#### **LRSD Dyslexia Audit**

On January 28, 29, and 30, Vicki King, ADE Dyslexia Specialist, and a team of 13 ADE and Educational Service Cooperative Specialists conducted an audit of the Little Rock School District's dyslexia services. The team met with district leaders and made school visits to interview principals, classroom teachers, dyslexia interventionists, and other school personnel. The school visits included an observation of a dyslexia intervention when possible. During the school visits, the team sought information about screening, parent notification, instructional approaches, interventionists, and required reporting.

#### **High School**

All five high schools were visited on January 29th and 30th. Visits were scheduled based on intervention schedules submitted the prior week. The law requires dyslexia screening for students experiencing difficulty as noted by a classroom teacher. No evidence was provided to indicate LRSD screens high school students that are not referred by a parent or provided an outside evaluation. The team did not find any evidence that procedures for teacher referrals for dyslexia screening were in place for the high school prior to the district hiring Chandle Carpenter as their Dyslexia Specialist. Since taking on the position, Ms. Carpenter has created a flowchart for screening students in grades 3 - 12 as well as a Level I Dyslexia Screening packet. Additional information needs to be added to clarify when a teacher should refer a student for screening. Interviews with administrators and other high school staff members revealed a lack of understanding in what indicators suggest the need for dyslexia screening and intervention. More than one high school staff member made a comment that a student identified couldn't possibly be dyslexic because the student had a grade of C in a class. The district has a parent letter in the LRSD Dyslexia Handbook to be used to notify parents when a student is identified as needing dyslexia interventions. It does not include screening results or resources including characteristics of dyslexia, appropriate interventions, accommodations, and the right to have the student receive an independent comprehensive dyslexia evaluation, all of which are required by law. In 2017-18, 22 high school students were flagged in eSchool as receiving dyslexia intervention (Central High School - 5, Hall High School - 2, J.A. Fair High School - 1, McClellan High School - 6, and Parkview High School - 8). Several staff members attended training provided through the Institute for Multisensory Education (IMSE), but the personnel trained do not have designated time in their daily schedule to provide dyslexia intervention. Only one high school dyslexia intervention was observed (Parkview H.S.). The dyslexia intervention observed was a Level 8 Barton Reading & Spelling lesson at Parkview High School delivered before school at 7:40. Some of the reasons given by LRSD staff for not seeing dyslexia interventions at other high schools included: the interventionist's schedule did not actually match the schedule submitted or the school was only recently notified that a student was flagged in eSchool for receiving dyslexia intervention so intervention has not started.

#### **Middle School**

LRSD has eight middle schools that serve grades (6-8). Cloverdale Middle School, Mabelvale Middle School, Mann Middle School, Pinnacle View Middle School, Pulaski Heights Middle School, and Forest Heights Stem were visited on January 29th and 30th. Dunbar and Henderson were not visited. All schools visited could articulate the screening process, but interviews indicated each school needs additional support for screening and interpretation of data. The district has a parent letter in the LRSD Dyslexia Handbook to be used to notify parents when a student is identified as needing dyslexia interventions. It does not include screening results or resources including characteristics of dyslexia, appropriate interventions, accommodations, and the right to have the student receive an independent comprehensive dyslexia evaluation, all of which are required by law. Each building listed IMSE Comprehensive (Recipe for Reading, a K-3 sequence) as the dyslexia intervention program. IMSE lessons were observed but did not appear to be effective due to lack of explicit sequential instruction. Several instructional components were not observed. Components missing included phonological awareness, decodable text, comprehension, and multisensory strategies. In 2017-18, 24 middle school students were flagged in eSchool as receiving dyslexia intervention (Henderson Middle School - 2, Mabelvale Middle School - 10, Mann Middle School - 31, Pinnacle View Middle School - 3, and Pulaski Heights Middle School - 6). Forest Heights Stem (6-8), Cloverdale Middle School, and Dunbar Middle School had zero students flagged as receiving dyslexia intervention in eSchool in 2017-18. When comparing literacy proficiency rates and the number of students marked in eSchool as receiving dyslexia intervention, it appears the middle schools are not screening students that experience difficulty as noted by a classroom teacher. The team did not find any evidence that procedures for teacher referrals for dyslexia screening were in place for the high school prior to the district hiring Chandle Carpenter as their Dyslexia Specialist. Since taking on the position, Ms. Carpenter has created a flowchart for screening students in grades 3 - 12 as well as a Level I Dyslexia Screening packet. Additional information needs to be added to clarify when a teacher should refer a student for screening. Multiple teachers were trained in IMSE, but are referred to as a reading teacher or special education teacher. In most situations, groups were not explicitly dyslexia intervention groups, but a combination of struggling readers.

