

Public Comments – ADE Rules Governing How To Meet The Needs Of Children With Dyslexia

NOTE: In response to various questions asked by commenters, Section 1.03 was added to the proposed rules to clarify that further clarification, guidance, and instruction regarding the applicable law and accompanying rules is provided in the Arkansas Dyslexia Resource Guide, which can be accessed through the ADE's website.

| Date | Respondent | Comment | ADE Response |
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| 1/19/16 | Mary Bryant, Ed.S, Nationally Certified School Psychologist, Arkansas Licensed Psychological Examiner, Arkansas School Psychology Specialist | <p><u>Section 4.01.1:</u> I believe that students should be screened each year in grades kindergarten, one, and two... each year. As skill levels increase and the demands on students grow each year it is essential to assess/screen if students are gaining the necessary basal skills for effective and fluent reading. The skills are very different from kindergarten compared to 2nd grade. Students who may have the skills down in kindergarten may not demonstrate that they understand or grasp the skills by 2nd grade. It is important that they be screened each year in grades K-2 to prevent reading difficulties which may lead to a retention, identification of a disability, increased dropout rate, etc.</p> <p><u>Section 6.01.2.3:</u> In terms of those professionals who are qualified and fully capable of conducting the independent comprehensive evaluation the following should be added to the list that parents can choose from. With the limited number of LPE's in the state of AR now (license of LPE no longer awarded after October 2013) it would be beneficial to parents to understand all of the professionals they may choose from. The list should include the following: School Psychology Specialist (SPS); Licensed Psychologist (LP); Licensed Psychological Examiner (LPE/LPE-I); Licensed Professional Counselor with Appraisal Specialization (LPC). Additionally, the license of Certified Dyslexia Testing Specialist is not a license recognized at this time in the state of AR. There is no governing body to define a scope of practice for this particular license. Additionally there is no governing body should a parent or school have an ethics complaint. This license should be stricken from the list until there is a licensing body that awards this credential in AR.</p> <p>A Dyslexia Therapist should not be allowed to conduct independent "comprehensive" evaluations for dyslexia. The only professionals licensed to practice psychology (including psycho-educational evaluations) are licensed by the ADE, the AR Psychology Board and the AR Counseling Board. The Dyslexia Therapist license is not awarded by any of the three licensing bodies listed above. They should be stricken from the list of professionals appropriate for selection by parents to conduct an independent comprehensive evaluation.</p> <p>The connotation that the independent evaluation will be "comprehensive" means that the evaluation includes a full assessment of intellectual abilities/cognition and other processing strengths and weaknesses which is a skill level relegated only to those in the list provided above; LP, LPE,</p> | <p>Regarding Section 4.01.1, this language closely mirrors Ark. Code Ann. § 6-41-603(a)(1), which provides that students (who do not fall within an exception) must be screened in kindergarten, grade one, and in grade 2. (emphasis added).</p> <p>Regarding Section 6.01.2.3, this language mirrors Ark. Code Ann. § 6-41-604(a)(2)(C)(i)-(v) and includes only the individuals listed in the law. The "NOTE" following 6.03 revised to read that whether an individual is qualified to "conduct and evaluation" or provide a diagnosis is dependent upon their licensure.</p> <p>Comments considered. Non-substantive change made.</p> |

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| | <p>SFS, and LPC with Appraisal. Typically a full comprehensive assessment would include individual intelligence (full battery), individual achievement (full battery), screening of social-communicative abilities, screening of social-emotional/behavioral issues, a thorough record review (education, development, behavior, etc.), summary, recommendations, and a determination of diagnosis. Parents should be aware of the credentials of the person they are choosing to conduct this evaluation and a disservice will be done to these children if unqualified and unlicensed individuals are conducting evaluations without extensive training in standardized test administration, interpretation, child development, literacy, and response to intervention.</p> <p>Multidisciplinary teams depend on reliable and valid data, which are properly interpreted, in order to make determinations regarding educational programming for children. It is the position of the Arkansas School Psychology Association that multidisciplinary teams use only assessment data provided by qualified examiners who are properly trained to both administer and interpret assessment results. This will help ensure that children and their families are provided services by professionals who are fully qualified to perform their assigned roles. This will also provide protection for school districts should an evaluation be challenged or taken to a due process hearing.</p> | Regarding Section 9.00, the term "psychometrist" already was removed in both the law and the proposed rules. Regarding licensure comments, please see above the response to the 1/19/16 comment of Mary Bryant. |
| 1/19/16 | John Hall, Ph.D., Licensed Psychologist (AR), Licensed School Psychology Specialist (AR), Nationally Certified School Psychologist (NCSP) | Recent review of the Arkansas Dyslexia Resource Guide (2015) and Arkansas Department of Education (ADE) Rules Governing How to Meet the Needs of Children with Dyslexia (2014) has raised several serious concerns specific to the evaluation practices for dyslexia. These are addressed below. First, the sections of these documents that address the independent evaluation for the condition state the evaluation must be conducted by a Licensed Psychological Examiner, School Psychology Specialist, Licensed Speech Language Pathologist, Certified Dyslexia Testing Specialist, or Dyslexia Therapist. It has long been understood that School Psychology Specialists, who are solely licensed by the Arkansas Department of Education (ADE) can only practice/deliver professional services in educational settings (i.e., preK-12 schools) associated with their employment through a school district or educational cooperative within the State of Arkansas. These practitioners are not licensed or eligible to provide any professional services independently including assessment/testing even though most would agree they are more than competent to conduct these types of evaluations. As noted on the current NASP website the scope of practice for School Psychology Specialists in Arkansas states these practitioners "are not permitted to practice in any other arena other than the schools." Currently, only a few states in the U.S. |

allow for school psychologists licensed by a state department of education to engage in non-school practice. For example, in Ohio school psychologists who hold the SEA credential can provide services in preK-12 schools but not outside of the schools. However, the Ohio State Board of Psychology offers a School Psychologist License which allows for the practice outside of the schools if the practitioner meets specific conditions (i.e., passing score on the Praxis, oral examination, three reference letters, minimum of a master's degree in school psychology, internship, three years of experience, and supervision by a qualified licensee of the board who verifies and documents the latter activity). Similar restrictions in terms of practice setting also likely holds true for Certified Dyslexia Testing Specialists and Dyslexia Therapists. That is, it would be unlikely for these practitioners to lawfully provide services outside of the schools where they are also employed. Finally, it is unclear whether School Psychology Specialists, Certified Dyslexia Testing Specialists, or Dyslexia Therapists could secure professional liability insurance in Arkansas that would cover their independent practice. One would be ill-advised to practice independently without this type of coverage.

