



## Who is responsible for “identifying or diagnosing” disability for IEP qualification?

*Disclaimer: I am simply very familiar with the laws and read them over and over with respect to questions I receive but I am not an attorney and do not practice law. This is not legal advice - consult an attorney for legal advice, with this in hand and see if they concur.*

How does this apply to students with reading disability, the IDEA Categories of Communication and /or Specific Learning Disability (SLD) who have, or are suspected to have, dyslexia.

**This is a common question to which I have a detailed answer.**

The School system in Massachusetts has a particular duty beyond IDEA under MA General Laws Title XII Chapter 71B Section 3 requires schools to provide “diagnosis” and they must provide that as needed?

IDEA however does not appear to require diagnosis only “*identification of*” a child's condition with in one of the 13 categories.

**Let's start with I.D.E.A.:**

1. Child Find is a provision under I.D.E.A. law that requires districts to “identify all students suspected of a disability” between the ages of birth and 21. This initial “identification” is required even if students are not in the public school or not a child who receives services.
2. IDEA is a Federal Education law called the Individuals with Disabilities Education Act. This law and this law alone is the criteria from which eligibility for services are qualified or denied for students with disabilities and that is a critical thing to understand when discussing the “diagnosis” question.

There is nothing in the law that requires a medical diagnosis - categories are clearly and accurately itemized out in IDEA law.

The categories for identification as a student with a disability are listed by Congress and defined, at least in part.

The 13 categories include : SLD or Specific Learning Disability - this category of IDEA qualification can include an number of conditions that Congress also listed clearly.

**Included in the IDEA law:**

*“specific learning disability” is listed as a qualifying disability and defined as: “a disorder in one or more of the basic psychological processes involved in understanding or in 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, including conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia.”*

*“a disorder in one or more of the basic psychological processes involved in understanding or in 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, including conditions such as **perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia.**” See 20 U.S.C. §1401(30) and 34 CFR §300.8(c)(10) (emphasis added).*



## IDEA Continued

3. Some students are identified under Communication - (which is a category that includes speech and language skills before and after reading instruction) This category for qualification also includes the pre-reading foundation skill: *Phonemic Awareness and the phonological processing skill called naming speed which is also an early predictor of dyslexia.* So **dyslexia** might be identified under the category of SLD or Communication. The IDEA law and Mass law is clear about multiple disabilities or multiple categories and the flexibility attend to overlapping circumstances.

4. **Dyslexia** is often used as a term "condition" or the "characteristics of dyslexia" by Speech Language Pathologists who when trained as SLP literacy of dyslexia specialists are very good at not only identifying but planning a comprehensive plan for direct explicit instruction and monitoring of the skills need for learning to read, write and spell.

A psychologist who is particularly a clinical or neuropsychologist can diagnose dyslexia. Here there are times when a psychologist uses the term "specific disability in Reading" which in the DSM-5 is synonymous with the word dyslexia. (see DSM-5 page 67) The Diagnostic Manual is a reference primarily used for insurance categories and is NOT in any way able to "over rule" definitions determined as part of IDEA law.

But even the school psychologist (who reportedly do not "diagnose") - when the assessment shows SLD do say SLD in Reading. So a determination or diagnosis that a student has a specific learning disability "in Reading" (or "the imperfect ability read" as opposed to "imperfect ability to listen, think, speak...") is in fact, as far as IDEA law goes - dyslexia a "qualifying condition". The condition that is impacting reading is dyslexia: one of many conditions listed under the category of SLD for IDEA. If there is doubt at the meeting look again at the definition of SLD above in the IDEA law. ***Ask the team, does my child have "perceptual disabilities, brain injury, minimal brain dysfunction, developmental aphasia" or is it dyslexia?***

This is the law - but many school teams insist that they know better and that they are not allowed to use the word?

### **When this happens there is one more thing!**

MA schools have the responsibility to use the term correctly and service providers must be knowledgeable about dyslexia and the evidence-based services specifically for dyslexia using a valid science based definition. There is nothing in the law that requires a medical diagnosis - though a diagnosis or identification as dyslexic is most certainly possible to obtain. The 2015 OSER Guidance for Dyslexia is a Federal document that explains there is no reason, including lack of a medical diagnosis, not to use the term dyslexia for the "condition" that impacts learning to read. See that document below:

**In Addition to Federal IDEA law Massachusetts has more requirements:** *And those requirements include the duty of the district to diagnose. So if your school is saying they can not diagnose or will not diagnose - quote this law and ask them to explain in writing why they are refusing to diagnose or identify a condition that is clearly listed explicitly in IDEA law, dyslexia?*

### **Here is the law from MA:**

Section 3: *Identification of school age children with a disability; diagnosis of disability; proposal of program; evaluations and assessments of child and program*





