THE DYSLEXIA HANDBOOK

THE DYSLEXIA HANDBOOK
Procedures Concerning Dyslexia and Related Disorders
2021 Update

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Acknowledgments

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Dedication

The 2018 Dyslexia Handbook: Procedures Concerning Dyslexia and Related Disorders was dedicated in honor of Geraldine “Tincy” Miller in recognition of her tireless work on behalf of all Texas children with dyslexia.

Preface

In the state of Texas, students who continue to struggle with reading, despite appropriate or intensified instruction, are provided organized systems of reading support. Some students struggle during early reading acquisition while others do not struggle until the later grades, even at the postsecondary level. Here they face more complex language demands, for example reading textbooks, academic texts, and

- TEC §38.0031 requires the agency to establish a committee to develop a plan for integrating technology into the classroom to help accommodate students with dyslexia.
- TEC §42.006(a-1) requires school districts and open-enrollment charter schools to report through the Texas Student Data System (TSDS) Public Education

I. Definitions and Characteristics of Dyslexia

The student who struggles with reading and spelling often puzzles teachers and parents. The student displays ability to learn in the absence of print and receives the same classroom instruction that benefits most children; however, the student continues to struggle with some or all of the many facets of reading and spelling. This student may be a student with dyslexia.

Texas Education Code (TEC) §38.003 defines dyslexia and related disorders in the following way:

> "Dyslexia" means a disorder of constitutional origin manifested by a difficulty in learning to read, write, or spell, despite conventional instruction, adequate intelligence, and sociocultural opportunity.
>
> "Related disorders" include disorders similar to or related to dyslexia, such as developmental auditory imperception, dysphasia, specific developmental dyslexia, developmental dysgraphia, and developmental spelling disability.

TEC §38.003(d)(1)-(2) (1995)
http://www.statutes.legis.state.tx.us/Docs/ED/htm/ED.38.htm#38.003

The International Dyslexia Association defines "dyslexia" in the following way:

> 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 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 growth of vocabulary and background knowledge.

Adopted by the International Dyslexia Association Board of Directors,
November 12, 2002

Students identified as having dyslexia typically experience primary difficulties in phonological awareness, including phonemic awareness and manipulation, single-word reading, reading fluency, and spelling. Consequences may include difficulties in reading comprehension and/or written expression. These difficulties in phonological awareness are unexpected for the student's age and educational level and are not primarily the result of language difference factors. Additionally, there is often a family history of similar difficulties.

The following are the primary reading/spelling characteristics of dyslexia:

- Difficulty reading words in isolation
- Difficulty accurately decoding unfamiliar words
- Difficulty with oral reading (slow, inaccurate, or labored without prosody)
- Difficulty spelling

It is important to note that individuals demonstrate differences in degree of impairment and may not exhibit all the characteristics listed above.

The reading/spelling characteristics are most often associated with the following:

- Segmenting, blending, and manipulating sounds in words (phonemic awareness)
- Learning the names of letters and their associated sounds

- Reliance on listening rather than reading for comprehension

Middle School and High School

Many of the previously described behaviors remain problematic along with the following:

- Difficulty with the volume of reading and written work
- Frustration with the amount of time required and energy expended for reading
- Difficulty reading fluently (e.g., reading isslow, inaccurate, and/or without expression)
- Difficulty decoding unfamiliar words in sentences using knowledge of phonics
- Difficulty with written assignments
- Tendency to avoid reading (particularly for pleasure)
- Difficulty learning a foreign language

Postsecondary

Some students will not be identified as having dyslexia prior to entering college. The early years of reading difficulties evolve into slow, labored reading fluency. Many students will experience extreme frustration and fatigue due to the increasing demands of reading as the result of dyslexia. In making a diagnosis for dyslexia, a student's reading history, familial/genetic predisposition, and assessment history are critical. Many of the

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II. Screening

Overview of Chapter II

Research continues to support the need for early identification and assessment (Birsh, 2018; Sousa, 2005; Nevills & Wolfe, 2009). The rapid growth of the brain and its responsiveness to instruction in the primary years make the time from birth to age eight a critical period for literacy development (Nevills & Wolfe, 2009). Characteristics associated with reading difficulties are connected to spoken language. Difficulties in young children can be assessed through screenings of phonemic awareness and other phonological skills (Sousa, 2005). Additionally, Ed

identified related disorders. As a result, the focus of this section is on screening instruments for dyslexia and reading difficulties.

It is important that screening instruments be accurate and comprehensive; however, they need not be as comprehensive as an extensive individualized evaluation. With this in mind, various types of instruments that meet the criteria below could be used to screen for dyslexia.

In developing the criteria for the kindergarten and grade 1 screening instruments for dyslexia and other reading difficulties, it was important to differentiate between the skills and behaviors appropriate at each grade level. Additionally, with a sizable English Learner (EL) population in Texas, it was essential that Spanish

Screener Criteria

Regardless of the primary language of the student, instruments used to screen for dyslexia and other reading difficulties must address the skills in Figure 2.2 below.