## **Elementary Schools**

All elementary schools were visited except Fulbright and Jefferson. The schools visited could articulate the screening components for Initial and Level I Dyslexia Screening, but there was some confusion about how to interpret the data, when to conduct a Level I Dyslexia Screening, and how to decide which students are exhibiting characteristics of dyslexia and in need of dyslexia intervention services. Kindergarten students are not screened until January and only receive intervention if there is room. It is commonplace to dismiss some first grade students that were identified as needing dyslexia intervention the first semester based on DRA levels when new students are identified. The district has a parent letter in the LRSD Dyslexia Handbook to be used to notify parents when a student is identified as needing dyslexia interventions. It does not include screening results or resources including characteristics of dyslexia, appropriate interventions, accommodations, and the right to have the student receive an independent comprehensive dyslexia evaluation, all of which are required by law. In 2017-18, 1100 students in kindergarten through grade 5 were flagged in eSchool as receiving dyslexia intervention. Of the 1100 students flagged, only 47 were in kindergarten, 365 were in 1st grade, 315 in 2nd grade, and 373 were in grades 3 through 5 combined. Although it is impossible to eliminate dyslexia, early intervention can significantly reduce the impact dyslexia has on a student's literacy experience. Each building indicated IMSE as the dyslexia program. Several individuals were trained in IMSE and lessons were observed, but the lessons were often missing required components of instruction. Most teachers were trying to supplement the phonological awareness component. Decodable texts were found in some buildings, but not all. Some schools were using Guided Reading for dyslexia intervention groups.

## Level II Dyslexia Screening

Each school indicated that all Level II Dyslexia Screenings are administered by an LRSD school psychology specialist or psychological examiner. Parents are notified and a 504 referral conference is held to obtain consent to test. The district has purchased several assessments listed on the possible Level II Screening measures list provided in the ADE Dyslexia Resource Guide. A list of the assessments can be found on page 5 of the LRSD Dyslexia Guide.

Several LRSD school psychology specialists and psychological examiners submitted redacted copies of Level II Dyslexia Screening reports, and requested feedback. A review of several of the reports indicated that an assessment was administered for each component of literacy used in identifying the characteristics profile of dyslexia, but there appears to be some confusion about which components assessed are characteristics of dyslexia (decoding, word recognition, fluency, spelling) and which components are used to determine the underlying cause of dyslexia (phonological awareness, phonological memory, rapid naming). Section VI: Level II Dyslexia Screening of the ADE Dyslexia Resource Guide, provides guiding questions to determine if a student exhibits characteristics of dyslexia. The questions are: 1) Does the student exhibit one or more of the primary reading characteristics of dyslexia in addition to a spelling deficit? 2) Are the reading and spelling deficits the result of a phonological deficit? 3) Are the reading, spelling, and phonological deficits unexpected in relation to other cognitive abilities? The reports did not indicate the questions were used to determine if a student was exhibiting the characteristics of dyslexia. This did not appear to keep a child from receiving the recommendation of needing dyslexia intervention, but may result in students not receiving the appropriate intervention. Another concern raised when reviewing the reports, especially reports for older students, was the fact that there was no indicator of the severity of the student's reading deficit therefore there appeared to be no sense of urgency for remediation. Each student seemed to receive a standard recommendation for frequency and length of intervention sessions.

# **Required Reporting**

Before July 15, a public school district shall report on the website of the public school district or in writing to the parents of each student in the public school district the following information:

- 1. The dyslexia intervention programs used during the previous school year that were specifically responsive to assisting students with dyslexia;
- 2. The number of students during the previous school year who received dyslexia intervention; and
- 3. The total number of students identified with dyslexia during the previous school year (Ark. Code Ann. § 6-41-606 (b)).