Section 3. In accordance with the regulations, guidelines and directives of the department issued jointly with the departments of mental health, developmental services, public health, youth services, and the commission for the blind and the commission for the deaf and hard of hearing and with assistance of the department, *the school committee of every city, town or school district shall identify the school age children residing therein who have a disability, as defined in section 2, diagnose and evaluate the needs of such children, propose a special education program to meet those needs, provide or arrange for the provision of such special education program, maintain a record of such identification, diagnosis, proposal and program actually provided and make such reports as the department may require. Until proven otherwise, every child shall be presumed to be appropriately assigned to a regular education program and presumed not to be a school age child with a disability or a school age child requiring special education.*

The department shall take all steps necessary to monitor and enforce compliance with this section no less than every three years, including but not limited to investigations, on-site visits and public hearings, and shall provide assistance in planning and implementing any necessary corrective actions to ensure that no school committee provides special education services to a child pursuant to this chapter unless an evaluation conducted pursuant to this section determines that the child has a disability, as defined in section 1. The department shall further take any and all steps necessary to monitor and enforce compliance with all other provisions of this chapter, including but not limited to the requirement that school committees educate children in the least restrictive environment, as defined in section 1. The department shall also ensure that teachers and administrators are fully informed about their responsibilities for implementing the provisions of this chapter and are provided with technical assistance and training necessary to assist them in such effort.

No school committee shall refuse a school age child with a disability admission to or continued attendance in public school without the prior written approval of the department, and without complying with state and federal requirements for disciplining students with disabilities, where applicable. During the pendency of administrative or judicial proceedings, a court of competent jurisdiction shall have the authority to change a child's educational placement, including removing the child from school, in any circumstances when the school committee shows that the child's behavior poses a substantial likelihood of injury to himself or others; provided, however, that the foregoing shall not be construed to abrogate any authority concerning discipline for such a child which is available to a school committee under said regulations and procedures or any other law. No child who is so refused or removed shall be denied an alternative form of education approved by the department, as provided for in section 10, through a tutoring program at home, through enrollment in an institution operated by a state agency, or through any other program which is approved for the child by the department.

No child shall be placed in a special education program without prior consultation, evaluation, reevaluation, and consent as set forth and implemented by regulations promulgated by the department. To insure that parents can participate fully and effectively with school personnel in the consideration and development of appropriate educational programs for their child, a school committee shall, upon request by a parent, provide timely access to parents and parent-designated independent evaluators and educational consultants for observations of a child's current program and of any program proposed for the child, including both academic and non-academic components of any such program. Parents and their designees shall be afforded access of sufficient duration and extent to enable them to evaluate a child's performance in a current program and the ability of a proposed program to enable such child to make effective progress. School committees shall impose no conditions or restrictions on such observations except those necessary to ensure the safety of children in a program or the integrity of the program while under observation or to protect children in the program from disclosure by an observer of confidential and personally identifiable information in the event such information is obtained in the course of an observation by a parent or a designee.





*Within five days after the referral* of a child enrolled in a regular education program by a school official, parent or guardian, judicial officer, social worker, family physician, or person having custody of the child for purposes of determining whether such child requires special education, the school committee shall notify the parents or guardians of such child in writing in the primary language of the home of such referral, the evaluation procedure to be followed, and the child's right to an independent evaluation at clinics or facilities approved by the department under regulations adopted jointly by the department and the departments of mental health, developmental services and public health and the right to appeal from any evaluation, first to the department, and then to the courts; provided, however, that a school district shall not be required to refer a child for an evaluation solely because the child presents a risk of or fails to be promoted at the end of the school year; and provided further, that a school district shall not be required to refer a child for an evaluation solely because such child failed the statewide assessment tests authorized pursuant to section 11 of chapter 69.