Administration of Screening Instruments

Who May Administer the Dyslexia Screener

A district or charter school must ensure that appropriately trained and qualified individuals administer and interpret the results of the selected screening instrument. Please note that an educational aide is not

the identification of dyslexia more challenging than identifying other forms of disability.

Second, it is important to keep the definition and goals of screening in mind. The purpose of screening is to differentiate a smaller set of individuals who may be at risk for dyslexia. Screening, by definition, should never be the final determination of whether a student has dyslexia. Therefore, screening tools must be brief, efficient, and cost effective. Subsequent consideration of other data and information with the smaller group is then used to determine next steps. However, it is key to remember that "screening" represents the initial step in the process. Dyslexia referral and identification under IDEA must be individualized and based on multiple pieces of information, including results of the screening.

As with any evaluation, it is important that schools administer and interpret the screening instrument with fidelity. Screening tools use criterion-referenced criteria to establish cut points derived by the publisher of the tool. Cut points are used to group students into categories (e.g., at risk or not at risk) based on the results of the screening tool. Districts and charter schools must adhere to the cut points established by the published screening instrument.

In general, students scoring below the publisher-determined cut point are considered "at risk" for dyslexia, while those who score above the cut point are considered "not at risk" for dyslexia. However, it is important to realize that risk falls on a continuum and there will always be false positives (students who screen at risk when they are not) and false negatives (students who screen not at risk when they are). Consequently, continual progress monitoring and an ongoing review of data is important. Any student may be referred for a full individual and initial evaluation under IDEA, at any time, regardless of the results of the screening instrument.

Students falling well below the cut point have a much higher probability of being at risk for dyslexia while students scoring well above the cut point have lower probability of being at risk for dyslexia. The decision for what to do next is easiest for students whose scores fall at the extreme ends of the continuum. Students falling well above the cut point can be considered at low risk for dyslexia and are much less likely to need additional intervention or evaluation. Students scoring far below the cut point should be considered at high risk for dyslexia.

For students who are identified as at risk for dyslexia, the school should provide targeted intervention provided by the appropriate staff as determined by the district or charter school. The district or school should also continue the data collection and evaluation process outlined in Chapter III, Procedures for the Evaluation and Identification of Students with Dyslexia. It is important to note that the use of a tiered intervention process, such as Response to Intervention or RTI, must not be used to delay or deny an evaluation for dyslexia, especially when parent or teacher observations reveal the common characteristics of dyslexia.

For students who score close to the cut point, more information will be needed to make an informed decision regarding referral for evaluation, implementation of targeted interventions with progress monitoring, or continuation of core instruction only. Data gathering will provide this additional information.

Screening Data Gathering

Both quantitative and qualitative information are critical components of the screening process. Examples of quantitative and qualitative information used in determining next steps are provided in Figure 2.4 below.

Figure 2.4. Sources and Examples of Screening Data	
Quantitative Information	Qualitative Information
Results of— x Current screening instruments x Previous screening instruments x Formal and informal classroom reading assessments x Additional brief and targeted skill assessments	x Observations of student during screening (See Figure 2.3, Student Behaviors Observed During Screening) x Other observations of student progress x Teacher observations x Parent/guardian input (e.g., family history, early language skills) x Current student work samples x Work samples from earlier grade(s) x Intervention history

For students who fall close to the predetermined cut points, implementation of short-term, targeted intervention with regular progress monitoring is one way to determine if additional evaluation is needed. Teachers and administrators should also be mindful that screening for risk is an ongoing process. Decisions made based on a single-point-in-time screening instrument should always be reevaluated and altered as more information is obtained as instruction continues. See Part D of this chapter, Best Practices for Ongoing Monitoring, for additional information.

Screening data should always be shared with parents. Screening data should also be used by teachers and school administrators to guide instruction at the classroom level. When large percentages of students fall below the cut point (are at risk for dyslexia), it signals a need to review instructional programming and practices and teacher training in effective and explicit reading instruction.

Interpretation of Data

A qualified team is required to review all data to make informed decisions regarding whether a student exhibits characteristics of dyslexia. This team must consist of individuals who—

- have knowledge of the student;
- are appropriately trained in the administration of the screening tool;
- are trained to interpret the quantitative and qualitative results from the screening process; and
- recognize characteristics of dyslexia.

The team may consist of the student's classroom teacher, the dyslexia specialist, the individual who administered the screener, a representative of the Language Proficiency Assessment Committee (LPAC) (as appropriate), and an administrator.

It is important to remember that at any point in the data review process a referral for a Full Individual and Initial Evaluation (FIIE) under the IDEA may be initiated. Parents also have the right to request a FIIE at any time. Regardless of the process in place for screening and data review, whenever accumulated data indicate that a student continues to struggle with one or more of the components of reading, despite the provision of adequate instruction and intervention, the student must be referred for a full individual and initial evaluation under the IDEA.

