school? If yes, explain.
		Does your child have difficulty following directions? If yes, explain.
		Has your child ever repeated a grade? If yes, what grade?
		Has your child had a speech or language problem? If yes, explain.
		Does your child need excessive amounts of assistance with homework?
		Does your child spend an extraordinary amount of time completing homework?
		Does your child seem to struggle in reading, writing, and spelling more than other subjects?
		Does your child like to be read to but does not want to read to you?
		Does your child have difficulty with writing, copying, and with spelling?
		Has your child ever been critically or chronically ill? If yes, explain.
		Does your child have any physical problems that may interfere with learning? If yes, explain.
		Is your child currently taking any medication? If yes, explain.

APPENDICES - APPENDIX "D"

MTSS Professional Development Request Form

BASIC INFORMATION

Contact Person/Title:

Today's Date:

School/District:

Contact Person Phone #:

Contact Person Email:

Anticipated Number Of Participants:

Intended Audience: (Job Role And Grade Taught)

Proposed Dates to be Held (list 3)

Proposed Date #1:

Time Begin:

Time End:

Proposed Date #2:

Time Begin:

Time End:

Equipment Provided:

Proposed Date #3:

Time Begin:

Time End:

AREAS OF PROFESSIONAL DEVELOPMENT ACTIVITIES (please check all that apply)

MTSS (Academic/Behavior)

- MTSS Overview and Components
- Tier I Strategies and Supports
- Tier II Supplemental and/or Small Group Strategies
- Tier III Intensive Intervention Strategies
- Documentation Packet Information/Completion
- Intervention Supports for English Learners
- Implementation of Intervention Supports and Distance Learning
- Individual Reading Plans (IRPs)
- Other:

Dyslexia

- MDE and Legislative Updates
- Public School Requirements
- Accommodations on State Assessments
- Elementary Strategies to support students with dyslexia and/or other related reading disorders
- Secondary Strategies to support students with dyslexia and/or other related reading disorders

Please briefly describe how the professional development activity will be utilized to improve the instructional process and/or effectively prepare teachers to meet challenging State or local academic content standards and student academic achievement standards. What data was used to determine this need, and what does the data say about your students' academic performance? *(Please Answer Below)*

Please provide specific details describing your perception of the topics and content that should be covered during this training/workshop. (Session Objectives)

APPENDICES - APPENDIX “E”

FREQUENTLY ASKED QUESTIONS

1. Parents

Q: My child has a dyslexia diagnosis. What do I do now?

A: Parents should share a copy of the dyslexia diagnosis with the school. The school should review the diagnosis and develop a plan for how they will support your child.

Q: My district does not have a dyslexia therapist. What do I need to do?

A: Parents can visit the www.altaread.org website to locate a dyslexia therapist in their area. The school is required to provide appropriate interventions for ALL students. This intervention may be provided in the form of therapy.

Q: What components should be considered when determining appropriate instruction/interventions for my child with dyslexia?

A: The Teacher Support Team should review the dyslexia evaluation report to determine the greatest area(s) of need and design interventions to meet the student’s needs.

Q: How long and how often a week should my child receive therapy/specific instruction or intervention?

A: Students with dyslexia progress when they receive intense reading remediation through therapy which is consistent and adequate duration. Dyslexia therapy is designed to be delivered 3 to 5 days per week. All students with dyslexia are different. Everyone develops and learns at his/her own pace. You are best advised to talk with your professional about duration of therapy and how your child is responding to intervention and achieving goals. The professional will provide you with an update of progress based on data from the therapy sessions. Depending on your child's age, grade, success in school, interests, and desires, etc., the amount of therapy could vary.

Q: What kind of technology do we need?

A: Dyslexia therapy does not require any technology. It is typically delivered in a face-to-face setting. However, the pandemic has provided therapists with the opportunity to begin providing therapy virtually. In this situation a laptop with a microphone and video camera would be required to complete virtual therapy.

Q: What qualifications should I be looking for in the dyslexia service provider?

A: According to MS Code § 37-173-1 a dyslexia therapist means a professional who has completed training in a department approved Orton-Gillingham based dyslexia therapy training program attaining an AA license in dyslexia therapy or a professional participating in a State approved dyslexia therapy training program to attain a AA license in dyslexia therapy. There are also highly qualified professionals that have been trained in other evidence-based programs that are qualified to work with students with dyslexia.