*Within thirty days* after said notification the school committee shall provide an evaluation as hereinafter defined. The parents or guardians of such child shall be consulted about the content of such evaluation and the evaluators being used. ***Said evaluation shall include an assessment of the child's current educational status by a representative of the local school department, an assessment by a classroom teacher who has dealt with the child in the classroom, a complete medical assessment by a physician, an assessment by a psychologist, an assessment by a nurse, social worker, or a guidance or adjustment counselor of the general home situation and pertinent family history factors; and assessments by such specialists as may be required in accordance with the diagnosis including when necessary, but not limited to an assessment by a neurologist, an audiologist, an ophthalmologist, a specialist competent in speech, language and perceptual factors and a psychiatrist.*** Whenever the evaluation of the Individualized Education Program team indicates that the child has a disability that affects social skills development or that the child is vulnerable to bullying, harassment or teasing because of the child's disability, the Individualized Education Program shall address the skills and proficiencies needed to avoid and respond to bullying, harassment or teasing. Whenever an evaluation indicates that a child is blind, as defined in section one hundred and thirty-six of chapter six, said evaluation shall also include an assessment of the appropriateness of Braille instruction for the child. Such assessment shall include (i) the child's efficiency in reading and writing print as compared with children who do not have a disability; (ii) the child's stamina in using print before fatigue occurs; (iii) the child's prognosis for further sight loss; and (iv) the child's present competence in Braille and a detailed explanation as to whether instruction is appropriate, conducted by a certified teacher of students with visual impairments. Any such instruction found to be essential to meet such child's disability shall be available at a frequency and duration sufficient to meet fully the educational needs of the child. Braille instruction may be used in combination with other special education services appropriate to the child's educational needs. Whenever an evaluation indicates that a child has a disability on the autism spectrum, which includes autistic disorder, Asperger's disorder, pervasive developmental disorder not otherwise specified, childhood disintegrative disorder, or Rhetts's Syndrome, as defined in the most recent edition of the Diagnostic and Statistical Manual of the American Psychiatric Association, the Individualized Education Program (IEP) team, as defined by regulations of the department, shall consider and shall specifically address the following: the verbal and nonverbal communication needs of the child; the need to develop social interaction skills and proficiencies; the skills and proficiencies needed to avoid and respond to bullying, harassment or teasing; the needs resulting from the child's unusual responses to sensory experiences; the needs resulting from resistance to environmental change or change in daily routines; the needs resulting from engagement in repetitive activities and stereotyped movements; the need for any positive behavioral interventions, strategies, and supports to address any behavioral difficulties resulting from autism spectrum disorder; and other needs resulting from the child's disability that impact progress in the general curriculum, including social and emotional development. A child's Individualized Education Program, as defined in 20 USC ? 1401 (14), shall include a statement of measurable annual goals, including academic and functional goals, and a description of benchmarks or short-term objectives.





The department jointly with the departments of mental health, developmental services and public health shall issue regulations to specify qualifications for persons assessing said child.

These departments through their joint regulations may define circumstances under which the requirement of any or all of these assessments may be waived so long as an evaluation appropriate to the educational needs of the child is provided. ***Those persons assessing said child shall maintain a complete and specific record of diagnostic procedures attempted and their results, the conclusions reached, the suggested courses of special education best suited to the child's educational needs, and the specific benefits expected from such action.*** A suggested special education program may include family guidance or counseling services. When the suggested course of study is other than regular education those persons assessing said child shall present a method of monitoring the benefits of such special education and conditions that would indicate that the child should return to regular classes, and a comparison of expected outcomes in regular class placement.

If a child with a disability requires special education and related services in accordance with the provisions of the federal Individuals with Disabilities Education Act of 1975, the provisions of this chapter, and federal and state regulations promulgated pursuant thereto, such services shall be made available.

Upon completion of said evaluation, the child's parents may obtain an independent evaluation at school committee expense, from child evaluation clinics or facilities approved by the department jointly with the departments of mental health, mental retardation and public health, provided that the school committee may initiate within five school working days of the request, a hearing with the bureau of special education appeals to show that its evaluation is appropriate, in accordance with the provisions of the Individuals with Disabilities Education Act and regulations promulgated pursuant thereto; provided, however, that the parents may choose, on a voluntary basis, to share the costs of the independent evaluation with the school committee pursuant to a sliding fee scale established in regulations issued by the department pursuant to this section, in which case the school committee shall pay its share of the costs in accordance with the scale; provided, that, if the child's family income does not exceed 400 per cent of the federal poverty level established by the United States department of health and human services, parents shall pay no cost; provided, however, that the secretary of health and human services under section 13C of chapter 118E shall establish rates for educational assessments conducted or performed by psychologists and other trained certified educational personnel notwithstanding the provisions of any general or special law or rule or regulation to the contrary. A parent may obtain an independent evaluation at private expense from any specialist.

***The written record and clinical history from both the evaluation provided by the school committee and independent evaluation, if any, shall be made available to the parents, guardians, or persons with custody of the child. Separate instructions, limited to the information required for adequate care of the child, shall be distributed only to those persons directly concerned with the care of the child.*** Otherwise said records shall be confidential.