Figure 2.5

Universal Screening and Data Review for Reading Risk

In kindergarten and first grade, universal screening for reading and dyslexia is administered as required by

Part D: Best Practices for Ongoing Monitoring

Ongoing progress monitoring allows educators to assess student academic performance in order to evaluate student response to evidence-based instruction. Progress monitoring is also used to make diagnostic decisions regarding additional targeted instruction that may be necessary for the student.

While some kindergarten and first grade students may not initially appear to be at risk for dyslexia based on screening results, they may actually still be at risk. Students who have learned to compensate for lack of reading ability and twice-exceptional students are two groups who may not initially appear to be at risk for dyslexia based on the results of a screening instrument.

Compensation

Some older students may not appear at first to exhibit the characteristics of dyslexia. They may demonstrate relatively accurate, but not fluent, reading.

> The consequence is that such dyslexic older children may appear to perform reasonably well on a test of word reading or decoding; on these tests, credit is given irrespective of how long it takes the individual to respond or if initial errors in reading are later corrected.
>
> —Shaywitz, S.E., Morris, R., Shaywitz, B.A., The Education of Dyslexic Children from Childhood to Young Adulthood, 2008

Awareness of this developmental pattern is critically important for the diagnosis in older children, young adults, and beyond. According to Shaywitz, et al., examining reading fluency and reading rate would provide more accurate information for these students.

Twice Exceptionality

Twice-

For additional information on twice-exceptional students, see Chapter IV, Critical, Evidence-Based Components of Dyslexia Instruction.

For a description of common risk factors of dyslexia that may be seen in older students, refer to Chapter I, Definitions & Characteristics of Dyslexia.

Best Practices in Progress Monitoring

It is essential that schools continue to monitor students for common risk factors for dyslexia in second grade and beyond. In accordance with TEC §38.003(a), school districts MUST evaluate for dyslexia at appropriate times. If regular progress monitoring reflects a difficulty with reading, decoding, and/or reading comprehension, it is appropriate to evaluate for dyslexia and/or other learning disabilities. Free tools approved by the commissioner of education as of the 2021-2022 school year can assist districts in measuring student's reading development at first and second grade. For more information on these tools, see the TEA Early Childhood Data Tool Selection Guidance. Schools should be aware that a student may have reached middle school or high school without ever being screened, evaluated, or identified; however, the student may have dyslexia or a related disorder. One goal of ongoing monitoring is to identify these students regardless of their grade level.

Therefore, it is important to remember that a referral for a dyslexia evaluation can be considered at any time kindergarten–high school.

Sources

19 Texas Administrative Code, §74.28, Students with Dyslexia and Related Disorders (2018).

Catts, H.W. (2017). Early Identification of Reading Disabilities. Cain, K., Carson, D.L., and Parrila, R.K., eds. Theories of Reading Development. Amsterdam, Netherlands: John Benjamins Publishing; 311.

Eden, G. Early identifi-ds1ja ma2 14.851 (h)-rTJ0.022 T0 T64 (e)-m-0.1506 Tw ((ifi)10.2 (t)-2t.252 oa06.963 0 Td(f)Tj2.862 (02

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III. Procedures for the Evaluation and Identification of Students with Dyslexia

Science has moved forward at a rapid pace so that we now possess the data to reliably define dyslexia, to know its prevalence, its cognitive basis, its symptoms and remarkably, where it lives in the brain and evidence-based interventions which can turn a sad, struggling child into not only a good reader, but one who sees herself as a student with esteem and

State and Federal Law Regarding Early Identification and Intervention Prior to

Procedures for Evaluation

As discussed in Chapter 2, Child Find is a provision in the federal Individuals with Disabilities Education Act (IDEA), a federal law that requires the state to have policies and procedures in place to ensure that every student in the state who needs special education and related services is located, identified, and evaluated. The purpose of the IDEA is to ensure that students with disabilities are offered a free and appropriate public education (20 U.S.C. §1400(d); 34 C.F.R. §300.1). Because a student suspected of having dyslexia may be a student with a disability under the IDEA, the Child Find mandate includes these students. Therefore, when referring and evaluating students suspected of having dyslexia, LEAs must follow procedures for conducting a full individual and initial evaluation (FIIE) under the IDEA. For detailed information regarding Child Find see https://tea.texas.gov/sites/default/files/Technical%20Assistance%20-%20Child%20Find%20and%20Evaluation%20-%20June%202020%20Revised%28v5%29.pdf

As discussed in Chapter II, all public-school students are required to be screened for dyslexia while in kindergarten and grade 1. Additionally, students enrolling in public schools in Texas must be assessed for dyslexia and related disorders "at appropriate times" (TEC §38.003(a)). The appropriate time depends upon multiple factors including the student's reading performance; reading difficulties; poor response to supplemental, scientifically-based reading instruction; teachers' input; and input from parents/guardians. The appropriate time for assessing is early in a student's school career (19 TAC §74.28). Texas Education Code §28.006, Reading Diagnosis, requires assessment of reading development and comprehension for students in kindergarten, first grade, second grade, and as applicable, seventh grade. While earlier is better, students should be recommended for evaluation for dyslexia even if the reading difficulties appear later in a student's school career.