A second concern rests with the possibility of a dual relationship. This could occur if one of the sanctioned practitioners noted above (e.g., an ADE licensed school psychology specialist) who was employed by a school district also conducted the independent evaluation on a student who was also enrolled within that district. The NASP Principles for Professional Ethics in Section V. Professional Practice Settings-Independent Practice A.2. states "School psychologists duly employed in independent practice and in a school district may not accept any form of remuneration for clients who are entitled to the same service provided by the school district employing the school psychologist. This includes children who attend nonpublic schools within the school psychologist's district." Furthermore, Section V.A.3. notes "School psychologists in independent practice have an obligation to inform parents of any school psychological services available to them at no cost from the public or private schools prior to delivering such services for remuneration."

A third concern is whether a Certified Dyslexia Testing Specialist or a Dyslexia Therapist would by education and training have the necessary knowledge and skills to competently conduct these types of evaluations. The NASP Principles for Professional Ethics in Section IV. Professional Practices-General Principles C.5. states "School psychologists do not condone the use of psychological or educational assessment techniques, or the misuse of the information these

techniques provide, by unqualified persons in any way, including teaching, sponsorship or supervision.”

A fourth concern pertains to the designated practitioners in Arkansas who may conduct dyslexia evaluations. Licensed Psychological Examiners can provide assessment/testing services independently and also in the schools in accord with the psychology licensing law and their statement of intent. The same holds true for Licensed Psychologists in terms of the psychology licensing law and Licensed Professional Counselors with the Assessment Specialization under the counseling law however, these qualified and licensed practitioners are for some reason not included in the dyslexia guide, rules, or law. Should they not be included as qualified practitioners to conduct these types of evaluations?

A fifth concern relates to ethical complaints. Both Licensed Psychological Examiners and Licensed Psychologists are licensed through the Arkansas Psychology Board and Licensed Professional Counselors with the Assessment Specialization are licensed through the Arkansas Counseling Board. They can and do under their respective practice laws and rules and regulations provide professional services to the public both inside and outside of preK-12 school settings. Furthermore, if a consumer (i.e., client, patient, guardian) or another licensed practitioner has a legal or ethical concern with one of these practitioners specific to assessment they can report the matter to the respective state licensing board for review and possible intervention. Who would the consumer or other practitioner report the concerning issue to if the practitioner is not licensed by one of the above state boards? Would the ADE ethics board now assume the oversight of ADE licensed or certified practitioners engage in independent dyslexia evaluations? If so, would that be appropriate?

A sixth issue rests with the ADE rules section 9.00. In this section the term “licensed psychometrist” is listed as someone who the ADE could employ. However, this term is not defined and it is also not a license that is issued in the State of Arkansas.

In sum, the language in the above documents places some school psychology specialists (and perhaps Certified Dyslexia Testing Specialists and Dyslexia Therapists) at-risk in terms of offering and engaging in independent evaluations outside of their allowed settings. In terms of Certified Dyslexia Testing Specialists and Dyslexia Therapists they appear to be certified not licensed. The education, training, knowledge, skills, and competency of these practitioners in conducting these types of evaluations remains unclear. Extensive instruction which is

