




Evaluating for Dyslexia in the Schools: Guidance for Screening, Intervention & Evaluation



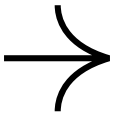
**The New York Association
of School Psychologists**

February 2025



Evaluating for Dyslexia in the Schools: Guidance for Screening, Intervention, & Evaluation

Executive Summary



The New York Association of School Psychologists (NYASP) is the state-wide professional association representing the thousands of school psychologists working in New York's public and private schools, Early Intervention and preschool programs, colleges and universities, and New York State agencies (e.g., OPWDD, OMH). The mission of the Association is empower school psychologists to enhance the learning, as well as the psychological well-being of youth and families across all environments. School psychologists are highly trained in both psychology and education. Their training emphasizes preparation in mental health and educational interventions to address psychopathology and other barriers to learning, child development, learning, behavior, motivation, curriculum and instruction, assessment, consultation, collaboration, school law, and systems.

NYASP recognizes the importance of addressing literacy instruction in our schools, with particular focus on examining appropriate screening methods, academic interventions, and other educational supports for students in kindergarten through grade 5. As school psychologists are typically the primary school personnel who assess, address, and collaborate in the identification of learning disorders, such as dyslexia, NYASP has prepared this document to provide support to New York State school psychology practitioners and school districts.

Good literacy skills are critical to children's success in school and life. As New York State moves to incorporate the Science of Reading into curricula, it is important to identify the necessary components required for strong reading skills, as well as utilize available research and evidence-based practices and interventions to support students' acquisition of reading skills and build strong literacy skills.

The Science of Reading (SoR) encompasses over 50 years of research related to how the brain works and how children most effectively learn how to read and write. Using strategies that have the support of rigorous scientific research, most children can learn how to read. The SoR provides scientifically based recommendations for effective instruction, intervention, and remediation of reading, writing, and language-based skills based on corroborating research evidence from numerous fields. The SoR provides the needed framework and evidence to intervene effectively with students who have, or are at-risk of developing, dyslexia.

A Multi-Tiered System of Supports (MTSS) approach can benefit students with reading issues since it is designed to be preventative via the use of data that identifies students who might be at risk of adverse academic outcomes, and provides an intervention framework, including screening, instruction, targeted intervention, and evaluation.

School psychologists are involved in all tiers of the MTSS framework. At Tier 1, they provide guidance on developmental considerations in relation to acquisition of reading skills. School psychologists can also help identify appropriate screening measures, as well as consult on the necessary components of reading instruction.

School psychologists consult with school teams on Tier 2 interventions, and are aware of the evidence for basing interventions on a well-validated model of reading instruction. They also ensure that interventions students receive are based on individual student data from reliable/valid screening and progress monitoring tools.

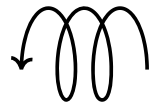
School psychologists are highly trained in psychology, education, and evaluation. At Tier 3 school psychologists are an integral part of the evaluation process, which may occur when students do not progress in Tiers 1 and 2. When evaluating students for possible reading disabilities, such as dyslexia, school psychologists ensure that evaluations include measures that are sufficient, and include assessments for phonological skills, orthographic skills, rapid automatic naming skills, reading fluency, encoding, and word reading.

Both federal and state law allows NYS certified school psychologists to diagnose dyslexia. NYS Education Law Article 153 allows school psychologists to diagnose for the purposes of educational planning, such as CSE classification and Section 504 services and accommodations. Additionally, at the federal level, the law and guidance memos from the Office of Special Education and Rehabilitative Services (OSERS) allows and encourages NYS school psychologists to identify dyslexia, share it with stakeholders (teachers, parents), write it in IEPs and other eligibility documents.

NYASP encourages school districts to fully utilize school psychologists at each tier of the MTSS framework.



Evaluating for Dyslexia in the Schools: Guidance for Screening, Intervention, & Evaluation



School Psychologists are key team members in the evaluation and intervention planning process for students with suspected learning needs. Concerns with the acquisition of reading skills, in particular, is an area in which many students are referred to a school-based team. A small portion of these students will go on to be referred for evaluation of suspected learning disabilities in the area of reading. One of the most common profiles of students with learning disabilities in reading is dyslexia. Therefore, it is very likely that school psychologists will be called upon to evaluate, and provide suggested recommendations for, students whose cognitive, academic, and learning profiles support the presence of dyslexia.