The department may hold hearings through the bureau of special education appeals regarding said evaluation, said hearings to be held in accordance with the provisions of chapter thirty A. The parents, guardians, or persons with custody may refuse the education program suggested by the initial evaluation and request said hearing by the department into the evaluation of the child and the appropriate education program. The hearing officer shall order such educational placement and services as he deems appropriate and consistent with this chapter to assure the child receives a free and appropriate public education in the least restrictive environment; provided, however, that a presumption shall exist to direct such placement to the regular educational environment. The hearing officer may determine, in accordance with the rules, regulations and policies of the respective agencies, that services shall be provided by the department of children and families, the department of mental retardation, the department of mental health, the department





of public health, or any other state agency or program, in addition to the program and related services to be provided by the school committee. Such order may provide for: the placement or services requested by the school committee, the placement or services requested by the parent, either of those placements or services with modifications, or such alternative programs or services as may be required to assure such development of such child. Said parents, guardians or persons with custody may either consent to or reject such placement, program or services. If rejected, and the program desired by the parents, guardian or person with custody is a regular education program, the department and the local school committee shall provide the child with the educational program chosen by the parent, guardian or persons with custody except where such placement would seriously endanger the health or safety of the child, substantially disrupt the program for other students or, if the child is currently placed in a special education program, deny the child a free appropriate public education. In such circumstances the local school committee may proceed to the superior court with jurisdiction over the residence of the child to make such showing. Said court upon such showing shall be authorized to place the child in an appropriate education program.

At any time, school committees and parents, guardians, or persons with custody of a student may voluntarily agree to seek resolution of any dispute through mediation provided by the bureau of special education appeals, provided, that the mediation process may not be used to deny or delay a parent's right to a due process hearing or to delay or deny any other rights afforded under this chapter and the federal Individuals with Disabilities Education Act of 1975, as so amended and shall be scheduled as soon as practicable after such agreement.

If the parents, guardians or persons with custody reject the educational placement recommended by the department and desire a program other than a regular education program, they may proceed to the superior court with jurisdiction over the residence of the child and said court shall be authorized to order the placement of the child in an appropriate education program.

During the course of the evaluations, assessments, or hearings provided for above, a child shall be placed in a regular education program unless such placement endangers the health or safety of the child or substantially disrupts such education program for other children.

*No parent or guardian of any child placed in a special education program shall be required to perform duties not required of a parent or guardian of a child in a regular school program.*

The educational progress of any child placed in a special education program shall be reviewed at least annually as set forth above. If such evaluation suggests that the initial evaluation was in error or that a different program or medical treatment would now benefit the child more, appropriate reassignment or alteration in treatment shall be recommended to the parents, guardians or persons having custody of the child. If the evaluation of the special education program shows that said program does not provide educational benefit to the child in the least restrictive environment, then such child shall be reassigned. If the evaluation shows that the child no longer needs special education services, the team shall recommend that the child no longer be considered a school age child with disabilities for the purposes of this chapter.

Evaluations and assessments of children and special education programs shall remain confidential and be used solely for the administration of special education in the commonwealth, including, but not limited to, inspection by the department and regional and state advisory councils to insure that every special education program does benefit the children there assigned.





The school committee of any city, town, or school district shall establish a parent advisory council on special education. Membership shall be offered to all parents of children with disabilities and other interested parties. The parent advisory council duties shall include but not be limited to: advising the school committee on matters that pertain to the education and safety of students with disabilities; meeting regularly with school officials to participate in the planning, development, and evaluation of the school committee's special education programs. The parent advisory council shall establish by-laws regarding officers and operational procedures. In the course of its duties under this section, the parent advisory council shall receive assistance from the school committee without charge, upon reasonable notice, and subject to the availability of staff and resources.

If a student's individual education plan necessitates special education services in a day or residential facility or an educational collaborative, the IEP team shall consider whether the child requires special education services and supports to promote the student's transition to placement in a less restrictive program. If the student requires such services, then the IEP shall include a statement of any special education services and supports necessary to promote the child's transition to placement in a less restrictive program.

<http://decodingdyslexiaoh.org/dyslexia-and-the-dsm-5/>

<https://www.understood.org/en/school-learning/special-services/special-education-basics/conditions-covered-under-idea>



## 20 U.S.C. § 6368(3)(4)(5)(6)(7)

### (3) Essential components of reading instruction

The term "essential components of reading instruction" means explicit and systematic instruction in —

- (A) phonemic awareness;
- (B) phonics;
- (C) vocabulary development;
- (D) reading fluency, including oral reading skills; and
- (E) reading comprehension strategies.

### (4) Instructional staff

The term "instructional staff"—

- (A) means individuals who have responsibility for teaching children to read; and
- (B) includes principals, teachers, supervisors of instruction, librarians, library school media specialists, teachers of academic subjects other than reading, and other individuals who have responsibility for assisting children to learn to read.

### (5) Reading

The term "reading" means a complex system of deriving meaning from print that requires all of the following:

- (A) The skills and knowledge to understand how phonemes, or speech sounds, are connected to print.
- (B) The ability to decode unfamiliar words.
- (C) The ability to read fluently.
- (D) Sufficient background information and vocabulary to foster reading comprehension.
- (E) The development of appropriate active strategies to construct meaning from print.
- (F) The development and maintenance of a motivation to read.