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| | <p>typically only offered through an advance accredited program of academic study at a university is a necessary prerequisite for this type of practice. Without this type of professional preparation the risk of negative side-effects associated with these evaluations for children/students and parents within the state may be high. Constructive changes in the ADE guide and rules are needed to correct the above concerns.</p> <p>Regarding Section 4.01.1, please see above the response to the 1/19/16 comment of Mary Bryant.</p> <p>Regarding Section 6.03, please see above the response to the 1/19/16 comment of Mary Bryant. The "NOTE" after 6.03 is self-explanatory: one must consult his/her individual licensure requirements or consult the appropriate licensure authority to make this determination.</p> <p>Sections 7.01.2, 7.01.3, and 7.01.4 mirror the law. See Ark. Code Ann. § 6-41-605(a)(2)-(4). Likewise, the language in 7.02 mirrors the law. See Ark. Code Ann. § 6-41-605(b).</p> <p>Suggestions for revisions to the Dyslexia Resource Guide may be sent to Vicki King (ADE Dyslexia Specialist) at vicki.king@arkansas.gov, or Mary Bryant (chair of committee that updates the guide) at m Bryant@crmail.k12.ar.us.</p> <p>Comments considered. No changes made.</p> <p>Section 3.04.1. What "endorsement or certification" is required to be a "dyslexia specialist"? Is this a "qualified instructor"? Is the endorsement or certification from ADE?</p> <p>Section 3.05. Is a "dyslexia therapist" as defined specifically talking about a Certified Academic Language Therapist (CALT)? Are there other certifications in dyslexia therapy to be a dyslexia therapist?</p> <p>Section 4.01.1. Is every student in grades K-2 required to be screened annually? If no characteristics of dyslexia are evident in the initial screening, is the student required to be screened in subsequent years?</p> <p>Sections 4.03, 8.01 and 13.01. Due to the impact of the Dyslexia Resource Guide on the implementation of these rules, will there be an opportunity for public review and comment on the Dyslexia Resource Guide and revisions?</p> <p>NOTE after Section 6.03. What licensure or credentials qualify an individual to provide a diagnosis of dyslexia? Which agency or organization are approved to provide the licensure or credentials to determine if an individual is qualified to provide a diagnosis of dyslexia?</p> <p>Sections 7.01 and 7.01.1 are directly from the law; however, 7.01.2, 7.01.3 and 7.01.4 are not specified in the law. How is it determined if an instructional approach is "highly concentrated instruction methods and materials that maximize student engagement"? What is the definition of "meaning-based instruction"? How is it determined if the instructional approach is "directed at purposeful reading and writing"? It would be more clear if 7.01.2, 7.01.3 and 7.01.4 were deleted and replaced with: 7.01.2 The district's dyslexia intervention program as defined in 3.03.</p> <p>Section 7.02. This should be deleted since it is not in Act 1268. District are not providing "dyslexia therapy"; therefore, there is no need for "dyslexia therapists". Act 1268 requires districts to have "dyslexia interventionists" who are trained in the district's dyslexia program. If 7.02 remains in the rules, will districts be required to hire dyslexia therapists? If so, when? Section 11.01. Are teachers required to receive professional awareness one time? annually? On the rotation cycle of state PD?</p> <p>Section 11.02. If the professional awareness is offered by the school district, must this venue have prior approval by ADE?</p> |
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| 1/19/16 | Joan Simon, Ph.D., Licensed Psychologist, Associate Professor, UCA | <p>1. The following are not clearly defined: a. Level 1 dyslexia screener – seems to refer to the same screening described in 4.02, why do same screening twice? b. Level 2 dyslexia screener</p> <p>2. Under 3.04.1: "A professional at each education service cooperative or school district who has expertise IN TEACHING READING SKILLS (Simon comment – It seems that there are some key words missing here & I've filled in an option. We want expertise in teaching reading, right?) and is working towards an..."</p> <p>3. Under 3.05: "Dyslexia therapist" ... I do not agree that it is sufficient for a dyslexia therapy training program to simply meet an ADE definition. If we are expecting these professionals to work with the children in our schools who most need of quality assistance, we need a better way to ensure that their training programs are of the highest quality.</p> <p>4. Under 3.04.7: "Response to Intervention (RTI)" is the practice of.... a. 3.047.2 – Replace "appropriate" with "research supported"; b. This is an excellent opportunity to help AR educators better understand the components of a quality school-based RTI system. Therefore, the components of RTI listed here are incomplete as they stand. i. Add: Universal screening and benchmarking numerous times per year; ii. Add: Ongoing professional development for teachers; iii. Add: School-based problem solving teams; iv. Add: Interventions for which the integrity is monitored regularly; v. Add: Parent involvement.</p> <p>5. Under 4.01.1: "Each student in Kindergarten, grade one, and grade two," This type of screening needs to happen three times per year in order to establish school-based norms and/or benchmarks against which future universal screening data can be compared. Screening should minimally occur once per year with the goal of increasing screening to 3x per year.</p> <p>6. Under 5.00: Consider replacing "Intervention and Services" with "Dyslexia Program Implementation" because the only intervention is such a program.</p> <p>7. Under 5.02: Consider replacing "intervention services" with "dyslexia program"</p> <p>8. Under 6.00: "Independent, comprehensive dyslexia evaluation" consider replacing with "Screening and Evaluation for Dyslexia"</p> <p>9. Under 6.01.2.3.2: School Psychology Specialists are not licensed to practice outside of the purview of ADE. Therefore, without another license, they cannot conduct a psycho-educational assessment outside of the school setting. This may be an issue with the way the law is written, but it does currently seem to violate the psychology licensure law. ACT 129 (1955), "AN ACT TO REGULATE THE PRACTICE OF PSYCHOLOGISTS IN ARKANSAS, INCLUDING INSTRUCTIONS THEREIN; TO CREATE A BOARD TO BE</p> |
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| | <p>KNOWN AS ARKANSAS BOARD OF EXAMINERS IN PSYCHOLOGY; AND TO FIX PENALTIES FOR VIOLATIONS OF ITS PROVISIONS." In Section 2: Definition of Practice of Psychology, it states (I have added the italics and underline for emphasis) ... A. A person practices as a Psychological Examiner within the meaning of this act when he holds himself out to be a Psychological Examiner, or renders to individuals or to the public for remuneration any service involving the application of recognized principles, methods and procedures of the science and profession of psychology, such as interviewing or administering and interpreting tests of mental abilities, aptitudes, interests and personality characteristics, for such purposes as psychological evaluation or for educational or vocational selection, guidance or placement. The Psychological Examiner practices the following only under qualified supervision; overall personality appraisal or classification, personality counseling, psychotherapy or personality readjustment techniques.</p> <p>10. Under 6.01.2.3.4: Certified dyslexia testing specialist is not defined elsewhere nor am I aware of any state license that would allow for such an evaluation outside of the public school setting.</p> <p>11. Under 6.01.2.3.5: Dyslexia therapist – not appropriate for this person to evaluate without a licensed to do so.</p> <p>12. Under 7.00: Instructional Approaches – why not just say "Dyslexia Program."</p> <p>13. Under 13.02.7.1: Why is this statement needed when no other professional in the group is defined in such a way? I suggest removing this statement.</p> | <p>Comments considered. No changes made.</p> |
| 2/2/16 | Melinda Harris, Maynard School District | <p>I think a rule should be added stating that a Dyslexia Interventionist or Therapist should not be expected to serve more students than is possible to ensure the fidelity of the program being used. I also feel that it should be a rule that the position of Dyslexia Interventionist or Therapist should be a full time position on its own. Dyslexia Interventionists and Therapists are being "added" but sometimes the job is being tacked onto an already full time position. For instance, at my school, the 4-6 Reading Teacher who has full classes for 6 periods out of a 7 period schedule each day, is being expected to also serve identified dyslexics (K-12) with interventions on top of this full-time schedule. This is not fair to either group of students. The 4-6 Reading classes or the students with dyslexia needing the interventions. It is also not fair to ask this of the teacher who isn't receiving any compensation other than her regular salary. There needs to be some way of ensuring that the needs of these students are being met. It should not be at the expense of other groups of students or teachers.</p> |
| 2/9/16 | Tom Gattis, Superintendent, | <p>Comment considered. No changes made.</p> |