While schools must follow federal and state gu

If—

Figure 3.8

Pathway to the Identification and Provision of Instruction for Students with Dyslexia

A. Universal Screening for reading and dyslexia is administered to all students in kindergarten and first grade as required by TEC §28.006 and §38.003(a).
B. If a student is at risk for reading difficulties or the student is suspected of having dyslexia or any other specific learning disability, collect and review quantitative and qualitative data on the student. See Figures 2.3 and 2.4 in Dyslexia Handbook for more information.
C. If the analysis shows that the student exhibits characteristics of dyslexia or other specific learning disabilities, seek parental consent for a Full Individual and Initial Evaluation (FIIE), while continuing to provide grade level, evidence-based core reading instruction (Tier 1) and providing appropriate tiered interventions.

D. For students suspected of having dyslexia, if the parent does not give consent for an FIIE, seek parental consent for a Section 504 evaluation, while continuing to provide grade level, evidence-based core reading instruction (Tier 1) and providing appropriate tiered interventions.	E. If the parent gives consent for an FIIE, conduct the FIIE within 45 school days (subject to limited exceptions) of the date of receipt of parent consent, while continuing to provide grade level, evidence-based core reading instruction (Tier 1) and providing appropriate tiered interventions. The ARD committee (including the parent) must meet to review the results of the FIIE.
F. If the parent gives consent for a Section 504 evaluation, conduct an evaluation under Section 504 while continuing to provide grade level, evidence-based core reading instruction (Tier 1) and providing appropriate tiered interventions.	G. If a student has an IDEA eligible condition such as dyslexia or a related disorder, the ARD committee determines if a need for special education services exists.
H. If the student's dyslexia or related disorder substantially limits one or more of life's major activities such as learning, reading, writing, or spelling, the student is eligible for Section 504, the 504 committee (parent participation is recommended) develops a Section 504 plan for the student to provide services including standard protocol dyslexia instruction, accommodations, and/or related aids specific to the student's disability.	I. If the student requires special education because of the identified IDEA eligible condition, the student is eligible for special education. The ARD committee develops the IEP for the student to receimi6 (m)44.9 (( )10.6 (t)-6 6 (r)-)2s rAhe gnndes

Reevaluation for Dyslexia Identification and Accommodations

> Dyslexia is a lifelong condition. However, with proper help, many people with dyslexia can learn to read and write well. Early identification and treatment is the key to helping individuals with dyslexia achieve in school and in life.
>
> —The International Dyslexia Association
> http://www.interdys.org/ewebeditpro5/upload/DyslexiaBasicsREVMay2012.pdf

There are many initiatives, programs, evaluations, and data available for use in identification, placement, and program planning for students, including ELs, who struggle with dyslexia. Evaluation and ongoing progress monitoring are key components that must be considered by trained personnel.

A 2014 U.S. Department of Justice technical assistance document summarized regulations regarding testing accommodations for individuals with disabilities as follows.

> The Americans with Disabilities Act (ADA) ensures that individuals with disabilities have the opportunity to fairly compete for and pursue such opportunities by requiring testing entities to offer exams in a manner accessible to persons with disabilities. When needed testing accommodations are provided, test takers can demonstrate their true aptitude.

Sources for Procedures and Evaluation for Students Identified with Dyslexia

Berninger, V. W. & Wolf, B. (2009). Teaching students with dyslexia and dysgraphia lessons from teaching and science. Baltimore, MD: Paul H. Brookes Publishing.

Teaching [(32)-()-u3.3 (.)-3 (s)-5.d3 .9 (ude) 3 (s)-5)]TJ Tf (a

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IV. Critical, Evidence-Based Components of Dyslexia Instruction

> Although dyslexia affects individuals over the life span . . . reading skills can be increased with the right early intervention and prevention programs . . . It is clear from the consensus of scientifically based reading research that the nature of the educational intervention for individuals with reading disabilities and dyslexia is critical. (pp. 221)
>
> — Birsh, J. R. Connecting Research and Practice, 2018

Effective literacy instruction is essential for all students and is especially critical for students identified with dyslexia. High-quality core classroom reading instruction can give students identified with dyslexia a foundation upon which intervention instruction can have a more significant impact.

Texas Education Code §38.003(b) states, "in accordance with the program approved by the State Board of Education, the board of trustees of each school district shall provide for the treatment of any student determined to have dyslexia or a related disorder." SBOE rules in 19 TAC §74.28 require that each school must provide an identified student access at his/her campus to an instructional program that meets the requirements in SBOE rule and to the services of a teacher trained in dyslexia and related disorders. While the components of instruction for students with dyslexia include good teaching principles for all teachers, the explicitness and intensity of the instruction, fidelity to program descriptors, grouping formats, and training and skill of the teachers are wholly different from core classroom instruction and must be considered when making individual placement decisions.