Q: My child failed the dyslexia screener given at school. What does that mean?

A: The dyslexia screener provides information to the school on which students are showing characteristics of dyslexia. This information is used as teachers develop early interventions to support these students. Parents should be provided strategies to support their children at home.

Q: In order to receive services from my school, does my child have to be evaluated by the school or can I seek an outside evaluation?

A: Many parents seek an outside evaluation of dyslexia. The school is required to accept that diagnosis by a licensed psychometrist, psychologist, or speech language pathologist and determine appropriate interventions and supports for each student.

Q: What do I do if I think my child has dyslexia?

A: Contact your child's school and request a Teacher Support Team meeting. The TST is a problem-solving team that consists of parent, teacher, administrator, and others, who look at the available data and discuss the child's academic performance. This team will decide what appropriate interventions should be put in place to address the student's deficits.

Q: If I'm interested in obtaining a dyslexia scholarship for my child, what steps do I need to take?

A: The parent or legal guardian shall be a resident of the state of Mississippi and must select the special purpose nonpublic school and apply for admission as well as apply for the dyslexia scholarship utilizing the application form. The diagnosis of dyslexia must be provided as part of the application (a statement of characteristics of dyslexia differs from a diagnosis).

Q: My child didn't have problems learning to talk; why is learning to read hard?

A: Talking, or oral language, as speech-language pathologists refer to it, is innate to humans as a species. We have the natural capabilities to understand and use language. Reading, on the other hand, is a cultural phenomenon (there are still societies today who exist with a purely oral tradition), and therefore it is not innate to a child's biological makeup. Without the development of written language, dyslexia would not exist.

2. Teachers/Schools/Districts

Q: If a student is diagnosed with dyslexia, does he/she automatically receive special education services?

A: No, each local school district shall make an initial determination whether a student with dyslexia qualifies under the Individuals with Disabilities Education Act (IDEA) to receive services and funding under the provisions of the IDEA. If the student is ineligible for special education services, then the local district may decide if a 504 Plan is warranted.

Q: If a student does not qualify for special education services, yet has a dyslexia diagnosis, what services, if any, will he/she receive?

A: Students with a dyslexia diagnosis are provided services in the general education setting through the three-tier model and the intervention process. Schools may utilize the information that is provided in the diagnosis documentation to help target interventions.

Q: Who is qualified to diagnose a child with dyslexia?

A: Dyslexia evaluations may be administered by licensed professionals including, psychologists, psychometrists, or speech language pathologists.

Q: Is the school responsible for evaluating a student for dyslexia?

A: No, however each local school district shall adopt a policy to ensure that students will be screened by a screener approved by the State Board of Education in the spring of Kindergarten and the fall of Grade 1. The screener must consist of phonological and phonemic awareness, sound/symbol recognition, alphabet knowledge, decoding skills, encoding skills and rapid naming. If a student fails the screener, the parent or legal guardian will be notified. The school district, in its discretion, may perform a comprehensive dyslexia evaluation, however, this is not required and is a decision to be made by the district.

Q: What schools are considered special purpose, non-public and what qualifies a school to be approved for the scholarship?

A: A list of the special purpose nonpublic schools can be found on the MDE dyslexia website at <https://mdek12.org/OAE/OEER/Dyslexia>.

The special purpose nonpublic schools must be accredited by a state, regional, or national accrediting organization. The school must provide to the MDE all documentation required for a student's participation, including schedules. It must be academically accountable to the parent for meeting the educational needs of the student by providing a written explanation of the student's progress, at least annually. The school's personnel must consist of an administrator or director with additional training in the characteristics of dyslexia, a dyslexia therapist licensed by the MDE, or a therapist-in-training in an MDE approved dyslexia therapy graduate program. There must be licensed elementary teachers under the supervision of a State Department licensed dyslexia therapist.

Q: How much money is provided, if awarded the scholarship?

A: The award amount is determined on a year-by-year basis with a proportionate amount generated under federal and state programs. The money goes directly to the special purpose nonpublic school.

Q: Should all students be screened for dyslexia?

A: Yes, all students will be screened in kindergarten and again in first grade.