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| | County Line School District | <p>public schools last year are going to be beneficial for student success, however it is costing districts several thousands of dollars each year to implement these programs and we received only a modest increase in funding.</p> | <p>Regarding Section 3.08, that language has been removed as it causes confusion (as opposed to clarity). The language in Section 3.05 mirrors the law. See Ark. Code Ann. § 6-41-602(5).</p> <p>The ordering of the language in Section 6.00 mirrors the law. See Ark. Code Ann. § 6-41-604(a).</p> <p>Commenter correctly recognizes that Psychologists are not included under the law. Consequently, they are not included under Section 6.01.2.3, which mirrors the law. See Ark. Code Ann. § 6-41-604(a)(2)(C)(i)-(iv).</p> <p>Regarding licensure comments, please see above the response to the 1/19/16 comment of Mary Bryant.</p> <p>Comments considered. Non-substantive changes made.</p> <p>3.04.2 Screening Defined. The dyslexia specialist will...provide training in administering screenings, analyzing and interpreting screening data.... Is this referring to initial screening, Level I, and/or Level II? Should the screening they are responsible for training others to use, etc. be clarified in conjunction with 4.03 and 4.04? As noted in the Arkansas Dyslexia Resource Guide (July 10, 2015 Appendix G) Level 2 Dyslexia Screener Test Battery list, it is noted that there are certain tests that require advanced examiner qualifications. Will the dyslexia specialist have the advanced qualifications needed for training others? For example, the Woodcock Johnson IV Tests of Achievement (WJ-IV ACH) manual indicates that "Competent interpretation of the WJ-IV ACH requires a higher degree of knowledge and experience than is required for administering and scoring the tests." "Graduate-level training in educational assessment and a background in diagnostic decision-making are recommended for individuals who interpret the WJ IV ACH." Graduate level training is further defined as at least 'a practicum-type course covering administration and interpretation of standardized tests of academic achievement.' (Mather, N. J., & Wendling, B. J. (2014). Examiner's Manual. <i>Woodcock-Johnson IV Tests of Achievement</i>. Rolling Meadows, IL: Riverside. Other examples:</p> <ul style="list-style-type: none"> -WRMT-III -At least bachelor's level training in measurement and administration and interpretation of tests -Understanding of testing statistics |
| 2/12/16 | Maleah Bufford, SPS, LPE-1., NCSP and Amy Cunningham, SPS, LPE | <p>Title, 1.01, 1.02, 2.02 Wording. Title, 1.01 "Children with Dyslexia," 1.02 "students with dyslexia," 2.02 "students with dyslexia" and "student with dyslexia." More appropriate wording to be consistent with other areas within this document (with the exception of under 6.00 Independent, Comprehensive Dyslexia Evaluation) would be "characteristics of dyslexia." The current wording implies diagnosis prior to comprehensive evaluation. The implication is that the screenings mentioned below will result in a diagnosis of dyslexia. It is never appropriate to make a diagnosis based on screening information. Not every student who does not perform well on the screenings has dyslexia. See also Arkansas Dyslexia Resource Guide (July 10, 2015 page 22) Level II Dyslexia Screening working "...documenting the characteristics of dyslexia." Sections 5.01, 5.02, and 5.03 of this document is worded "characteristics of dyslexia."</p> <p>3.02.5 Supervision. Are there any stipulations as to how the supervision is to be documented?</p> | |

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| | <p>CTOPP-2 “extensive formal training in assessment” (understanding of testing statistics, test administration, content being assessed) TWS-5</p> <p>Formal training in assessment</p> <p>It is important that those administering, interpreting, and training others be familiar with examiner qualifications and responsibilities set forth by testing companies, assessment manuals, and ethics guidelines.</p> <p>3.047 and subsections Typo. Should this be 3.07. No line drawn through the 4.</p> <p>3.047.1 Screening. Is this the screening referred to in 3.04.2?</p> <p>3.08 Typo. “program approved or defined by the Department” “approved” should be marked through as in 3.05. Does this statement belong here or maybe by 3.05?</p> <p>4.00 and 4.05 Required Screening and following subsections: How do these screenings apply to students already receiving special education services (which may or may not include those with existing diagnosis of dyslexia but are receiving services for basic reading and/or reading fluency? What about severely impaired students for whom formal assessments are not appropriate?</p> <p>4.03 typo. wording and commas</p> <p>4.03 NOTE: screening instruments. specify which screening: initial. Also references Arkansas Dyslexia Resource Guide for list of screenings; however, Appendix G is for Level II. Maybe wording should say, “Refer to the Arkansas Dyslexia Resource Guide for a list of Initial Screening Instruments.” (see page 19 of Guide).</p> <p>5.02 Consent. Consider putting the information about consent in the guidelines as many of the tests that are listed in the Arkansas Dyslexia Resource Guide are considered “diagnostic.” Maybe specify which “screenings” require parental consent.</p> <p>6.00 Independent, Comprehensive Dyslexia Evaluation, 6.01.1 Notified of the results of the dyslexia evaluation. Seems out of order here if it is referring to the results of the evaluation. Maybe more appropriately placed at end of this section.</p> <p>6.01.2.3 Psychologist is omitted (as is in the law). Psychologists are qualified to evaluate for dyslexia as defined in the DSM-V.</p> <p>6.01.2.3.2 School psychology specialist. When referred for an Independent, Comprehensive Dyslexia Evaluation, refer to</p> |
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AR Code 17-97-307 (2012) which specifies that SPSSs are “restricted in their practice to employment within those settings under the purview of the State Board of Education.”