Standard Protocol Dyslexia Instruction

For the student who has not benefited from the research-based core reading instruction, the components of instruction will include additional focused intervention as appropriate for the reading needs of the student with dyslexia. Standard protocol dyslexia instruction provides evidence-based, multisensory structured literacy instruction for students with dyslexia. A standard protocol dyslexia instructional program must be explicit, systematic, and intentional in its approach. This instruction is designed for all students with dyslexia and will often take place in a small group setting. Standard protocol dyslexia instruction must be—

- evidence-based and effective for students with dyslexia;
- taught by an appropriately trained instructor; and d 4Tj-0.00 (al)-6.6 (l)1D6004 Tc Tc 0 Twt3byl(e)-6 (d)-0.7 0 Td

- Reading comprehension—Reading comprehension is the process of extracting and constructing meaning through the interaction of the reader with the text to be comprehended and the specific purpose for reading. The reader's skill in reading comprehension depends upon the development of accurate and flk(i)-3.3 (o2n)-0. (d)27 (e)to2ig aaaa

- Systematic and cumulative "Multisensory language instruction requires that the organization of material follow order of the language. The sequence must begin with the easiest concepts and most basic elements and progress methodically to more difficult material. Each step must also be based on [elements] already learned. Concepts taught must be systematically reviewed to strengthen memory" (Birsh, 2018, p. 26).

- Explicit instruction—"Explicit instruction is explained and demonstrated by the teacher one language and print concept at a time, rather than left to discovery through incidental encounters with information. Poor readers do not learn that print represents speech simply from exposure to books or print" (Moats & Dakin, 2008, p. 58). Explicit Instruction is "an approach that involves direct instruction: The teacher demonstrates the task and provides guided practice with immediate corrective feedback before the student attempts the task independently" (Mather & Wendling, 2012, p. 326).

- Diagnostic teaching to automaticity "The teacher must be adept at prescriptive or individualized teaching. The teaching plan is based on careful and [continual] assessment of the individual's needs. The content presented must be mastered to the degree of automaticity" (Birsh, 2018, p. 27). "This teacher knowledge is essential for guiding the content and emphasis of instruction for the individual student"(Moats & Dakin, 2008, p. 58). "When a reading skill becomes automatic (direct access

The International Multisensory Structured Language Council. (2013). Multisensory structured language programs: Content and principles of instruction. Retrieved from https://www.imslec.org/directory.asp?action=instruction.

Mather, N., & Wendling, B. J. (2012). Essentials of dyslexia assessment and intervention. Hoboken, NJ: John Wiley & Sons.

Moats, L. C, & Dakin, K. E. (2008). Basic facts about dyslexia and other reading problems. Baltimore, MD: The International Dyslexia Association.

Providers of Dyslexia Instruction

In order to provide effective intervention, school districts are encouraged to employ highly trained indi

Figure 4.1. Training Requirements for Educators Providing Dyslexia Services

trained in new research and practices related to dyslexia as a part of their continuing professional education (CPE) hours.

http://www.statutes.legis.state.tx.us/Docs/ED/htm/ED.21.htm

http://ritter.tea.state.tx.us/sbecrules/tac/chapter232/ch232a.html#232.11

Educator Preparation Programs

According to TEC §21.044(b), all candidates completing an educator preparation program must receive instruction in detection and education of students with dyslexia. This legislation ensures that newly certified teachers will have knowledge of dyslexia prior to entering the classroom.

https://statutes.capitol.texas.gov/Docs/ED/htm/ED.21.htm#21.044

Instructional Intervention Consideration for English Learners with Dyslexia

integral part of each subject area in the required curriculum (TAC §74.4(a)). Dyslexia instruction for ELs must incorporate the ELPS. A few strategies to consider include the following:

- Establish routines so that ELs understand what is expected of them
-

1.

6. Mather and Wendling (2012, p. 171) state the following:

   Individuals with dyslexia need to

   - x understand how phonemes (sounds) are represented with graphemes (letters);
   - x learn how to blend and segment phonemes to pronounce and spell words;
   - x learn how to break words into smaller units, such as syllables, to make them easier to pronounce;
   - x learn to recognize and spell common orthographic graphic patterns (e.g., -tion);
   - x learn how to read and spell words with irregular elements (e.g., ocean); and
   - x spend time engaged in meaningful reading and writing activities.

Mather, N. M., & Wendling, B. J. (2012). Essentials of dyslexia assessment and intervention. Hoboken, NJ: John Wiley & Sons.

---

7. Moats (1999, pp. 7–8) states that

   Well designed, controlled comparisons of instructional approaches have consistently supported these components and practices in reading instruction:

   - x direct teaching of decoding, comprehension, and literature appreciation;
   - x phoneme awareness instruction;
   - x systematic and explicit instruction in the code system of written English;
   - x daily exposure to a variety of texts, as well as incentives for children to read independently and with others;
   - x vocabulary instruction that includes a variety of complementary methods designed to explore the relationships among words and the relationships among word structure, origin, and meaning;
   - x comprehension strategies that include prediction of outcomes, summarizing, clarification, questioning, and visualization; and
   - x frequent writing of prose to enable a deeper understanding of what is read.

Moats, L. C. (1999). Teaching reading is rocket science: What expert teachers of reading should know and be able to do (Item No. 39372). Washington, DC: American Federation of Teachers.