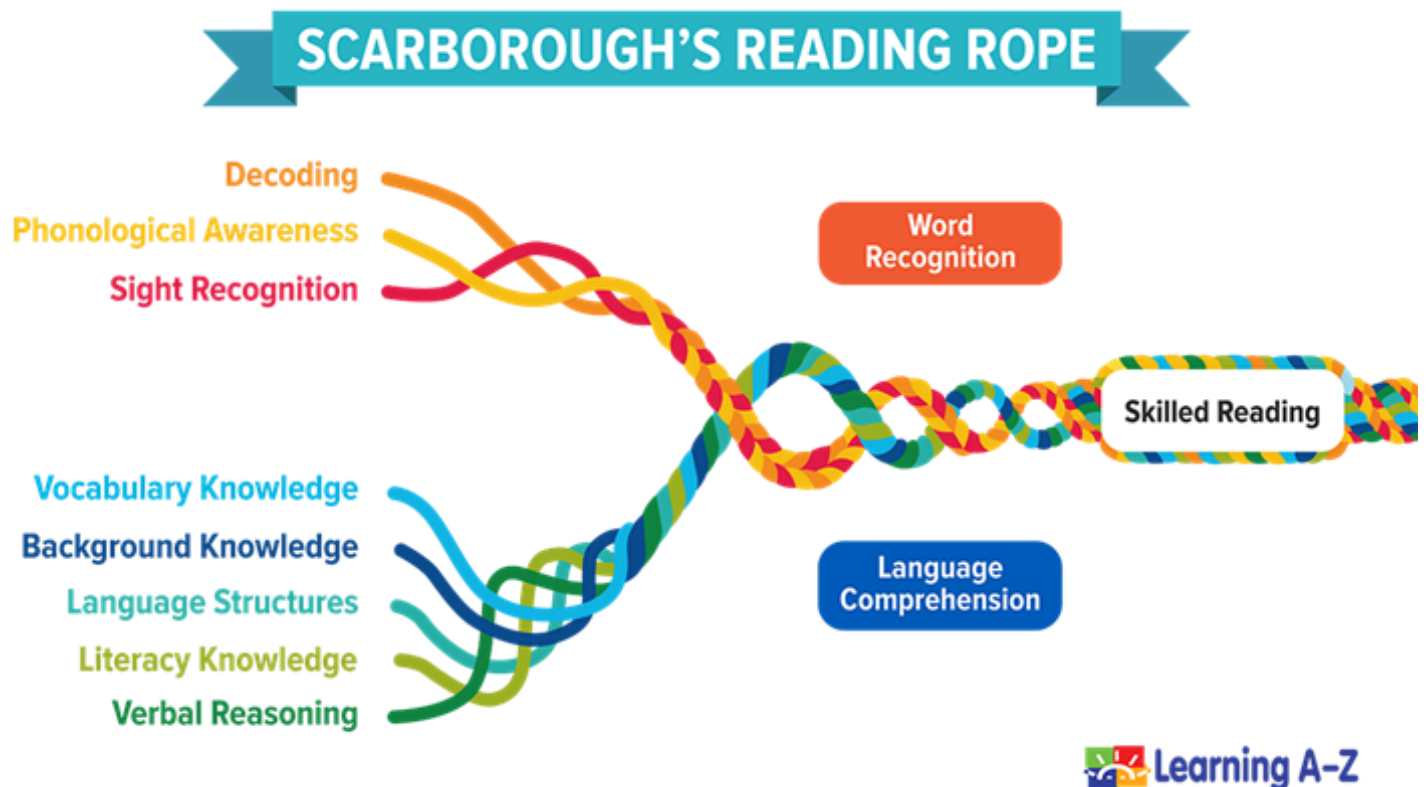
Unfortunately, among all stakeholders, there are broad and ingrained misconceptions regarding who can, and cannot, identify dyslexia, and what tools can be used to identify dyslexia. This guidance document seeks to provide information on evaluating and identifying dyslexia in school. The guidance in this document includes legal citations on what school psychologists are able to do within the school setting, what is required by state educational guidelines (i.e., Part 200), as well as what has been clarified by the Office of Special Education and Rehabilitative Services (OSERS, 2015).

What is the Science of Reading?

The Science of Reading (SoR) encompasses over 50-years of research related to how the brain works and how children most effectively learn how to read and write. This research spans multiple disciplines, and is not specific to education or psychology (The Reading League, 2021). While some believe that this is the latest “pendulum swing” in the field of education, the premise is rooted in thousands of experimental or quasi-experimental studies conducted in multiple languages studying brain wave patterns, reading achievement, and assessment and intervention. If using strategies aligned with science, we should be able to help most children learn how to read, with only 2-3% not reaching proficiency (Kilpatrick, 2015). Yet, the National Assessment of Educational Progress results indicate that we are leaving far too many students behind by failure to use evidence-based practices (NAEP, 2022).