6.01.2.3.4 & 6.01.2.3.5 others who can provide an independent, comprehensive dyslexia evaluation. All of the professionals listed above have graduate level degrees with practicum and internship experiences and are governed by a licensing board designed to protect the student as well as a Professional Association with the exception of certified dyslexia testing specialist. How does that compare to the level of training and experience that will be required from a Certified dyslexia testing specialist (which is not defined in this document) or from a Dyslexia therapist? It is likely that these two fields do not have the necessary qualifications to even purchase many of the tests listed under the Level II Dyslexia Screening list in the Guide (Appendix G). Additionally, see comment section in 3.04.2.

Please refer to the Arkansas School Psychology Position

Statement regarding Qualifications to Conduct Psych-

educational/Psychological Evaluations in Arkansas Schools.

According to Parenting Children with Dyslexia website www.netplaces.com/parenting-kids-with-dyslexia, “dyslexia is diagnosed by a specialist trained in the assessment of learning disabilities. The purpose of the testing is not only to determine whether a child has dyslexia but is to rule out other problems.” The people conducting these evaluations must be adequately trained to rule-out other disorders as well as evaluating the impact of other issues that can impact learning (ADHD, intellectual or developmental disabilities, etc.). Although a formal measure of intelligence is not always thought of (by some) as an integral part of a comprehensive evaluation for dyslexia, dyslexia is considered a learning disability and included in the definition of learning disability is that there are deficits in one or more areas of cognitive processing. Most intelligence measures include areas of basic cognitive processing which are linked to various academic areas (including basic reading and reading fluency [dyslexia]). Specialized graduate level training and licenses are required for this type of assessment. Additionally in the definition used by the International Dyslexia Association, “...difficulties typically result from a deficit in the phonological component of language that is often unexpected in relation to other cognitive abilities...” How do we know that unless we assess those areas? Assessment of these processes must be completed by those with appropriate training and licensure.

6.03 NOTE: Where does this belong? Move to 6.01?

9.00 Dyslexia Specialist. Needs clarification to distinguish this position from that in 3.04.

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| | <p>9.01.1.2 Screening. Which screening: initial, Level I, Level II?</p> <p>10.0 Typo. Should be 10.00</p> <p>13.00 Dyslexia Resource Guide. How do these people get on the committee?</p> <p>Question: How are parental consents being handled throughout this process? (Keep in mind that many of the tests listed in the Level II Dyslexia screening are considered "diagnostic" in nature even though they are listed under "screening" in the guide.)</p> <p>\$03-06-2016 – Additional note: We attended ARMEA this past week. In one session, during a Q & A, the presenter, who is a well-known attorney in special education and 504 law, suggested that the move to a Level 2 Dyslexia Screening should be considered a 504 referral and the Level 2 Dyslexia Screening would be the resulting evaluation for consideration of 504 services, which would be the subsequent dyslexia therapy, if eligible.</p> <p>Note: Commenters also attached the Arkansas School Psychology Association's position statement regarding Qualifications to Conduct Psycho-educational/Psychological Evaluations in Arkansas Schools; and Ark. Code Ann. § 17-19-307 entitled "Professional Titles" (regarding "psychological," "psychologist," and "psychology," etc.)</p> | <p>Comments considered. No changes made.</p> <p>3.03.6: This section may be improved by adding clarity that this reading instruction is a supplemental service/intervention in addition to the regular classroom reading instruction.</p> <p>4.02: Consider adding the ability to "Understand the Text" (Reading Comprehension).</p> <p>5.00: This section is missing recommendations of intervention for students identified with Level 1.</p> <p>9.01 and 10.01: It is unclear whether each of these positions are required to be one Full Time Equivalent (FTE) or partial Full Time Equivalent positions. If they refer to full FTE, this appears to be an additional cost to the district of two employees with no supporting funding source.</p> <p>13.02: Charter schools are not specifically represented on the committee. Consider adding an organization to represent this group of schools.</p> <p>Section 3.047.1. EACH or ALL should not be taken out of the rules. If all (each and every) students aren't screened, the school has to get individual parental permission.</p> <p>Section 4.03. NOTE: the second sentence should read: DIBELS alone IS insufficient to determine.....</p> <p>Section 5.00 and 6.00. The deletion of steps needed/required under these sections make much of it misleading and stand the risk of violating the parents' rights under IDEA and 504. 4.03 to clarify that additional screening assessments will need</p> |
| 2/16/16 | Jennifer Dedman, Arkansas Public School Resource Center | |
| 2/16/16 | Diane Zook, Arkansas State Board of Education | |