---

8. Moats (1999, pp. 7– 20) states the following:

   The knowledge and skills needed to teach reading include the following:

   - x The psychology of reading and reading development
     - o Basic facts about reading
     - o Characteristics of poor and novice readers
     - o Environmental and physiological factors in reading development
     - o How reading and spelling develop

- x Knowledge of the language structure
  - o Phonology
  - o Phonetics
  - o Morphology
  - o Orthography
  - o Semantics
  - o Syntax and text structure
- x Practical skills of instruction—use of validated instructional practices
- x Assessment of classroom reading and writing skills

Moats, L. C. (1999). Teaching reading is rocket science: What expert teachers of reading should know and be able to do (Item No. 39372). Washington, DC: American Federation of Teachers.

9. The National Reading Panel's (2000) Report of the National Reading Panel highlights the following:

   Emphasis is placed on the importance of identifying early which children are at risk for reading failure and intervening quickly to help them.

   How reading is taught matters—reading instruction is most effective when it is taught comprehensively, systematically, and explicitly

National Reading Panel. (2000). Report of the National Reading Panel: Teaching children to read: An evidence-based assessment of the scientific research literature on reading and its implications for reading instruction. Washington, DC: National Institute of Child Health and Human Development.

10. Shaywitz (2005, pp. 257–262) outlines the following essentials for a successful reading intervention and effective early intervention program:

    Essentials of a successful reading intervention include the following:

    - x Early intervention—The best intervention begins in kindergarten with remediation beginning in first grade.
    - x Intense instruction—Reading instruction must be delivered with great intensity. Optimally, a child who is struggling to read should be given instruction in a group of three and no larger than four students, and the child should receive this focused reading instruction at least four, and preferably five, days a week.
    - x High-quality instruction—High-quality instruction is provided by a highly qualified teacher. Recent studies highlight the difference that a teacher can make in the overall success or failure of a readin

Essentials of an effective early intervention program include the following:

- x

Instructional Accommodations for Students with Disabilities

Students with dyslexia who receive dyslexia instruction that contains the components described in this chapter will be better equipped to meet the demands of grade-level or course instruction. In addition to dyslexia instruction, accommodations provide the student with dyslexia effective and equitable access to grade-level or course instruction in the general education classroom. Accommodations are not one size fits all; rather, the impact of dyslexia on each individual student determines the necessary accommodation. Listed below are examples of reasonable classroom accommodations:

- Copies of notes (e.g., teacher- or peer-provided)
- Note-taking assistance
- Additional time on class assignments and tests
- Reduced/shortened assignments (e.g., chunking assignments into manageable units, fewer items given on a classroom test or homework assignment without eliminating concepts, or student planner to assist with assignments)
- Alternative test location that provides a quiet environment and reduces distractions
- Priority seating assignment
- Oral reading of directions or written material
- Word banks
- Audiobooks
- Text to speech
- Speech to text
- Electronic spellers
- Electronic dictionaries
- Formula charts
- Adaptive learning tools and features in software programs

Accommodations are changes to materials, actions, or techniques, including the use of technology, that enable students with disabilities to participate meaningfully in grade-level or course instruction. The use of accommodations occurs primarily during classroom instruction as educators use various instructional strategies to meet the needs of each student. A student may need an accommodation only temporarily while learning a new skill, or a student might require the accommodation throughout the school year and over several years including beyond graduation.

Decisions about which accommodations to use are very individualized and should be made for each student

Twice-exceptional students must be provided access to all service and course options available to other students. Section 504 and Title II of the Americans with Disabilities Act (ADA), require that qualified students with disabilities be given the same opportunities to compete for and benefit from accelerated programs and classes as are given to students without disabilities [34 C.F.R. §104.4(b)(1)(ii) and 28 C.F.R. §35.130(b)(1)(ii)]. A student with a disability such as dyslexia or a related disorder may not be denied admission to an accelerated or advanced class or program solely because of the student's need for special education or related aids or services or because the student has an IEP or Section 504 Plan.

Additionally, a student with a disability may not be prohibited from using special education or related aids as a condition of participating in an accelerated or advanced class or program. Participation by a student with a disability in an accelerated or advanced class or program generally would be considered part of the regular education referenced in IDEA and Section 504 regulations. Thus, if a qualified student with a disability requires related aids and services to participate in a regular education class or program, the school cannot deny that student the needed related aids and services in an accelerated or advanced class or program.
It is important to note that a district or school does not have to provd8m o ,vh7 .2.8 (o)61.739 0 Td (a)-3.3 (u.004 T 0 Td( )Tj-0

Sources for Enrollment in Gifted/Talented and Advanced Academic Programs

G.B.L. v. Bellevue Sch. Dist. 405, 113 IDELR 186. No. 2:2012cv00427. (U.S. District Court, W.D. Washington, 2013).

Texas Education Agency. (2008–2015). Equity in G/T Education: Twice-Exceptional Students and G/T Services. Retrieved from http://www.gtequity.org.