Q: What do I, as the teacher, need to be looking for in my struggling students?

A: Teachers should be aware of the common characteristics of dyslexia. As teachers are reading with students, they need to be listening for some key dyslexia indicators, which can be found in this handbook. Many teachers are the first professionals that will identify dyslexia characteristics in students.

Q: Does a student have to have failing grades in order to be referred for a dyslexia evaluation?

A: No, failing grades should not be the only indicator when making the decision to refer a student for a dyslexia evaluation. Multiple data points should be considered when making this decision.

Q: How do I refer a student for an evaluation?

A: A Teacher Support Team meeting should be conducted to review all available data on a student that may need a dyslexia evaluation referral.

Q: Can a struggling student with good grades be referred for a dyslexia evaluation?

A: Yes, many students with dyslexia have mastered strategies that help them to be successful in the classroom. Multiple data points should be reviewed when making this decision.

Q: Once a student receives a dyslexia diagnosis, what is the responsibility of the school/district in regard to this diagnosis?

A: Each local school district shall develop interventions and strategies to address the needs of a student diagnosed with dyslexia and provide the necessary accommodations, as needed, to enable the student to achieve appropriate educational progress allowing the student to become college and/or career ready upon graduation.

Q: My school/district does not have a dyslexia therapist. What can I do to help?

A: Teachers should be familiar with appropriate strategies/accommodations/ modifications for students with dyslexia. This will ensure that students in the classroom are receiving appropriate instruction for the student's overall success. As mandated by the state, all school personnel will be required to participate in dyslexia training. This is free training that will provide information to add to your teacher toolbelt.

Q: Is it possible for a student with dyslexia to struggle in mathematics?

A: It is possible for a student with dyslexia to struggle in his/her math class. A student with dyslexia may have difficulty with math facts, multi-step problems, and directionality. Math teachers may provide accommodations in the general education classroom. Continued communication with your child's math teacher is recommended.

Q: If a student is dyslexic does that mean he/she also has Dyscalculia, Dysgraphia, or Attention Deficit Disorder?

A: An individual can have more than one learning or behavioral disorder. Although disabilities may co-occur, one is not the cause of the other. In various studies 50% of those diagnosed with a learning or reading disability have also been diagnosed with ADHD.

Q: How does a student with dyslexia make it to middle school or high school before the signs of dyslexia are noticed?

A: Because students with dyslexia have an average or above average IQ, these students are outstanding at compensating for weaknesses. Sometimes as the work becomes more difficult and takes more time to complete, older students will begin to fall behind where they have not fallen behind before.

3. General Questions

Q: How many people are affected by dyslexia? How common is it?

A: Dyslexia is thought to be one of the most common language-based learning disabilities. It is the most common cause of reading, writing, and spelling difficulties. Of people with reading difficulties, 70-80% are likely to have some form of dyslexia. It is estimated that between 5-10% of the population has dyslexia, but this number can also be as high as 17%. The symptoms of dyslexia range from mild to severe. Because dyslexia may not be recognized and diagnosed in some individuals, they do not receive the necessary treatment; others may not disclose that they are diagnosed. These mitigating factors make the prevalence of dyslexia difficult to precisely determine.

Q: When was dyslexia first identified?

A: The description of "dyslexia" was first used by a German ophthalmologist, Rudolf Berlin, when he examined a patient who suffered difficulty in learning to read and write but showed normal intelligence and physical ability. Others described this same phenomenon around this time period, in the 1880s and 1890s, without using the "dyslexia" description. A British ophthalmologist, James Hinshelwood published a series of medical papers on the subject. In 1925, neurologist Samuel T. Orton had a patient who could not read, similar to stroke victims who lose their ability to read. In contrast, the patient had no brain damage, so Orton started to study different causes of reading difficulties unrelated to brain damage and brought these studies to broader attention. More extensive dyslexia research has been conducted since the 1950s.

Q: Are some people more likely to have dyslexia?

A: Dyslexia occurs in children with all intelligence levels. Frequently, people with dyslexia have above average ability. The incidence in males and females is approximately equal. Dyslexia is found all over the world, and in all socioeconomic and ethnic groups. However, dyslexia does have a tendency to run in families.

Q: Are boys more likely to have dyslexia than girls?