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| | | believe this will be easily misunderstood by those in the schools. | be administered to measure components that are not measured by DIBELS or the equivalent screener. |
| | | | Comments considered. Non-substantive changes made. |
| 2/2/16 (Public Comment Hearing) | Amber Jones | Concerned about words "specialist" and "therapist" in rules, and these people not being trained in Orton-Gillingham Program. Concerned that K-2 students are not being screened in a specific time frame; rules read sometime during year and it needs to be done prior to end of year, as there are students who have not yet been screened. Overall lack of knowledge by school staff about dyslexia even though purportedly had training. Overall lack of fidelity in OG programs implemented by school staff. Would like teachers to be board certified in the science of reading. Overall lack of enforcement by schools and ADE. Children are suffering needlessly because of this "watered-down" law. | The law does not vest the Arkansas Department of Education with enforcement authority. Comments considered. No changes made. |
| 2/1/16 (Public Comment Hearing) | Scott Gann, Arkansas Dyslexia Support Group | Has dyslexic child who he needed to be pulled out of public school to get the proper services. This law is pretty good, but it is not being enforced. ADE tells parents it is not an enforcement agency and he does not understand when they enforce every other rule he seems to read about in the newspaper. Also concerned about Section 7.01 where fidelity was removed and uses words like "may include." These kids need help, not "may" need help. | Section 7.01 (which includes "may" and in which "fidelity" was removed) mirrors the law. See Ark. Code Ann. § 6-41-605(a). Regarding enforcement authority, please see above response to the 2/2/16 comment of Amber Jones. Comments considered. No changes made. |
| 2/2/16 (Public Comment Hearing) | Dallas Green, Arkansas Dyslexia Support Group | Has nineteen-year-old son who has dyslexia. Since first grade one of largest schools in state told her they knew nothing about dyslexia. Law passed in 2013; too late for her son. College he attended that had dyslexia program did not work out; now he works two jobs. Discussed her interaction with school/teachers during her son's career. Graduated with a 2.8 GPA, but reads on a 3 rd grade level. Now in 2014 daughter, who is four, is in pre-K and something is "not right" with her. Mother asked pre-K teacher whether she thought her daughter was dyslexic; teacher said she doesn't know anything about dyslexia (although law has been passed). There is so much science out there on the issue. Said her group (Arkansas Dyslexia Support Group) travels to schools in Arkansas and they don't know when they'll do screen or what screen to use. Unorganized. Schools don't know what to do with students with dyslexia: no information going out; no training. Said a superintendent said can't diagnose dyslexia until there's an autopsy. We are 49 th in the country. Teachers have told her that it's her fault her kid can't read, but 70% overall can't read on grade level. Excited about law but who is going to enforce it. Told the school is going to enforce it; do you think the schools are going to "kill" themselves? Many gaps: the school may or may not use fidelity. Who is going to enforce? Someone needs to tell psych | Regarding enforcement authority, please see above response to 2/2/16 comment of Amber Jones. Comments considered. No changes made. |

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| | | examiners to quit telling kids they are “retarded.” That’s what psych examiners all around the State are telling kids. | Comments considered. No changes made. |
| 2/2/16 (Public Comment Hearing) | Sarah Jane Luckey, Retired Arkansas Teacher | Still teaches children with dyslexia to read. Has worked with kids who need to test in small settings; tested same kids year after year, and wondered why the [special education] students never were able to read the test. Dyslexia is “elephant in the room.” Must teach students in a way they can learn. Until colleges start to teach teachers how to teach students with dyslexia to read, we’re still going to be 68% below grade level. ADE gives “lip service.” Need to do whatever it takes to teach our students with dyslexia to read. Visited one school where staff member said screened students and turned in results but hadn’t heard a word. Another just finished a reading specialist degree, but barely had word mentioned of dyslexia in her training. Thirty-five dyslexia research centers associated with universities that use our tax dollars; they know what to do and “we” know what to do. We are not going to get there by watering dyslexia law down; it must be beefed up. Leaving to go to school that is dragging its feet by following the IDEA and providing student with FAPE; our one in five students with dyslexia are not getting FAPE. | Section 7.01 (which includes “may”) mirrors the law. See Ark. Code Ann. § 6-41-605(a). Regarding enforcement authority, please see above response to 2/2/16 comment of Amber Jones. Comments considered. No changes made. |
| 2/2/16 (Public Comment Hearing) | Mary Beth, Teacher in 2 nd Largest School District in Arkansas | Forced to become a teacher because her child was denied FAPE in public school. Teachers tried and cared, tutored him into having an anxiety attack, but not trained in dyslexia. ADE should get teachers all of the professional development it can on Orton-Gillingham research based, scientifically proven reading methods. Don’t leave it up to an educational co-op; don’t make it a choice but a requirement. ADE issues report cards; tells parents to see if schools are doing their jobs. No one is holding schools accountable. 68% of students are reading below proficient. 20% of those students are dyslexic. 80% of students in special education can get out of SPED if teachers are trained in Orton-Gillingham Method. Method school chooses must be done with fidelity, and have fidelity parameters. ADE needs to make rules a lot stronger. Pulled her child out of school (2 nd grader) because concerned about possible suicide in the future due to anxiety (after reading a statistic on suicide). Pulled him out and is teaching him herself. Thank goodness for Susan Barton. There are budget surpluses and NSL funds that need to be used because the money is there. Have to hold superintendents accountable; teacher bonuses come out of same fund, so that is a conflict of interest. Appeal to ADE and ask them to beef up the rule. Need to take out words like “may” in Section 7. It’s a slap in the face not to follow the law. There must be an enforcement tool; when schools don’t report accurate numbers to ADE, there has to be follow up. Not enough just to report. When ADE sees low numbers they know school districts are not screening. | |