Texas State Board of Education. (2009). Texas State Plan for the Education of Gifted/Talented Students. Retrieved from https://tea.texas.gov/Academics/Special_Student_Populations/Gifted_and_Talented_Education/Gifted_Talented_Education/.

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V. Dysgraphia

Texas state law requires districts and charter schools to identify students who have dyslexia and related disorders. Texas Education Code §38.003 identifies the following examples of related disorders: developmental auditory imperception, dysphasia, specific developmental dyslexia, developmental dysgraphia, and developmental spelling disability. Recent research in the field of dysgraphia has prompted the addition of the following guidance regarding the evaluation, identification, and provision of services for students with dysgraphia.

Definition and Characteristics of Dysgraphia

Difficulty with handwriting frequently occurs in children with dyslexia. When Texas passed dyslexia legislation, the co-existence of poor handwriting with dyslexia was one reason why dysgraphia was called a related disorder. Subsequently, dyslexia and dysgraphia have been found to have diverse co-morbidities, including phonological awareness (Döhla and Heim, 2016). However, dyslexia and dysgraphia are now recognized to be distinct disorders that can exist concurrently or separately. They have different brain mechanisms and identifiable characteristics.

Dysgraphia is related to dyslexia as both are language-based disorders. In dyslexia, the impairment is with word-level skills (decoding, word identification, spelling). Dysgraphia is a written language disorder in serial production of strokes to form a handwritten letter. This involves not only motor skills but also language skills—finding, retrieving and producing letters, which is a subword-level language skill. The impaired handwriting may interfere with spelling and/or composing, but individuals with only dysgraphia do not have difficulty with reading (Berninger, Richards, & Abbott, 2015).

A review of recent evidence indicates that dysgraphia is best defined as a neurodevelopmental disorder manifested by illegible and/or inefficient handwriting due to difficulty with letter formation. This difficulty is the result of deficits in graphomotor function (hand movements used for writing) and/or storing and retrieving orthographic codes (letter forms) (Berninger, 2015). Secondary consequences may include problems with spelling and written expression. The difficulty is not solely due to lack of instruction and is not associated with other developmental or neurological conditions that involve motor impairment.

The characteristics of dysgraphia include the following:

- Variably shaped and poorly formed letters
- Excessive erasures and cross-outs
- Poor spacing between letters and words
- Letter and number reversals beyond early stages of writing
- Awkward, inconsistent pencil grip
- Heavy pressure and hand fatigue
- Slow writing and copying with legible or illegible handwriting (Andrews & Lombardino, 2014)

Additional consequences of dysgraphia may also include:

- Difficulty with unedited written spelling
-

Procedures for Identification

The process of identifying dysgraphia will follow Child Find procedures for conducting a full individual and initial evaluation (FIIE) under the IDEA. These procedural processes require coordination among the teacher, campus administrators, diagnosticians, and other professionals as appropriate when factors such as a student's English language acquisition, previously identified disability, or other special needs are present.

The first step in the evaluation process, data gathering, should be an integral part of the district's or charter school's process for any student exhibiting learning difficulties. Documentation of the following characteristics of dysgraphia could be collected during the data gathering phase:

- Slow or labored written work
- Poor formation of letters
- Improper letter slant
- Poor pencil grip
- Inadequate pressure during handwriting (too hard or too soft)
- Excessive erasures
- Poor spacing between words
- Poor spacing inside words
- Inability to recall accurate orthographic patterns for words
- "b" and "d" reversals beyond developmentally appropriate time
- Inability to copy words accurately
- Inability of student to read what was previously written
- Overuse of short familiar words such as "big"
- Avoidance of written tasks
- Difficulty with visual-motor integrated sports or activities

While schools must follow federal and state guidelines, they must also develop procedures that address the needs of their student populations. Schools shall recommend evaluation for dysgraphia if the student demonstrates the following:

- Impaired or illegible handwriting that is (s)-1.32..3 (w)-3.4 (in)2 Td[(WfTj-0.001 hm/TT0 1 Tf19e)-3 (g)2.6 (72aMC /P 4

collected as well as current information to evaluate the student's academic progress and determine what actions are needed to ensure the student's improved academic performance. The collection of various data, as indicated in Figure 5.1 below, will provide information regarding factors that may be contributing to or primary to the student's struggles with handwriting, spelling, and written expression.

Cumulative Data

The academic history of each student will provide the school with the cumulative data needed to ensure that underachievement in a student suspected of having dysgraphia is not due to lack of appropriate instruction in handwriting, spelling, and written expression. This information should include data that demonstrate that the student was provided appropriate instruction and include data-based documentation of repeated evaluations of achievement at reasonable intervals (progress monitoring), reflecting formal evaluation of student progress during instruction. This cumulative data also include information from parents/guardians. Sources and examples of cumulative data are provided in Figure 5.1.