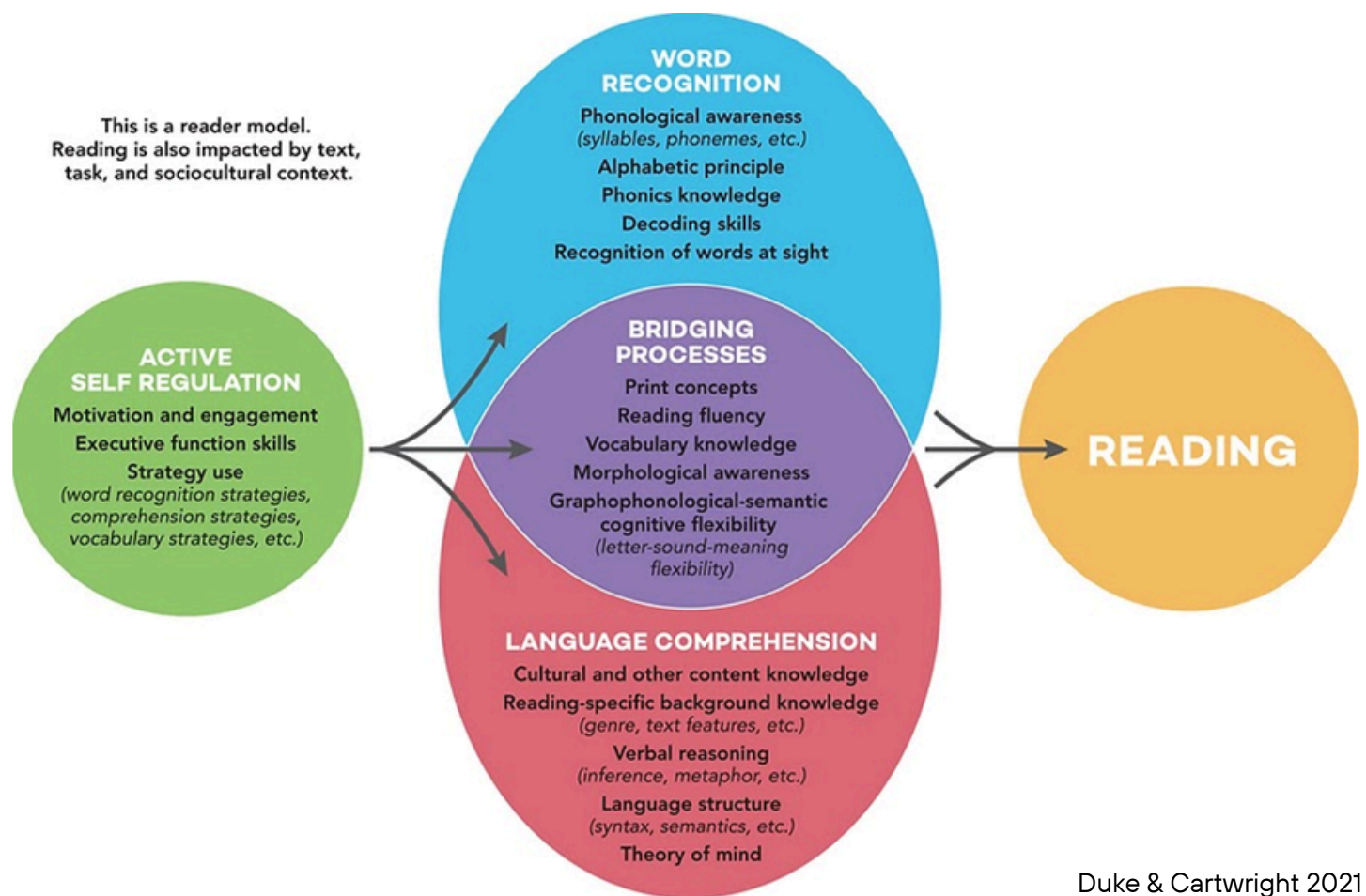
One of the primary conceptual frameworks that has emerged from research is the Simple View of Reading. The Simple View of Reading (Gough & Tunmer, 1986) is a multiplicative formula which states that reading comprehension (RC) is a product of word recognition (WR) and language comprehension (LC). The mathematical formula would be $WR \times LC = RC$. Essentially, individuals will have difficulty making sense of what they are reading if there are deficits in either factor. **Word recognition** involves the ability to accurately and efficiently identify words whereas **language comprehension** is the ability to understand language, whether in written or oral form. Expanding on this model, Scarborough

(2001) broke down each of the factors into greater detail, indicating that there are multiple strands contributing to fluent reading and comprehension. The word recognition components include **phonological awareness, decoding, and sight recognition** (“knowledge of the word”). This is in contrast to “knowledge of the world” which is reflected in language comprehension and comprises **background knowledge, vocabulary, language structures, verbal reasoning, and literacy knowledge**. Word recognition must become increasingly more automatic while language comprehension must become increasingly strategic in order for skilled reading and reading comprehension to occur.



Recently, Duke and Cartwright (2021) reviewed research showing that between 9 and 34.5% of reading comprehension difficulties cannot be explained by deficits in word-level reading or language comprehension, and proposed the Active View of Reading. The Active View is an evolution of the Simple View of Reading that includes both word-level reading and language comprehension as well as processes related to engagement and motivation (such as motivation and executive functioning), and processes that bridge both word-level reading and language comprehension (like print concepts, reading fluency, and morphological awareness). Duke and colleagues (2023) have established that interventions derived from the Active View of Reading have medium to large effect sizes: the effect size for word-level reading interventions was 0.44; for language comprehension, 0.62; for active self-regulation, 0.46; for bridging processes, 0.70.

Active View of Reading



The Intersection of the Science of Reading and Dyslexia

The Science of Reading (SoR) is based on research and best practice recommendations from several different fields of study including education, school psychology, cognitive psychology, linguistics, and neuroscience, in addition to research conducted in multiple languages. The SoR provides guidance to teachers and other professionals regarding effectively teaching reading and writing. The International Dyslexia Association (IDA) defines dyslexia as a life-long language-based learning disorder. It affects a person's ability to read and can also affect other language skills such as writing, spelling, and pronouncing words. While all children will benefit from a specific, structured, language-based and direct instruction approach to reading, children with dyslexia will especially profit. The SoR provides scientifically-based recommendations for effective instruction, intervention, and remediation of reading, writing, and language-based skills based on corroborating research evidence from numerous fields. The SoR provides the needed framework and evidence to intervene effectively with people who have, or are at-risk of developing, dyslexia.

What is Dyslexia?

According to the International Dyslexia Association (2002):

Dyslexia is a specific learning disability that is neurobiological in origin. It is characterized by difficulties with accurate and/or fluent word recognition and by poor spelling and decoding abilities. These 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.

Within the realm of special education law, dyslexia is included in the definition of specific learning disability. Both IDEA and NYS Part 200 of the Commissioner's Regulations define specific learning disability as (US Department of Education 2018; NYSED 2024):

A disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which manifests itself in an imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations, as determined in accordance with section 200.4(j) of this Part. The term includes such conditions as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia and developmental aphasia. The term does not include learning problems that are primarily the result of visual, hearing or motor disabilities, of an intellectual disability, of emotional disturbance, or of environmental, cultural or economic disadvantage (IDEA 2018, Section 300.8, (c) (10)(ii)).