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| | | Appeal to ADE to follow its own rules and enforce them the best they can. | |
| 2/2/16 (Public Comment Hearing) | Karen Marriott, Parent | <p>Discussed her "story and struggles." Has a wonderful daughter who is 8, as well as an adopted son. Also has been a foster parent. Starting in 2012, daughter started kindergarten. Doing great. Spring she was excellling and bright, but she was struggling. Started sight words and spelling words, and mother told teacher something not right; she was struggling. Asked teacher if she was dyslexic; teacher said no, she'll grow out of it. Same story in first grade. Second grade, doing DIBELS, did tutoring other children at school, tutors her own at home.</p> <p>Mother told teacher she saw a disconnect; teacher said intervention specialist would watch her and continue to test her. Child had problems with classes and homework, lack of focus, frustrated, caused "breakdowns." Mother paid to have daughter tested; found OTVs, sensory deficits, working memory problems, ADHD, dysgraphia, dyslexic tendencies; disconnect between oral and written skills. Met with school, they told mother they could not give child accommodations because she was too smart and would be an unfair advantage, even though she has a neurological disorder. Daughter is A-B student because of mother's tutoring. School put her into dyslexia intervention program where she is receiving Orton-Gillingham, and she is making progress. Interventionist tutors commenter so commenter (mom) can continue working with her daughter at home. Writing skills below average. Paid personally for various therapies. Rule is "skinny, itty bitty"; so much needs to be fleshed out and filled in. Accountability, fidelity, integrity. Needs to be enforced.</p> | Comments considered. Although commenter considers proposed rules "skinny, itty bitty," further clarification, guidance, and instruction is provided in the Arkansas Dyslexia Resource Guide, which can be accessed through the ADE's website. For clarity, Section 1.03 added to rules to ensure that readers are on notice of the Dyslexia Resource Guide and where it can be found. Comments considered. Non-substantive change made. |
| 2/2/16 (Public Comment Hearing) | Mary Beth Wallace, Harrisburg School District, Speech-Language Pathologist and Board Certified Teacher | <p>Been on forefront in her district; wants to put forth the success of this law if done with fidelity. Son 7-8; good at math (95th percentile) but in 35th percentile in reading. Paid for son to have tutoring he needed; son made 3 years growth in 6 months with the appropriate intervention. Has a good teacher, but she did not embrace multi-sensory education. Worked with 16-year-old in a juvenile detention center reading at a pre-primer level. Connections is better for younger kids, but recommended Barton for him (due to his age). It is not expensive; no excuse for "may be" multi-sensory. Do something (some program) with fidelity and integrity. The 16-year-old is now reading. Her son now reads with fluency after one year of intervention. Reaches out to ADE to put some structures in place because "they [school districts/teachers] are starting from scratch and building nowhere" and an accountability piece is falling through. Too much work for the one person doing it at her district. Her school is doing it with fidelity and committed to it. Not enough "feet on the ground"; not enough trained interventionists. "May" and "possibly" in</p> | Regarding use of "may" in Section 7, please see above response to 2/2/16 comment of Mary Beth. Comments considered. No changes made. |

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| | | Section 7 needs to be beefed up; needs to be no wiggle room. | |
| 2/2/16 (Public Comment Hearing) | Joyce Elliot, Arkansas Senate | <p>Every time something is stricken and replaced with other words, wants to make sure she understands why. Page 3, at top where talk about delivered with fidelity, that is reference to everything we do. Started working on this issue in 2010, law in 2011 not successful because fiscal impact showed between \$4 and \$11 million dollars; but it wouldn't be that much but for a huge lack of understanding. In drafting the current law, got everyone in room to figure out how can we do this and make sure kids learn to read within the confines of what we have now and not make excuses about we don't have the time or the resources. Everyone who is fighting the law now was in the room, and was agreeing to what was put on paper, but now there is an enforcement problem of people not doing what they are supposed to do. But main thing, whatever we agreed to do would be done with fidelity; that's why it appears so much throughout the law. In one place "fidelity" is stricken and in others it is not. Commenter is assuming that's because overall fidelity is intended. Would like clarification. See 3.03.4.</p> <p>Section 3.04.1, regarding person reading "a professional at each educational service coop or school district who has expertise and is working toward an endorsement or certification." Understands that's like what we do for provisional teachers or people working toward certification. Understand we don't have work force right now, but this is something we need to do with fidelity, which is make sure individuals are working toward getting the expertise and it's not just words on paper. If we don't do this with fidelity, we won't have people in four years. Parents are reporting nothing is happening, but other schools are going right ahead and doing it. Doesn't understand the disconnect between some schools saying they don't know how to follow the rules while others are getting it done. Many of the schools that are getting it done are often the smaller, more challenged schools. Have heard horrific stories from the larger schools that are not getting it done, and fidelity is a word they've never heard of.</p> <p>Section 3.08: Ongoing problem. Definition of "programs approved or defined by the Department" means one determined by school district to meet all required components. Lovely idea, but something needs to be in rules giving someone the final say. Would hope every school district would do this but there is ample evidence that it won't. ADE needs to provide direction: does it need legislation to be an enforcer? Some school districts do only what they have to do; it is a significant problem. Wants ADE guidance; does there need to be another law?</p> <p>Page 5: 4.02 notes has not marked out "fidelity," just noting that it is there.</p> <p>DIBELS: Some districts where superintendents and</p> | <p>The term "fidelity" was stricken from the proposed rules only in those instances where it was removed from the law. See Section 7.01 ("fidelity" removed in Act 1268 of 2015, codified as Ark. Code Ann. § 6-41-605). The same is true with the term "may" in Section 7.01.</p> <p>Regarding frequency of screening, please see above the response to the 1/19/16 comment of Mary Bryant (each student, who does not fall into an exception, must be screened in kindergarten, in the first grade, and in the second grade; beyond as well when a difficulty is noted).</p> <p>Non-substantive change made to Section 4.05 to clarify that a student with an existing diagnosis of dyslexia is exempt only if the school district is providing interventions to the student.</p> <p>Non-substantive change made to Section 6.03 to clarify that if a school district does not provide intervention based upon the diagnosis, it must notify the student's parent or guardian of its reasoning.</p> <p>Non-substantive change made to "NOTE" in Section 2.02 to clarify that in addition to a school district's continuing obligations under the IDEA, it also must continue to meet its obligations under § 504 of the Rehabilitation Act, as amended. Both the IDEA and § 504 provide due process when parents/guardians disagree with a school district decision regarding the provision of services required under those laws.</p> <p>Non-substantive change to Section 7.01 to clarify that although all interventions listed in Sections 7.01.1 through 7.01.4 need not be provided, services provided must include those the school district deems appropriate.</p> <p>Regarding enforcement authority, please see above response to 2/2/16 comment of Amber Jones.</p> <p>Section 8.01 refers readers to the Dyslexia Resource Guide, which instructs how to report through APSGN and what information must be entered.</p> <p>Section 12.00 mirrors the law (see Ark. Code Ann. § 6-41-609).</p> <p>Comments considered. Non-substantive changes made</p> |

supervisors still telling folks they have to screen every child every year for dyslexia. Don't know how to make this any clearer. They are screening using DIBELS or some equivalent that is required by this law and is brand new. Adds to confusion: nothing new about it; it was already there. DIBELS screening is a starting place in helping kids with dyslexia or markers of any reading issue.