### (6) Scientifically based reading research

The term "scientifically based reading research" means research that —

- (A) applies rigorous, systematic, and objective procedures to obtain valid knowledge relevant to reading development, reading instruction, and reading difficulties; and
- (B) includes research that—
  - (i) employs systematic, empirical methods that draw on observation or experiment;
  - (ii) involves rigorous data analyses that are adequate to test the stated hypotheses and justify the general conclusions drawn;
  - (iii) relies on measurements or observational methods that provide valid data across evaluators and observers and across multiple measurements and observations; and
  - (iv) has been accepted by a peer-reviewed journal or approved by a panel of independent experts through a comparably rigorous, objective, and scientific review.

### (7) Screening, diagnostic, and classroom-based instructional reading assessments

(A) In general - The term "screening, diagnostic, and classroom-based instructional reading assessments" means —

- (i) screening reading assessments;
- (ii) diagnostic reading assessments; and
- (iii) classroom-based instructional reading assessments.

#### (B) Screening reading assessment

The term "screening reading assessment" means an assessment that is—

- (i) valid, reliable, and based on scientifically based reading research; and
- (ii) a brief procedure designed as a first step in identifying children who may be at high risk for delayed development or academic failure and in need of further diagnosis of their need for special services or additional reading instruction.

#### (C) Diagnostic reading assessment

The term "diagnostic reading assessment" means an assessment that is—

- (i) valid, reliable, and based on scientifically based reading research; and
- (ii) used for the purpose of—
  - (I) identifying a child's specific areas of strengths and weaknesses so that the child has learned to read by the end of grade 3;
  - (II) determining any difficulties that a child may have in learning to read and the potential cause of such difficulties; and
  - (III) helping to determine possible reading intervention strategies and related special needs.

#### (D) Classroom-based instructional reading assessment

The term "classroom-based instructional reading assessment" means an assessment that—

- (i) evaluates children's learning based on systematic observations by teachers of children performing academic tasks that are part of their daily classroom experience; and
- (ii) is used to improve instruction in reading, including classroom instruction.





## Decoding Dyslexia Massachusetts (DD-MA) References - Parents and Advocates

### U.S. Code › Title 20 › Chapter 70 › Subchapter I › Part B › Subpart 1 › § 6368 Definitions

<https://www.law.cornell.edu/uscode/text/20/6368>

This is a reference to the definitions of Reading, and the Essential Components of Reading Instruction (ECORI) as well as definitions of scientifically based reading research, and screening, diagnostic, and classroom-based instructional reading assessments.

### The New Jersey Dyslexia Handbook

#### A Guide to Early Literacy Development & Reading Struggles

<http://www.state.nj.us/education/specialed/dyslexia/NJDyslexiaHandbook.pdf>

This resource has a wealth of references and detailed information not only about dyslexia but about the progression of learning to read for all students.

### U.S. Dept. of Ed. Dear Colleague Letter on Dyslexia

<https://www2.ed.gov/policy/speced/guid/idea/memosdcltrs/guidance-on-dyslexia-10-2015.pdf>

### The International Dyslexia Association: Knowledge and Practice Standards

<https://dyslexiaida.org/knowledge-and-practices/>

These are teaching standards and can be helpful as a point of reference for ensuring that a student is getting instruction that is meeting the standards agreed upon by a consensus of experts in the field based on experts in the field and research.

### Reading in the Brain: The New Science of How We Read

Book by Stanislas Dehaene

Video of talks by the same scientist: <https://www.youtube.com/watch?v=25GI3-kiLdo> (about 20 minutes) <https://www.youtube.com/watch?v=MSy685vNqYk> (about an hour)

### Language at the Speed of Sight How We Read, Why So Many Can't, And What Can Be Done About It

Book by Mark Seidenberg

Audio/video talks by same author:

**The Complicated Story of Reading in America** <http://www.wnyc.org/story/edcf0a3c2218622914cfeaef/> <https://beta.prx.org/stories/195742> <http://brightsightgroup.com/speakers/mark-seidenberg/>

### Hard to Read How American schools fail kids with dyslexia

Story: Emily Hanford <https://www.apmreports.org/story/2017/09/11/hard-to-read>



### **Reading Universe**

<http://readinguniverse.com>

This website is free and parents and teachers can learn about the Structure of Literacy, including phonological awareness, decoding and phonics, and reading fluency. This is a great place to go if you are looking for a clear and accurate definition for a term like "phonemic awareness".

### **The Reading Well: A Virtual Well of Dyslexia Resources**

<http://www.dyslexia-reading-well.com/>

This website is a wonderful resource providing information to help you learn about all aspects of dyslexia from diagnosis to effective reading programs and assistive technologies. For example, if you need help understanding the 44 sounds (phonemes) of the English language, look under the bookmark entitled, Step 1: Understand.