Given IDA's definition including difficulties with accurate and/or fluent word recognition, dyslexia would fit under the categories of learning disability in basic reading skills or reading fluency. It likely would not relate to reading comprehension; rather, deficits in reading comprehension are perceived to be a secondary consequence.

The IDA's definition of dyslexia, which is based on decades of accumulated evidence from fields such as cognitive psychology and neuroscience, highlights an important fact: dyslexia is "typically" the result of "a deficit of the phonological component of language." Therefore, a key defining characteristic of dyslexia, and one that might help separate it from other learning disabilities in reading, is that it involves a core phonological deficit. Phonological skills include the ability to perceive and manipulate the individual sounds in spoken language and to map those sounds onto letters and clusters of letters. As children acquire phonological skills and gain more experience reading words, they "bond the spellings, pronunciations, and meanings of specific words in memory" in a process called "orthographic mapping" (Ehri, 2014). Phonological skills are critical for early readers; therefore the identification of students with phonological deficits, and the quick remediation of those deficits, is very important.

Another important skill implicated in reading, which may also be an area of difficulty for students with dyslexia, is rapid automatic naming. While phonological skills are considered the core deficit, there is evidence that students with dyslexia may also experience a deficit in rapid naming – "the speed with which one can name visually-presented familiar stimuli" (Norton et al., 2014, p. 2). For students who have deficits in both phonological awareness and rapid naming, reading difficulties may then be

especially delayed. This is the “double deficit” hypothesis of dyslexia; deficits in both phonological processing and rapid naming can cause word-level reading difficulties, and individuals with both deficits show the greatest impairment in reading (Wolf & Bowers, 1999).

Therefore, there is broad consensus that dyslexia is a specific learning disability that:

- Affects word-level reading and spelling
- Often involves a core phonological deficit
- May involve deficits in working memory and rapid automatic naming
- Is often, but not always, unexpected in relation to overall intellectual ability and other cognitive abilities
- Has secondary effects on reading fluency, vocabulary acquisition, reading comprehension, and written expression

What dyslexia is **not**:

- A visual disorder
- Seeing words backwards or moving around the page
- Related to IQ
- Individuals with dyslexia can differ in terms of overall intellectual development, ranging from low to high intelligence
- Incurable
- Individuals with dyslexia may continue to have difficulties throughout their educational careers, but phonological skills are remediable
- Individuals with dyslexia may continue to have difficulties throughout their educational careers, but phonological skills are remediable
- Individuals with dyslexia *can* learn to read proficiently

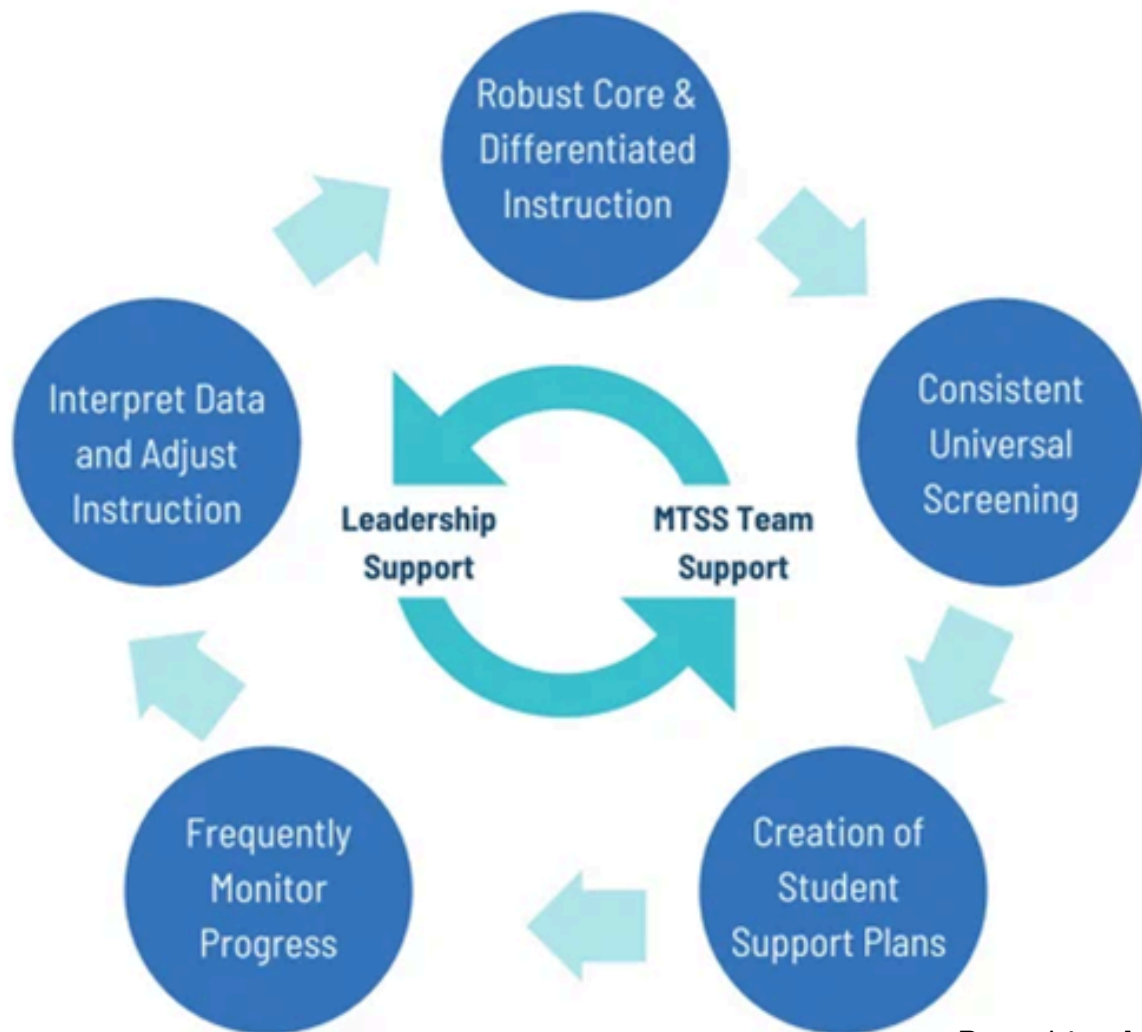
Addressing Dyslexia within a Multi-Tiered System of Supports (MTSS)