Figure 5.1. Sources and Examples of Cumulative Data

- Vision screening
- Teacher reports of classroom concerns
- Parent reports of concerns about handwriting, spelling, or written expression
- Classroom handwriting assessments
- Classroom spelling assessments
- Samples of written work (e.g., journal, story responses, writing samples, etc.)
- Accommodations or interventions provided
- Academic progress reports (report cards)
- Gifted/talented assessments
- Samples of written schoolwork (both timed and untimed)
- State student assessment program results as described in TEC §39.022
- Observations of instruction provided to the student
- Full Individual and Initial Evaluation
- Outside evaluations
- Speech and language assessment
- School attendance
- Curriculum-based assessment measures
- Instructional strategies provided and student's response to the instruction
- Universal screening
- Parent survey

2. Formal Evaluation

After data gathering, the next step in the process is formal evaluation. This is not a screening; rather, it is an individualized evaluation used to gather evaluation data. Formal evaluation includes both formal and informal data. All data will be used to determine whether the student demonstrates a pattern of evidence for dysgraphia. Information collected from the parents/guardians also provides valuable insight into the student's early years of written la t taliz

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Domains to Assess

Academic Skills

The school administers measures that are related to the student's educational needs. Difficulties in the areas of letter formation, orthographic awareness, and general handwriting skills may be evident dependent on the student's age and writing development. Additionally, many students with dysgraphia may have difficulty with spelling and written expression.

Cognitive Processes

Review and Interpretation of Data and Evaluation

To appropriately understand evaluation data, the ARD committee must interpret tests results in light of the student's educational history, linguistic background, environmental or socioeconomic factors, and any other pertinent factors that affect learning.

A determination must first be made regarding whether a student's difficulties in the areas of writing and spelling reflect a pattern of evidence for the primary characteristics of dysgraphia with unexpectedly low performance for the student's age and educational level in some or all of the following areas:

- Handwriting
- Writing fluency (accuracy and rate)
- Written Expression
- Spelling

Based on the above information and guidelines, should the ARD committee determine that the student

child with a specific learning disability under IDEA. The letter further states that there is nothing in the IDEA that would prohibit the use of the terms dyslexia, dyscalculia, and dysgraphia in IDEA evaluation, eligibility determinations, or IEP documents. For more information, please visit https://www2.ed.gov/policy/speced/guid/idea/memosdcltrs/guidance-on-dyslexia-10-2015.pdf.

If the student with dysgraphia is found eligible for special education, the student's IEP must include appropriate writing instruction, which might include instruction from a related services provider.

If the student is identified with dysgraphia but is not considered a student with a disability under the IDEA (because the student does not need specially designed instruction), then the student may receive appropriate accommodations and services under Section 504. Students are protected under Section 504 if the physical or mental impairment (dysgraphia) substantially limits one or more major life activities, such as the specific activity of writing. Additionally, the Section 504 committee, in determining whether a student has a disability that substantially limits the student in a major life activity (writing), must not consider the ameliorating effects of any mitigating measures that student is using.

Revision of the Section 50

Handwriting

The research-based elements for effective instruction of handwriting as stated above for all students are the same for students with dysgraphia. However, the intensity, frequency, and delivery of instruction may need to be adjusted to meet specific student need as determined by the Section 504 or ARD committee. Figure 5.4 below provides a hierarchy of instruction for handwriting as a reference to best practice:

Figure 5.4. Handwriting Hierarchy of Instruction	
Posture	Also known as “Watch Our Writing” (W.O.W) x Feet are flat on the floor x Back is straight x Paper slanted so that the edge of the paper is parallel to the writing arm x Paper anchored with non-writing hand x Pencil grip and position correct
Grip	Normal tripod grip with pencil resting on first joint of middle finger with the thumb and index fingers holding the pencil in place at a 45° angle.
Letter Formation	Emphasis placed in the following order: x Shape x Proportion x Size x Rhythm/fluency x Slant
Sequence	x Lower case letters first; Capitals as nee(C)1.9 (a)-4 (p)-6.1 (i)-0.9 (t)-3.4 (a)R-0.003 0003TjEMC

- Phoneme-grapheme correspondence
- Letter order and sequence patterns, or orthographic conventions:
    - syllable types
    - orthographic rules
    - irregular words
- Position of a phoneme or grapheme in a word
- Meaning (morphology) and part of speech
- Language of origin (Moats,

while learning a new skill, or a student might require the accommodation throughout the school year or over several years including beyond graduation.

Decisions about which accommodations to use are very individualized and should be made for each student by that student's ARD or Section 504 committee, as appropriate. Students can, and should, play a significant role in choosing and using accommodations. Students need to know what accommodations are possible, and then, based on knowledge of their personal strengths and limitations, they select and try accommodations that might be useful for them. The more input students have in their own accommodation choices, the more likely it is that they will use and benefit from the accommodations.

When making decisions about accommodations, instruction is always the foremost priority. Not all accommodations used in the classroom are allowed during a state assessment. However, an educator's ability to meet the individual needs of a student with dysgraphia or provide sup304 Tc 0.00.7 (p)-0. (y)-46 304 Tc 0.00.7 (o6 (t)7.9 (h)2.2.u)-0.7 (p)-0.0/.5 (o)-6.6v.1 (o)-6.6 (