### **Tufts University Center for Reading and Language Research Naming Speed Deficit FAQs**

<http://ase.tufts.edu/crlr/documents/FAQNamingSpeedDeficit.pdf>

### **2017 Version of the Hasbrouck-Tindal National Oral Reading Fluency Norms Chart**

<http://www.readingrockets.org/pdfs/Fluency-Norms-2017.pdf>

### **"HotSheets" Describing Effective Practices for Reading Instruction and More!**

[http://teachingld.org/hot\\_sheets](http://teachingld.org/hot_sheets)

HotSheet 1: Homework, HotSheet 2: Phonological Awareness, HotSheet 3: Reading Fluency, HotSheet 4: Reading Comprehension, and HotSheet 5: Written Expression

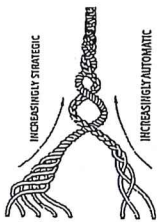


**LANGUAGE COMPREHENSION**

Background Knowledge  
Vocabulary Knowledge  
Language Structures  
Verbal Reasoning  
Literacy Knowledge

**WORD RECOGNITION**

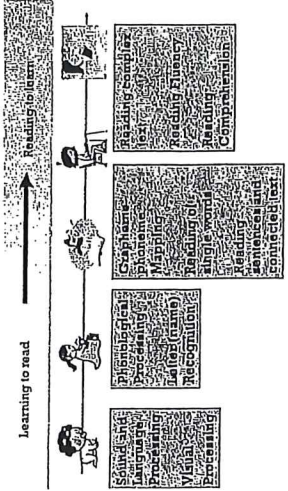
Phonological Awareness  
Decoding & Spelling  
Sight Recognition



# Stages of Reading Development

<b>Pre-reading</b>	Infant - Kindergarten (0mo. - 6yrs.)	Knows books, recognizes letters, phonological awareness, conventions of print
<b>Decoding</b>	Grades 1-2 (6-7yrs.)	Learns code, recognizes sight words
<b>Fluency</b>	Grades 2-3 (7-9yrs.)	Consolidates skills learned, builds fluency
<b>Reads to learn</b>	Grades 4-8 (9-14yrs.)	Relates print to ideas, one viewpoint, text limited in technical complexity
<b>Multiple views</b>	High School (14-18yrs.)	Deals with layers of concepts

(Chall, 1983)



I.D.E.A. listed skill	Measure of ability	Present level for this skill What measures this? Curriculum or normed?	ECOR that covers the skill	Notes/Concerns State of Common Core standards - what grade level? what are peers doing?
A. The skills and knowledge to understand how phonemes, or speech sounds, are connected to print.	how many phonemes does/ did he know? Letter /sound knowledge? Print/letter formation? Elision? From Simple phonological processing like initial phoneme sounds to full phonemic proficiency, quickly manipulating and substituting sounds.		explicit and systematic instruction in— (A) phonemic awareness; (sounds only) (B) phonics; (sound to print - print to sound)	

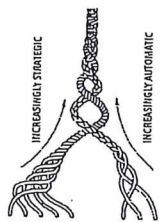
READING ROPE

**LANGUAGE COMPREHENSION**

- Background Knowledge
- Vocabulary Knowledge
- Language Structures
- Literal Reasoning
- Inferential Knowledge

**WORD RECOGNITION**

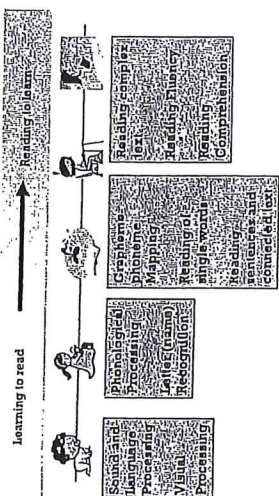
- Phonological Awareness
- Decoding & Spelling
- Sight Recognition



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<p><b>B. The ability to decode unfamiliar words.</b></p>	<p>What words are decodable? Encodable? How far along in a systematic presentation of orthography and phonics has the student progressed?</p>		<p>explicit and systematic instruction in— (A) phonemic awareness; (B) phonics; and (C) vocabulary development;</p>	
<p><b>C. The ability to read fluently.</b></p>	<p>Compared to age level peers, what measures of : rate, accuracy and prosody identify reading fluency? Are the structures of syntax and grammar mastered?</p>		<p>(C) vocabulary development; (D) reading fluency, including oral reading skills; and</p>	
<p><b>D. Sufficient background information and vocabulary to foster reading comprehension.</b></p>	<p>If not reading with the fluency of same age peers, how is age level interesting and curriculum based information accessible to the student? What structural syntax, grammar and morphology is mastered?</p>		<p>All of the above and (C) vocabulary development;</p>	