Page 6, 4.045, reading that students with existing diagnosis of dyslexia are exempt from screening. If student has a diagnosis, it's going to have to be accepted by the school; maybe that needs to be clarified at this point in the rules. Section 6.02, a school district "shall consider" the diagnoses. Reads shall consider recognizing that a diagnosis might not be acceptable in a valid way. This was a compromise. This section needs to be beefed up, because school district could say it has considered the diagnoses and "bye." Can't be this lackadaisical. Suggests language: if district considers a diagnosis and decides not to accept it, then (1) need to make sure they explain to parent why that diagnosis or evaluation was not accepted; and (2) needs to be some way for parents to have some appeal, at least to the school board.

Section 7.01. Use of "may." The "may" came about because of a question: if a student is dyslexic, does s/he need all of the listed interventions, or just some? May have to follow up, as answer is crucial to "may." If "may" remains, add "but shall include all appropriate interventions" after "may include the following instructional approaches." Need to be assured that people cannot argue that "may" means they don't have to do it. Page 9, top of page "receive training and certification from program approved by the department," raised question in her mind, if ADE can approve which programs are okay, why cannot we enforce whether a school district is using a program that is appropriate and meeting kids' needs. If it is about legislation, tell us that.

Section 8.01 school districts "shall annually report," need definition for school district as to what they are going to report and what it will look like. Needs to be how many were in school district, how many were screened, how many got intervention; otherwise no point of reference to know what report could mean.

Last page, 11.01.2 "the science behind teaching a student who is dyslexic" [which is struck through], commenter recalls that evidence-based interventions are going to include that. Commenter wants ADE to think about whether this is correct. Section 12.0, struck "students at risk for dyslexia and related disorders," don't remember if there is a definition for "related disorders"; know supposed to be thinking about kids with dysgraphia and dyscalculia. Want to follow up with ADE about this.

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| | | Comments considered. No changes made. |
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| 2/2/16 (Public Comment Hearing) | Meissa Hannah, Speech-Language Pathologist and Certified Academic Language Therapist | <p>Visited with school (third time) where a child is receiving dyslexia services. Thought meeting went well, but dyslexia interventionist decided student did not need Tier III intervention. Teacher doing everything she can, but feeling like a failure. Had unproductive meetings regarding child. Child had two comprehensive evaluations from two unrelated agencies confirming child had dyslexia, but school district required more testing. Today in third meeting, psychological examiner who attended third meeting thought child was receiving services recommended in the first meeting [move to Tier III], but child was not. Then notified student was receiving the right intervention, but why then were they meeting and another test being required? Not a quick fix, but have to recognize that what we're doing now is not right. Our programs—dyslexic and otherwise—are not supported with scientific data, but beliefs and opinions. Reading is not a natural process. Alphabetic writing system is not learned simply from exposure to print. Spoken and written language are different. Most important skill in early reading is the ability to read single words completely, accurately, and fluently. Context is not the primary factor in word recognition, only effective 10% of the time, yet it is the first strategy we teach. Interventions are very systematic, can't just "sprinkle in" some multi-sensory stuff. Teachers may attend an Orton-Gillingham training and "check, we meet the law." But then they aren't doing it with fidelity. Science of reading has proven three areas of brain must work together for a child to learn to read. Two of those area do not activate or underactivate for children with dyslexia, and unless they have the right multi-sensory intervention, they will not activate. The interventions we do now with RTI are a "little band-aid." When kids reach middle school, they fall all to pieces because they can't read textbooks. Such a gap in the amount of information teachers need; they do not know. Not teachers' fault, "we" failed the teacher because she doesn't have the knowledge or training she needs. Districts will only train teachers when "we" come and force the issue. Twenty percent of children are dyslexic, but we are failing 68% of students. If we would just provide the right kind of instruction, only the dyslexic kids would need intervention. When kids cannot read, their futures are limited.</p> |
| 2/2/16 (Public Comment Hearing) | DeeDee Cain, Arkansas Dyslexia Support Group, UCA | <p>Commenter is dyslexic, as are her mother, sister, and three-year-old child. We will not back down. This law will be enforced. "We" roll up into schools constantly, which schools tell parents to read to their kids. Public education system failed her daughter miserably. Her teachers were fantastic, because commenter hand-picked them all until she was in 4th grade. Not diagnosed with dyslexia until 11th grade. We have this law because special education was not doing what it was supposed to do. Commenter is special education teacher. Systemic</p> |

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| | <p>problem (across U.S.) is that it is a "wait to fill" program; you can never get out of a "wait to fill." Commenter never dismissed a child from SPED. Was never trained to teach these kids. Only way this will stop is at the university level. At UCA, students cannot graduate without learning the science of reading. Most other states require this. We got a "big fat zero" on the NAEP for not having a test for the science of reading. If you pay enough money and go to enough school you can call yourself anything. But if you don't know the science of reading, you cannot teach children to read. Reading recovery is not going to teach children to read. Have to know the science behind reading to teach all students, not only those with dyslexia. We are failing children. People can get a dyslexia endorsement in our universities without ever learning the science of reading. We need to quit blaming parents. We need to jump in and fix the problem. If you had cancer, would find a good doctor; you wouldn't have a janitor perform a mastectomy on you. No matter who you are or how many degrees you have, if you don't know the science of reading don't talk to me about teaching reading. Cuba's literacy rate is 97%, so don't talk about the "poverty brain." The "poverty brain," like the "dyslexia brain," responds to intervention. We have to help the teachers whose hands are tied at their schools. It is so sad what has happened; we have to do better by our kids. It is embarrassing. There's a way to fix this, and we all have to be willing to admit that what we do is not right.</p> |
| 2/2/16 (Public Comment Hearing) | Debbie Miller, Conway School District, Director of Instructional Services |