Little Rock School District posted the following, but it is not easily found when searching for required dyslexia reporting.

# Act 1039 of 2017 Reporting By the School District (Ark. Code Ann. § 6-41-606 (b))

During the 2017-2018 school year, Little Rock School District used the evidenced-based program from the Institute for Multi-sensory Education in small group intervention to address the deficit areas of students identified as exhibiting the characteristics of dyslexia.

## Number of Students Who Received Dyslexia Intervention

During the 2017-2018 school year, 1198 students attending Little Rock School District received dyslexia intervention services from a trained dyslexia interventionist.

## Total Number of Students Identified as Exhibiting the Characteristics of Dyslexia

During the 2017-2018 school year, 1198 students attending Little Rock School District were identified as exhibiting the characteristics of dyslexia.

## Concerns:

- Elementary schools are in triage mode and serve only the most needy.
  - Students might start experiencing success and then are dismissed due to other students being identified.
- Elementary schools do not seem to understand RTI and how to use screening data to determine risk.
  - This delays the Level I Dyslexia Screening and dyslexia intervention.
- Elementary schools are collecting screening data, but put more emphasis on Developmental Reading Assessment (DRA) and summative data.
  - The DRA is not an adequate measure for determining exit status. It does not measure the key weaknesses associated with dyslexia (phonological awareness, letter-sound correspondences, decoding, and encoding).
- Middle school does not have an effective dyslexia program or plan to serve identified students.
- High school dyslexia services are virtually non-existent.

- Schools are not actively screening students for placement in dyslexia intervention.
  - The number of students identified as needing dyslexia intervention, significantly drops off at 3rd grade, but is even more drastic for the middle schools where only 24 students were identified in 2017-18.
    Elementary (1100): K 47, 1st 365, 2nd 315, 3rd 187, 4th 106, 5th 80
    Middle school (24): 6th 3, 7th 15, 8th 6
    High school (22): 9th 6, 10th 4, 11th 6, 12th 6
- When students are identified, there is no indication of how far behind the student is and a sense of urgency for remediation was not observed.
  - Each student gets the minimum intervention time and frequency.
  - A 2nd grade group of students that had been identified early in the year as needing dyslexia intervention and were reported as reading on an end of kindergarten/early 1st grade reading level received the same IMSE lesson and practice as a kindergarten group that had begun intervention in early January.
- Many faculty are trained in IMSE, but few actually have time allocated in the daily schedule to provide interventions.
- There is a lack of communication about students transitioning from elementary school to middle school and from middle school to high school.
  - Schools were not aware of which students had previously received intervention and where the students were in the dyslexia intervention scope and sequence.
- There is a lack of coaching support for implementing the dyslexia intervention.

## **Recommendations:**

## **Referral:**

• Develop written procedures for the Dyslexia referral process for all buildings.

## Screening

- Provide professional development dyslexia awareness focusing on indicators of dyslexia for middle school and high school staff members.
- Provide professional development in RTI, purpose of Initial Screening (prediction of risk), Level I Screening (diagnostic), scoring and interpretation of screening tools, and instructional implications.
- Provide professional development in School-Based Identification of Dyslexia (Level II Screening) for the staff members of the decision making teams and screening personnel in each building.
- Screen students experiencing difficulty at each grade level in accordance with the law.

# Parent notification

• Include screening results and required resources when contacting parents.

## Instructional approaches

- Adopt a comprehensive dyslexia program that is systematic and explicit.
  - Provide dyslexia interventionists coaching support for implementing the program.

#### Interventionists

• Dyslexia interventionists need designated time in the daily master schedule to see dyslexia intervention groups.

#### **Required reporting**

- Make website reporting more easily identifiable by adding dyslexia to the file link name.
- List all programs used for dyslexia interventions.
- Include students identified, but not receiving intervention in the third item: Total Number of Students Identified as Exhibiting the Characteristics of Dyslexia.

#### Communication

- Create a district system for tracking students receiving dyslexia intervention from building to building
  - The system should house assessment information, including screening results and progress monitoring data so that precious instructional time isn't wasted on duplicating assessments.
  - The system should house dyslexia program instructional information to indicate the level and lesson the student has mastered.