A: Although it used to be thought that more boys experienced dyslexia than girls, current research has indicated that dyslexia occurs in approximately equal proportions. One possible explanation of this myth is that boys may be more likely to act out when experiencing difficulty, while girls may try to hide their trouble. Therefore, more boys would be recognized and diagnosed with dyslexia, falsely inflating the statistics.

Q: Are there more people with dyslexia now than there were previously?

Experts say that there are not more people with dyslexia than in previous times, but more people are correctly identified with dyslexia due to increased knowledge about learning disabilities.

Q: What are common signs and symptoms of dyslexia?

A: Aside from difficulty with pre-literacy learning like rhyming and letter recognition, the most common sign is when a child fails to learn to read, and this failure is unexpected based on his or her other abilities. Letter and number reversals past age 7 or 8 are a common warning sign. Children with dyslexia may also experience hardship copying from the board or a book and they may exhibit disorganization in their writing. Children with dyslexia may also appear uncoordinated and have difficulty in an organized-game setting. Symptoms may also manifest in auditory problems—the child with dyslexia may not be able to remember all of what he or she hears, especially sequences or multi-faceted commands. Oftentimes, the child with dyslexia may speak missing parts of words or sentences or use the wrong word entirely. They have normal intelligence and often know what they want to say but have trouble saying it. There are also emotional symptoms. The child may become embarrassed, lose his or her interest in school, and appear lazy when in fact this is a symptom of not wanting to fail. Any of these symptoms may be present in various levels of severity. The variance in signs and symptoms is the reason why many children with dyslexia and other learning disabilities are never diagnosed.

Q: How is dyslexia diagnosed?

A: Dyslexia can be difficult to diagnose, but an early sign is that a child is not learning to read as would be expected. Language difficulties can also be an early indicator. The basic procedure is to gauge an individual's strengths and weaknesses in oral language, reading, spelling, and writing through standardized tests or non-standardized assessments. A child who is not performing at his or her age/grade level despite proper instruction may have dyslexia. Other tests examine the steps of the reading process to further determine where

the strengths and weaknesses lie and where to begin remediation. It is important to determine how one processes or understands information both orally and in text, as well as how he or she expresses information verbally and in writing. Some of the common tests administered are:

- Wechsler Intelligence Scale for Children-Third Edition (WISC-III)
- Kaufman Assessment Battery for Children (KABC)
- Stanford-Binet Intelligence Scale
- Woodcock-Johnson Psycho-Educational Battery
- Peabody Individual Achievement Tests-Revised (PIAT)
- Wechsler Individual Achievement Tests (WIAT)
- Kaufman Tests of Educational Achievement (KTEA)
- Bender Gestalt Test of Visual Motor Perception
- Beery Developmental Test of Visual-Motor Integration
- Motor-Free Visual Perception Test
- Visual Aural Digit Span Test (VADS)
- Test of Auditory Perception (TAPS)
- Test of Visual Perception (TVPS)
- Peabody Picture Vocabulary Test-Revised
- Expressive One-Word Picture Vocabulary Test
- Test for Auditory Comprehension of Language

Q: Is there a "cure" for dyslexia?

A: There is no cure because dyslexia is not a disease. With support, proper instruction, and hard work, many people with dyslexia are able to succeed academically and in their later lives. Dyslexia is a life-long condition, but intervention can have a positive effect on a person's symptoms and outcomes. After an evaluation determines the specific area of difficulty and disability, it is very important that the child's school and/or instructor are prepared to help implement a specific plan for intervention. There are many specific reading approaches that rely on a multisensory experience to strengthen the child's weaknesses while building on his/her strengths.

Q: Is it ever too late to get help for dyslexia?

A: No. People with dyslexia can be taught strategies that can be applied throughout their lifetime. Programs involving multisensory structured language techniques have been shown to help adults as well as children. Early intervention is better, but intervention at any time can be effective.

APPENDICES - APPENDIX "F"

GLOSSARY OF TERMS

504 Plan- a formal plan that schools develop to give children with disabilities the support they need. This process covers any condition that limits daily activities in a major way.

Accommodation – an adaptation that helps a student overcome or work around a disability.