MTSS and Dyslexia

A Multi-Tiered System of Supports (MTSS) model is a proactive and preventative framework that integrates data and instruction to maximize student achievement and support students’ social, emotional, and behavior needs from a strengths-based perspective (<https://mtss4success.org>).

It can be viewed as “an umbrella that encompasses both academic and social or behavioral instruction, seeing them as intimately connected and important for the health and well-being of the whole child” (Brown, 2022). The goal of an MTSS model is to use data-driven decision-making and personalized support to improve academic, behavioral, and emotional outcomes for every student (<https://amplify.com/>).

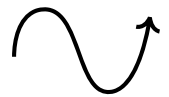
An MTSS approach can benefit students with dyslexia because it is designed to be preventative via the use of data that identifies students who might be at risk of adverse academic, behavioral, and/or social-emotional outcomes. The use of early and regular screening of basic academic skills as part of an MTSS model allows educators to identify students' strengths and areas of need early in their schooling. Such an approach enables educators to intervene at the first signs of a struggle with component reading skills such as phonemic awareness, word reading, rapid automatized naming, which are the early warning signs of learning issues such as dyslexia. According to Miciak and Fletcher (2020), a dyslexia identification approach that relies on achievement and instructional data generated within a school-wide MTSS approach is "dynamic, treatment oriented, preventive, and less likely to result in diagnostic problems because of its recursive and sequential nature" (p. 350).



Branching Minds 2024

According to Branching Minds (<https://www.branchingminds.com>), a student who is not successful with reading may react by exhibiting inappropriate "acting out" behaviors or developing negative feelings about school and learning. Such behavior may lead to the student missing out on instruction and, therefore, falling further behind. The struggles related to reading and writing can significantly impact students' self-esteem and lead to anxiety, frustration, and/or emotional distress. An MTSS approach will help to identify the intersection of such issues and address needs through a variety of supports such as counseling for the students and/or consultation for teachers and parents (Da Vinci Collective: <https://davincicollaborative.com>).

Tier 1 - Universal Screening and Reading Instruction



Universal screening, usually conducted three times a year, is used to identify students who may be failing to reach proficiency and also serves as benchmark testing to determine how students as a group are performing (Kovaleski & Pedersen, 2008). Universal screening of all students on factors known to be important predictors of reading and writing can aid schools in quick identification of students who may be struggling to develop important skills for becoming proficient readers. When these students are identified early, more targeted instruction can be provided to strengthen skills or remediate weaknesses, with the goal of changing the child's trajectory of developing a disability, such as dyslexia.

It is important to emphasize that screening measures are intended to cast a broad net to identify students with characteristics that may, or may not, be indicative of future risk for developing disabilities like dyslexia and dysgraphia. Not all students who are identified as at-risk on these screening measures will go on to develop these disorders, and there are many exclusionary factors that need to be evaluated to determine if external factors are the **primary** reason for the child's poor performance (e.g., lack of adequate instruction in phonics, cultural or linguistic differences, other vision or motor based disorders, etc.).

At different ages and grade levels, there are common "red flags" seen in children who struggle to learn to read or be identified as a student with dyslexia. It is thus important to choose screening measures that include tasks that are important developmental indicators for a given age or grade level. For example, in the early elementary grades, phonemic awareness skills such as rhyming, blending, and segmentation of sounds, as well as phonics skills such as knowledge of letter-sound relationships, are essential building blocks for later reading and spelling development. As a child ages, the ability to apply phonological knowledge to read more complex words fluently becomes crucial; when children lack automaticity and fluency at single word level, their comprehension skills often suffer (Petscher et al., 2019).

Developmental Considerations when Screening for Dyslexia

Kindergarten through 2nd grade:

- Difficulty with rhyming activities or insensitivity to the sound structures in words to hear similarities and differences
- Difficulty with phonemic awareness tasks such as blending sounds, segmenting sounds, isolating sounds in words, and manipulating sounds in words
- Difficulty learning letters and letter-sound relationships
- Difficulty remembering common spelling patterns
- Difficulty with rapid automatized naming tasks including letter sound or naming-fluency

- Difficulty with phonological memory, such as repetition of nonsense words
- Difficulty applying rules of phonics to read words, which may result in slow labored reading using a letter sound by letter sound approach, or quick inaccurate “guesses” of the word based on visual features of the word
- Avoidance of reading, especially when reading aloud

3rd through 5th grade:

- Avoiding reading and writing tasks, especially reading aloud
- Difficulty decoding words especially uncommon or complex words such as multisyllabic words
- Difficulty with oral reading fluency
- Difficulty with reading comprehension, especially when reading independently
- Overuse of short, simple easy-to-spell words in writing
- Greater difficulty with math word problems due to the requirement that math problems be read for successful completion
- Significant fatigue related to reading and writing
- Struggling to finish assignments and tests that involve reading and writing
- Continued difficulty with phonics and phonological awareness tasks