READING EDGE

LANGUAGE COMPREHENSION

Background Knowledge  
Vocabulary Knowledge  
Grammar Knowledge  
Visual Knowledge  
Oral Knowledge

WORD RECOGNITION

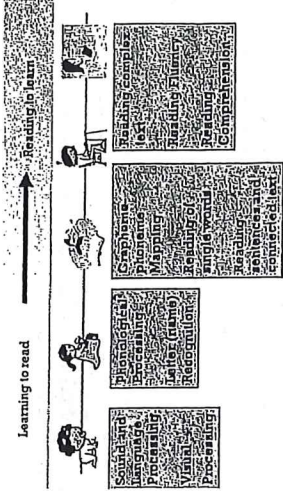
Phonological Awareness  
Decoding & Spelling  
Sight Recognition



## Stages of Reading Development

<b>Pre-reading</b>	Infant - Kindergarten (0mo. - 0yrs.)	Knows books, recognizes letters, phonological awareness, conventions of print
<b>Decoding</b>	Grades 1 - 2 (6 - 7 yrs.)	Learns code, recognizes sight words
<b>Fluency</b>	Grades 2 - 3 (7 - 9 yrs.)	Consolidates skills learned, builds fluency
<b>Reads to learn</b>	Grades 4 - 8 (9 - 14 yrs.)	Relates print to ideas, one viewpoint, text limited in technical complexity
<b>Multiple views</b>	High School (14 - 18 yrs.)	Deals with layers of concepts

(Chall, 1983)



E. The development of appropriate active strategies to construct meaning from print.	Active strategies require in depth knowledge of morphology, syntax and grammar.	All of the above plus ... (E) reading comprehension strategies.
F. The development and maintenance of a motivation to read.	Success at the precocious levels is the most valuable way of establishing intrinsic levels of motivation to read.	All of the above.

The Reading Universe™  
 Understanding the Big Picture: A Professional Development Guide to Illustrate the Universe of Skills for a Structured Approach to Early Literacy Instruction

ON-GOING ASSESSMENT: Universal Screening, Benchmark, Diagnostic, Progress Monitoring, Formative, and Summative		X		=	
DECODING		LANGUAGE		COMPREHENSION	
<p><b>CONCEPTS of PRINT</b></p> <p>Understanding that written language represents meaningful oral language and that books and print have structure ensures students understand how print works.</p>	<p><b>PHONOLOGICAL AWARENESS</b></p> <p>Having the ability to recognize and manipulate the units of sound in language (without print) prepares a student to map speech sounds to letter sounds in printed words.</p>	<p><b>PHONICS</b></p> <p>Understanding the systematic, predictable relationship between written letters and spoken sounds ensures that students can decode real and regularly spelled nonsense words.</p>	<p><b>FLUENCY</b></p> <p>Reading with accuracy, reasonable rate, and appropriate expression predicts that a student is comprehending.</p>	<p><b>ORAL LANGUAGE</b></p> <p>The ability to produce words, sentences, and meaningful discussion provides a strong foundation for reading.</p>	<p><b>VOCABULARY</b></p> <p>The ability to recognize and understand the meaning of oral and written words is pivotal in becoming a fluent reader and comprehending text.</p>
<p><b>Basic Book Parts</b> cover, title, illustration, author, illustrator, table of contents, etc.</p>	<p><b>Articulation</b> begins when children start speaking and pronunciation improves as phonological skills are taught explicitly.</p>	<p><b>Alphabetic Principle</b> letter name/letter sound association</p>	<p><b>Accuracy</b> percentage of words read correctly</p>	<p><b>Phonological Expression</b> proper verbal production of words</p>	<p><b>COMPREHENSION</b></p> <p>Comprehension is the goal of reading. It is the active and purposeful pursuit of understanding the author's message and gaining knowledge through print.</p>
<p><b>Directionality</b> front and back, top to bottom, left to right, return sweep</p>	<p><b>Syllables</b> blend, segment, isolate, manipulate (delete &amp; add)</p>	<p><b>Beginning Phonics</b> vc and cvc words, consonant digraphs and trigraphs, double consonant endings, blends, inflectional suffixes (and related rules for 1-1-1 doubling, changing y to i), and 2-syllable words with short vowels</p>	<p><b>Rate</b> number of words read correctly</p>	<p><b>Knowledge of Words</b> access prior knowledge, develop word consciousness, and explicitly teach new words</p>	<p><b>Levels of Understanding</b> literal, structural, inferential</p>
<p><b>Tracking</b> pointing to words as they are being read aloud or when reading independently</p>	<p><b>Onset and Rhyme</b> blend, segment, recognize rhyming words, produce rhyming words</p>	<p><b>Advanced Phonics</b> schwa, long vowel spelling patterns, vowel-er, diphthongs, hard and soft c and g, consonant-le (ole), silent consonant letters, dropping e to add vowel suffix, affixes</p>	<p><b>Expression</b> phrasing, intonation, acknowledgment of punctuation, and appropriate emphasis</p>	<p><b>Morphology</b> the meanings and origins of base words (free morphemes), roots (bound morphemes) and affixes</p>	<p><b>Strategies and Products of Understanding Text</b> cognitive tools used to derive multiple dimensions of meaning from text</p>
<p><b>Text Features</b> words as units, letters in words, sentences as strings of words with capital letter and ending punctuation, first and last word in sentence, on page, in book, headings, sub-headings, captions, etc.</p>	<p><b>Phonemes</b> isolate, identify, categorize, blend, segment, manipulate (delete, add, substitute)</p>	<p><b>Irregularly Spelled High Frequency Words</b> Irregularly spelled HF words are taught in a usage sequence while regularly spelled HF words are taught in the phonics scope and sequence.</p>	<p><b>Syntax</b> the system of rules governing word order in sentences</p>	<p><b>Syntax</b> the system of rules governing word order in sentences</p>	<p><b>Types and Structures of Text</b> literary and informational text</p>
<p><b>WRITING: letter formation, handwriting, encoding, grammar, mechanics, creative expression</b></p>		<p><b>PRAGMATICS</b> use of language in social context</p>		<p><b>PRAGMATICS</b> use of language in social context</p>	