Attention Deficit Hyperactivity Disorder (ADHD) - a neurodevelopmental disorder that can cause above normal levels of hyperactivity and impulsive behaviors, or inattentiveness.

Alphabet Knowledge - the ability to automatically recognize and name the 26 lowercase and 26 uppercase letters with ease and accuracy.

Comprehension - understanding the intended meaning of language.

Core Instruction - the curriculum and instructional practices that are provided to ALL students in the general education setting. This is what we refer to as Tier I High Quality Instruction.

Decoding - to translate words, word parts, or nonwords into their corresponding pronunciation.

Diagnostic Assessment - assessments used to measure current skills and knowledge, often for the purpose of educational planning.

Differentiated Instruction - varying educational practices to meet the needs of individual students.

Dysgraphia - a nervous system problem that affects fine motor skills and is associated with impaired handwriting and sometimes spelling.

Dyslexia-a specific learning disability that is neurological in origin. It is characterized by difficulties with accurate and/or fluent word recognition and by poor spelling and decoding abilities. These difficulties typically result from a deficit in the phonological component of language that is often unexpected in relation to other cognitive abilities and the provision of effective classroom instruction. Secondary consequences may include problems in reading comprehension and reduced reading experience that can impede the growth of vocabulary and background knowledge.

Dyscalculia - a disability learning math concepts which makes it hard to understand and work with numbers.

Encoding - to translate spoken language into print, spelling.

Evaluation - procedures used to make judgments or appraisals.

Explicit, Direct Instruction - the overt teaching and modeling of the steps and processes needed to learn and apply new knowledge. Explicit, direct instruction targets the specific needs of the students without presuming prior skills or knowledge.

Fluency - the ability to read the words in text effortlessly and efficiently (automaticity) with meaningful expression that enhances the meaning of the text (prosody).

Individualized Education Program - a written document that is developed, reviewed, and revised in accordance with IDEA 2004 that outlines the special education and related services specifically designed to meet the unique educational needs of a student with a disability.

Individualized Instruction - instruction that is designed to meet the specific needs of the student in a small group setting. Individualized instruction is intensive and highly concentrated and focuses on the student's primary deficit area(s) and the instructional delivery necessary to assist students in, maximizing student engagement in the process of learning.

Individuals with Disabilities Education Act (IDEA) - the law that outlines rights and regulations for students with disabilities in the U.S. who require special education services.

Intervention - activities designed to improve or remediate performance in a given area.

Learning disabilities - a disorder in one or more of the basic psychological processes in understanding or using language, spoken or written, that may manifest itself in the imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations.

Modification - an adaptation to instruction or the administration of an assessment that changes, lowers, or reduces performance expectations for demonstration of a learning outcome.

Morphological Awareness - awareness of the semantically meaningful units and structure of words.

Multisensory Instruction - instruction that incorporates the simultaneous use of two or more sensory pathways (visual, auditory, kinesthetic, and tactile) during teacher presentations and student practice.

Phonemic Awareness - enables a student to detect, segment, blend, and manipulate sounds in spoken language

Phonics - a systematic process for teaching sound-symbol relationships and their use in reading and spelling words.

Phonological Awareness - the ability to recognize and manipulate the sound system in spoken language; encompasses the entire continuum of skills related to the awareness of the phonological structure of language.

Progress Monitoring - efficient, frequent, dynamic assessment of targeted skills to examine student growth and examine effectiveness of instruction.

Rapid Naming - or rapid automatized naming (RAN) is the ability to quickly name aloud a series of familiar items (colors, objects, letters, or numbers).

Response to Intervention - a multi-tiered decision-making process for providing effective instruction and intervention based on students' performance and progress.

Screener/Screening Assessment - an efficient assessment given to all students to identify students who are at-risk. A screener is not equivalent to an evaluation or diagnosis.

Systematic Instruction - sequential, cumulative instruction that follows a logical plan and progresses from easiest to most complex with careful pacing to ensure students successfully master each step in the process. Systematic instruction includes scaffolded support for accomplishing each learning step by breaking down complex skills into manageable learning steps and providing temporary supports to control the level of difficulty as students gain mastery.

Vocabulary - words understood and used when listening, speaking, reading, and writing.

Word Recognition - the ability of a reader to recognize written words correctly and with limited effort.

APPENDICES - APPENDIX “G”

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