Middle School and High School:

- Avoidance of reading, especially reading aloud
- Anxiety related to school, school assignments, and tests due to the demands of reading
- Difficulty decoding words especially uncommon or complex words such as multisyllabic words
- Slow decoding of words
- Difficulty spelling
- Difficulty with reading comprehension stemming from weak decoding skills and impacted fluency
- Difficulty finishing assignments and tests on time due to slow and labored reading and spelling
- Extreme fatigue related to reading and writing
- Continued difficulty with phonics and phonological awareness tasks

Tier 1 - Screening Tools for Dyslexia

The National Center on Intensive Intervention publishes a list of screeners, progress monitoring systems, and interventions, with information about effectiveness for each grade level, subject, and type of student (general education, special education, ELL) under the ‘Tools Charts’ tab:

<https://charts.intensiveintervention.org/>

Screening is the starting point for identifying children who may be at risk of developing disorders. However, inherent in these screening measures is the risk to potentially over-pathologize or over-identify children as having disorders. A low performance score on a screening measure should not be taken as an immediate diagnosis of an educational disability. Instead, it means that further investigation is warranted.

At Tier 1, reading instruction should be systematic and include attention to all five of the most important components of reading, as defined by the National Reading Panel (*Eunice Kennedy Shriver National Institute of Child Health and Human Development, NIH, DHHS, 2000*). These components include

alphabetics, phonics, fluency, vocabulary, and comprehension. Effective Tier 1 instruction also includes instruction in spelling and language comprehension.

According to The Reading League Curriculum Evaluation Guide (2023) and the National Reading Panel Reports (2000), characteristics of effective Tier 1 instruction include (but are not limited to):

- A systematic approach with an intentional scope and sequence. Skills should build from simple to complex
- Extensive teacher modeling, guided practice, and corrective feedback
- Guidance by data from reliable and valid universal screeners and periodic formative assessments
- Letter-sound correspondences taught to automaticity in an explicit manner. Various types of systematic phonics instruction are effective; the key is that the instruction needs to be *systematic* and planned, rather than incidental, as happens during guided reading lessons.
- Phonics instruction, with cumulative review including application in reading and writing (spelling)
- Phonemic awareness being explicitly taught, to automaticity. Segmenting and blending skills are critically important
- Explicit teaching and practice of segmenting and blending in both decoding and encoding
- Provision of connected text fluency practice, encouraging students to read with expression (prosody) (e.g. decodable texts, poetry, readers' theater, paired reading)
- Read-aloud opportunities (for students who are still learning the code) and text reading opportunities (for students who are automatic with the code), featuring a variety of diverse, complex texts, including narrative and expository texts above grade-level to develop background knowledge and vocabulary in a variety of subject areas
- Explicit instruction in the study of words and their parts (morphology), with numerous opportunities for students to read and write words with these morphemes
- A clear scope and sequence for teaching conventions of print, grammar, and syntax (sentence structure) in reading and writing
- Queries to develop a student's ability to be metacognitive (i.e., to think about their thinking while they read)
- Explicit teaching of genre types and features, which are used to support comprehension and/or build content knowledge
- Rich read-aloud experiences before children are able to read independently, which is the foundation for reading comprehension
- Explicit instruction related to handwriting (e.g., letter formation, posture, grip), with opportunities for cumulative practice
- Explicit writing instruction with a gradual release of responsibility (i.e., I do, we do, you do) and includes sufficient time for modeling, planning, and brainstorming ideas orally before drafting

Tier 1 should also be responsive to the needs of culturally/linguistically diverse students. This includes (but is not limited to):

- Once students decode the word accurately, supports (e.g., descriptions, pictures, or gestures) are used to teach or confirm the meaning of the decoded word(s)
- Attention is paid to positive transfer of letters and sounds from their home language in addition to explicit attention to those not present in their home language
- Opportunities are identified for building background knowledge in a students' home language and/or by using visuals and clarification whenever possible

Additionally, the following elements of instruction are characteristic of **ineffective** instruction, and should be avoided. As with the above, this is not an exhaustive list:

- Three cueing-systems (commonly abbreviated as MSV, where M stands for meaning, S stands for syntactic or structure, and V for visual) are taught as strategies for decoding in early grades. For example, if a student encounters an unknown word and the teacher asks the student to guess what the word is based on the first letter, a picture, or what the rest of the sentence says. Teachers using this system might ask a student “does it look right? Does it sound right? Does it make sense?”
- Teaching children to memorize *any* whole words by sight, without reference to letters and sounds
- Haphazard phonics instruction, provided based on whatever words appear in the books children are reading in their guided reading groups, without any defined scope and sequence
- Phonics instruction provided only in short “mini lessons” or “word work” lessons
- Blending and segmenting not explicitly taught and practiced
- Extended periods of sustained silent reading, even for students who are not yet proficient readers. During these times, students are asked to independently read texts they are unable to decode with accuracy in order to practice reading comprehension strategies (e.g., making inferences, predicting, summarizing, visualizing). The emphasis is on “book choice” without any purposeful guidance from the teacher.
- Assessment based on the three cueing systems, usually in the form of running records or benchmark assessment, where students read leveled texts and teachers analyze their oral reading for M/S/V errors. These assessments lack reliability and validity for accurately identifying students' reading abilities, and tend to overlook students who are struggling.
- Fluency instruction, when it occurs at all, tends to overemphasize rate (speed) over accuracy. Within this type of instruction, teachers also sometimes count student errors as correct if the error approximates the actual word in meaning (e.g., if a student reads the word *house* as *home* in a story, *home* might be counted, by the teacher, as accurate reading).
- Writing is not taught explicitly, and spelling tends to be ignored entirely. Writing and spelling instruction, if they occur at all, are disconnected from reading instruction.
- Explicit instruction in morphology is not present and/or not taught according to a scope and sequence (i.e., simple to complex) consistently throughout K-5 instruction
- Inferencing strategies are not taught explicitly and may be based only on picture clues and not text (i.e., picture walking).