BAKERSFIELD READING INSTITUTE



Reading Universe™

**STRUCTURED LITERACY INSTRUCTION: Sequential, Systematic, Explicit, Cumulative, To Mastery**



# Reading Grade-Level Comparison Chart

Descriptor	Grade Level	Fountas & Pinnell (Guided Reading)	Basal Level	DRP (Degrees of Reading Power)	Reading Recovery	DRA Level	Lexile Level
Emergent	Kindergarten Grade 1	A	Readiness		1	A & 1	Beginning Reader
Early	Kindergarten Grade 1	B			2	2 & 3	
	Kindergarten Grade 1	C	PP1		3 & 4	4	
	Grade 1	D	PP2	25-30	5 & 6	6	100-400
	Grade 1	E	PP3		7 & 8	8	
	Grade 1	F	Primer		9 & 10	10	
	Grade 1	G			11 & 12	12	
Transitional	Grade 1	H	Grade 1		13 & 14	14	
	Grades 1 & 2	I			15, 16 & 17	16	
	Grade 2	J	Grade 2	30-44	18, 9 & 20	18	300-600
	Grade 2	K				20	
	Grade 2	L				24	
	Grades 2 & 3	M				28	
Self-Extending	Grade 3	N	Grade 3	44-54		30	500-800
	Grade 3	O				34	
	Grades 3 & 4	P				38	
Advanced	Grade 4	Q & R	Grade 4	40-42		40-44	600-900
	Grade 5		Grade 5	44		50	700-1000
	Grade 6	S-Z	Grade 6			60	800-1050
	Grade 7					70	850-1099
	Grade 8					80	900-1150
	Grade 9						1000-1199
	Grade 10						1025-1200+
	Grade 11						1050-1300+
	Grade 12						1075-1400+

# How Do Audiobook Providers Compare?





<b>Eligible Audience</b>	Dyslexic, LD, blind/visually impaired, physically disabled	General public	Dyslexic, LD, blind/visually impaired, physically disabled
<b>Title Collection</b>	65% Textbooks 35% Popular	0% Textbooks 100% Popular	5% Textbooks 95% Popular/magazines
<b>Narration</b>	Human-read by subject matter experts	Read by authors and celebrities	Read by machine
<b>Special Features For Blind Users</b>	Picture image description and audio playback	Audio playback	Audio playback
<b>Enhanced Navigation</b>	Yes <i>Flexibility in providing direct access to pages</i>	Yes <i>Shared bookmarking across multiple devices</i>	Yes <i>Flexibility in providing direct access to pages</i>
<b>Highlighted Text with Audio</b>	Yes, on 2000+ titles <i>At paragraph and sentence level</i>	Yes, on Kindle only	Yes, requires app purchase <i>Basic navigation app at no cost</i>
<b>App Price</b>	Free	Free	\$19.99 <i>Free "lite" app also available</i>
<b>Live Customer Service</b>	Yes	Yes	No
<b>Educator Support</b>	Free live and on-demand Teacher Ally training webinars and educational sessions with industry experts	No	Online tutorials for student registration and book selection
<b>Educator Portal</b>	Yes, Teacher Ally <i>Platform to monitor and report student progress</i>	No	No
<b>Professional Development Program</b>	Yes <i>Online and on-site, CEU-eligible</i>	No	No
<b>Student Scholarship Program</b>	Annual opportunity of \$50,000+	No	No

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