Tier 2 - Intervention & Progress Monitoring



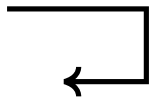
Intervention at Tier 2 should build on the instruction already being provided at Tier 1 and should be a supplement to, not a replacement of, Tier 1 instruction. After providing informed consent, parents should be provided with their child’s progress monitoring data and the rationale behind the intervention recommendation (NYSED, 2013).

Decisions about which interventions students receive should be based on individual student data from reliable/valid screening and progress monitoring tools. Tier 2 interventions are characterized by

increased intensity (added instructional time, as well as typically a small group format) and more frequent progress monitoring. There also may be more targeted objectives along with increased opportunities for students to respond and receive corrective feedback. Dr. Holly Lane, one of the UFLI authors, suggests that the differences between tiers should be quantitative as opposed to qualitative. That is, the same elements outlined above that comprise effective Tier 1 instruction should also be incorporated into Tier 2 instruction.

School psychologists who are consulting with school teams on Tier 2 interventions should be aware of the evidence for basing interventions on a well-validated model of reading instruction- the Active View of Reading. Burns and colleagues (2023) found support for interventions for struggling readers that focused on self-regulation (effect size .46), phonics (effect size .48), "bridging processes" like fluency, morphology, vocabulary (effect size for all bridging processes .70; for vocabulary alone the effect size was 1.09), and language comprehension (effect size .62). Within the domain of language comprehension interventions, the effect size for teaching text structure was 1.31, language structure .51, verbal reasoning .92, and cultural and content knowledge .13. See Burns and colleagues (2023) or a description of each of these intervention targets.

Tier 3 - Evaluation



After evidenced-based interventions have been implemented with fidelity, progress monitoring may indicate the need to move to evaluation at Tier 3.

School psychologists are highly trained in psychology, education, and evaluation. While at times there seems to be confusion regarding diagnosis in school, it is important for school psychology practitioners to know that they are legally permitted to provide diagnoses in the school setting. In NYS, school psychologists work under an exemption, specifically Education Law Article 153, which allows school psychologists to diagnose for the purposes of educational planning, such as CSE classification and Section 504 services and accommodations. Additionally, because school psychologists are identified as "exempt professionals" in the Article 153 licensure law for psychologists in NY, the scope of practice for school psychologists is the same as that defined for licensed psychologists, as long as the practice is within an *exempt setting*. Additionally, according to the law and guidance memos from the Office of Special Education and Rehabilitative Services (OSERS), NYS school psychologists are allowed and encouraged to identify dyslexia, share it with stakeholders (teachers, parents), and write it in IEPs and other eligibility documents.

Evaluating for Dyslexia

Through their course of training and practice, school psychologists are generally well-acquainted with measures to inform dyslexia assessment. To assess thoroughly for dyslexia, evaluation measures should include reliable and valid assessments of phonological skills, orthographic skills, and rapid automatic naming skills, as well as measures of word reading, reading fluency, and encoding (spelling).

Many standard batteries in the school psychologist's assessment toolbox can help to inform a dyslexia designation. Many of the broad measure achievement tests that school psychologists already use in

their practice have dyslexia composites or index scores embedded into their batteries. However, it is up to the individual school psychologist to ensure that the subtests included in broad measure achievement tests are sufficient for measuring and evaluating for dyslexia. Commonly used broad measure achievement tests that include dyslexia composite or index scores are the Kaufman Tests of Achievement, Third Edition (KTEA-3) and the Wechsler Individual Achievement Test, Fourth Edition (WIAT-4). In addition, the Woodcock Johnson Cognitive and Tests of Achievement, when administered together, provide an in-depth analysis of reading development, as well as providing the necessary data to diagnose dyslexia.


Appendix 1 provides examples of assessment measures/subtests, which assess areas associated with dyslexia. This chart is not exhaustive, but rather provides a sample of measures that can be utilized in assessing for dyslexia.

Dyslexia and reading assessment is not owned by one profession or professional. In the school setting, school psychologists, reading teachers, special education teachers, and speech and language pathologists often assess overlapping areas of reading development. Working as a team with other professionals in one's school to coordinate assessment for dyslexia and reading disabilities maximizes time and resources and reduces the burden of testing on the child. For example, if the speech and language pathologist gives a test of phonological processing such as the CTOPP-2, there is no need for the school psychologist to repeat testing for this area with another measure of reading development unless there is reason to suspect that the measure given would be invalid. All available data on a child's reading development, including screening, benchmarking, progress monitoring, and diagnostic testing, should be considered holistically in order to determine if the child has dyslexia.

It is important to understand that dyslexia can be co-occurring with other learning disabilities. The correlation of general intelligence to basic reading skills is only about .25. As kids get older, they read less; as a result, their acquired knowledge drops and, as cognitive tests (particularly the verbal portions) rely heavily on acquired knowledge, older kids with dyslexia are likely to demonstrate drops in performance on general intelligence measures from when they were tested previously as a consequence of their disability.

Finally, school psychologists must acknowledge their competency in conducting evaluations and making diagnoses. As with any other skill and/or job function in the profession of school psychology, if one does not feel they have the requisite skills required to perform a job function, (i.e. one does not feel competent in a particular area), then one should not perform the particular activity until they receive more training and experience in that area.

Dyslexia, Special Education, and Section 504 Accommodations in the Schools:



An area of confusion for many relates to the provision of special education services in the schools for individuals who have been identified as dyslexic. Many maintain that the identification of being diagnosed with dyslexia would be eligible for special education. However, the diagnosis of dyslexia and the evaluation and determination of eligibility for special education services in New York are two separate processes.

Neither the Individuals with Disabilities Education Act (IDEA, 2004), nor the Part 200 of the Commissioner's Regulations in New York, identify dyslexia as an educational disability. Both sets of regulations say that a learning disability can result from a diagnosis of dyslexia in the definition, but do not identify dyslexia as an educational disability in its own right. In order to be identified with a learning disability in New York State, the following criteria are required:

- The child must meet the criteria for a learning disability as specified in Part 200.4 of the Commissioner's Regulations
- The disability must adversely affect educational performance
- The child must require special education (i.e. specially designed instruction)

A child may meet the diagnostic criteria for dyslexia, but not meet the aforementioned requirements. For example, a child with dyslexia may be making satisfactory progress in the general education classroom, which would mean the prong of requiring specially designed instruction is not met. Conversely, a child may not be diagnosed with dyslexia for some reason (perhaps not showing a deficit in the phonological process), but may perform more poorly than expected in reading comprehension, despite provision of effective instruction and educational intervention, which would lead them to qualify as having a learning disability.

Although a child may not be eligible for special education, a child with dyslexia may be eligible for protections under Section 504 of the Rehabilitation Act. To qualify under Section 504, a child must have a physical or mental impairment that substantially limits one or more basic life activities. For example, a child with dyslexia who did not qualify for special education services may require extra time to take tests due to a fluency delay. It is important for school districts, advocates, clinicians, healthcare professionals, and other stakeholders to be aware of these realities.

Questions left unanswered:

Does a child whose phonological deficit has been remediated, but still has difficulty with word-level reading and spelling, still have dyslexia?

Do children with no phonological/RAN deficits but difficulty with word-level reading and spelling have dyslexia? (Is the phonological deficit necessary? IDA says dyslexia "typically" involves phonological

deficits, implying that sometimes it doesn't).

How bad is bad? What's a deficit? (This is a global problem when it comes to defining learning disabilities...not just dyslexia).

Screening...can it create more problems than it solves? Burns & Vanderheyden (2017) think so.

Professional Development Resources

- Cox Campus: "Founded to break the cycle of illiteracy for children who have experienced a generational lack of access to educational opportunity, the Rollins Center for Language & Literacy is dedicated to deep reading brain construction for every child through facilitation and coaching in regional schools and, on a global scale, through the free online Cox Campus." <https://coxcampus.org/>
- Lexia LETRS: "The Lexia LETRS® (Language Essentials for Teachers of Reading and Spelling) Suite is comprehensive professional learning designed to provide early childhood and elementary educators and administrators with deep knowledge to be literacy and language experts in the science of reading. Developed by Dr. Louisa Moats and leaders in the field of literacy, Lexia LETRS teaches the skills needed to master the foundational and fundamentals of reading and writing instruction—phonological awareness, phonics, fluency, vocabulary, comprehension, and written language." <https://www.lexialearning.com/letrs>
- SUNY New Paltz SoR Microcredential: "The Science of Reading Center at SUNY New Paltz offers a hub for educators with a shared mission of improving literacy outcomes for children across the U.S., by promoting research-backed knowledge and practices that are proven to help learners gain skills as readers." <https://www.newpaltz.edu/science-of-reading-center/#microcredentials>
- The Reading League: "The Reading League's mission is to advance the awareness, understanding, and use of evidence-aligned reading instruction." <https://www.thereadingleague.org/>



Appendix 1 A sample of Measures that Assess for Dyslexia

	PAL-II	KTEA-3	FAR	NEPSY-II	WJ (Cog. Ach)	TOD	WIAT-4	CTOPP-2
phonological skills	Phonological Coding	Phonological Processing	Phonemic Awareness	Phonological Processing	Phonological Processing	Phonological Manipulation	Phonemic Proficiency	Elision
					Sound Blending	Blending		Blending Words
					Segmentation	Segmenting		Sound Matching
					Sound Awareness			Phoneme Isolation
orthographic skills	Orthographic Coding	Word Recognition Fluency	Orthographical Processing		Letter-Pattern Matching	Letter Word Choice	Orthographic Fluency	
	Receptive & Expressive Coding				Number-Pattern Matching	Word Pattern Choice		
					Letter-Word Identification	Symbol to Sound Learning		
rapid automatic naming skills	RAN/RAS	Letter Naming Facility	Rapid Automatic Naming	Speeded Naming	Rapid Picture Naming	Rapid Letter Naming		Rapid Digit Naming,
					Retrieval Fluency			Rapid Number Naming
								Rapid Color Naming
								Rapid Object Naming
reading fluency	Silent Reading Fluency	Word Recognition Fluency	Irregular Word Reading Fluency		Oral Reading	Word or Question Reading Fluency	Oral Reading Fluency	
		Silent Reading Fluency			Sentence Reading Fluency	Reading Rate	Decoding Fluency	
encoding		Spelling			Spelling	Irregular Word Spelling	Spelling	
					Spelling of Sounds	Regular Word Spelling		
					Word Attack			
word reading		Word Recognition Fluency			Letter-Word Identification	Irregular Word Reading	Word Reading	

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