

Georgia Dyslexia Pilot Program School-Level Implementation Analysis

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The purpose of this brief is to describe findings from interviews with six pilot schools about their implementation of the three-year Georgia Dyslexia Pilot Program. The Region 6 Comprehensive Center (RC6) developed this brief at the request of, and in collaboration with, the Georgia Department of Education (GaDOE).

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I. Introduction

The purpose of this brief is to provide information about school-level implementation of the three-year Georgia Dyslexia Pilot Program. In 2019, the Georgia Assembly passed Senate Bill 48 (Georgia Code §20-2-159.6 or S.B. 48) into law. Beginning in the 2024–25 school year, S.B. 48 and Georgia Board Rule 160-4-2-.39 will require local school systems to screen all kindergarten through grade 3 students for characteristics of dyslexia. To prepare for this statewide mandate, S.B. 48 also required the Georgia Department of Education (GaDOE) to conduct a three-year pilot program (2020–23) to screen students for characteristics of dyslexia, provide reading intervention services to those who need support, and monitor students' progress to determine whether the intervention improved students' language processing and reading skills.

Seven districts were selected by the GaDOE to be part of the pilot. They took different approaches to implementation, ranging from implementing the pilot requirements in one school for all three years of the pilot to implementing districtwide from the beginning. (For a timeline and the history of the Georgia Dyslexia Pilot Program, see *Georgia Dyslexia Pilot Program Implementation Analysis: 2019–2020.*)

This brief summarizes information gathered from virtual interviews conducted in January and February 2023 with 16 staff members from six schools implementing the Georgia Dyslexia Pilot Program. Six of the seven pilot districts were represented in the interviews; the seventh district was not represented because the pilot school's leadership was included in district-level interviews each year. The six schools interviewed were selected in coordination with pilot district leaders, with attention to their demographic profile as summarized in Table 1. The intent was for the sample schools to vary by location, size, and proportion of mobile or economically disadvantaged students and students who are English learners. Five of the six schools had implemented the pilot since its beginning in 2020-21. Content analysis of the interviews was conducted by the first report author.

Student Subgroups (2021-22 Data) % Mobility³ School Location Students¹ % ED¹ % ELL² % SWD² School A Rural 170 31% 0% 21% 17% School B 570 29% 7% 20% Suburban 38% School C Suburban 183 19% 11% 5.5% 9% School D Urban 504 39% 0% 21% 21% School E 1,024 13.5% 9% 17% Suburban 11% School F Suburban 670 26% 79% 4% 13%

Table 1. Overview of Schools Interviewed

Note: ED: Economically Disadvantaged (directly certified). Directly certified students include those whose families receive SNAP or TANF benefits and students identified as homeless, unaccompanied youth, or foster or migrant youth. For more information: https://gosa.georgia.gov/auditing-evaluation-research/evaluation-research-reports/research-reports/directcert

ELL: English Language Learner; SWD: Students With Disabilities

Mobility: The percentage of students who entered or withdrew from a school during the year.

 $\textbf{Data available at:} \ \underline{\textbf{https://gosa.georgia.gov/dashboards-data-report-card/downloadable-data}\\$



¹ Governor's Office of Student Achievement: 2021-22 Direct Certification (School Level)

² Governor's Office of Student Achievement: 2021-22 Enrollment by Subgroup Programs

³ Governor's Office of Student Achievement: 2021-22 Student Mobility Rates (by school)

II. Findings Overview

The experiences of schools participating in the Georgia Dyslexia Pilot Program provide important insights into how the rollout of <u>S.B. 48's requirements</u> may proceed and the supports that need to be in place for other schools across the state to successfully implement dyslexia screening in 2024-25. Key findings from six school interviews with a total of 16 staff are organized into the following five areas:

- 1) Funding and Alignment with Existing Initiatives
- 2) Implementation Strengths and Challenges
- 3) How the Pilot Affected Practice
- 4) Support Needed from Districts and the GaDOE
- 5) Suggestions for Schools Across Georgia

1. Funding and Alignment with Existing Initiatives

Funding

Schools reported using a variety of funding sources for pilot implementation. Two schools each named the state Early Intervention Program (EIP) and federal Title I funding as key sources. One school is located in a district that is part of the current Literacy for Learning, Living, and Leading (L4GA) Grant and said those funds supported screening, interventionists, and instructional resources that were critical to pilot implementation. One school sought out and received external grants from the International Dyslexia Association and other sources to pay for professional development because its professional development funds were limited.



We're towards the end of [the L4GA] grant now, so if that runs out there are going to be lots of things related to the pilot that we are going to be struggling to be able to afford.

Three schools interviewed cited funding—which they could use for screening tools and professional learning, for example—as a future area of need from the state. Two districts provided screening tools and intervention programs to their schools so the pilot schools did not have to cover these costs out of school funds. This district funding was helpful to those schools because they could use their school funds for personnel and other resources.

Alignment with MTSS and School Improvement

The majority of schools interviewed spoke of the Georgia Dyslexia Pilot Program integrating well with existing MTSS structures and/or school improvement initiatives. Four schools noted that the pilot required an additional layer of screening that did not previously exist; three spoke of their ability to take existing identification and intervention practices a step further thanks to this additional screening. Said one school, "When we look at our school improvement plan (SIP), your biggest two areas are literacy and math. So, it aligns very nicely to both of those because we can drill down and find those kids and remediate where needed."

2. Implementation Strengths and Challenges

Interviewees were asked to identify strengths of their school's implementation of the Georgia Dyslexia Pilot, as well as challenges they faced in implementation. Their responses are briefly outlined in Figure 1 below and explained in more detail by type of strength/challenge—school context, communication, staffing, screening, and intervention—in the text following the figure.

Figure 1. Main Implementation Strengths and Challenges Identified by Pilot Schools

Implementation Strengths

- Size: Both large and small school and district size was helpful in different ways.
- Communication: Frequent communication among staff, between the school and district levels, and with commercial publishers was helpful.
- **Support Staff**: Having staff who could help classroom teachers with screening and data analysis was very beneficial.
- **Buy-In**: Staff assisted each other, engaged in continuous learning, and were open to changing practices.
- Low Turnover: A consistent staff meant less training of new staff was needed from year to year.
- **Screening**: Schools liked their screening tools, found the data valuable, and had found ways to screen students efficiently.
- Intervention: Making time for intervention, using a program that could also be used by students at home, and having consistent intervention supports across schools in the district were mentioned as beneficial to implementation.

Implementation Challenges

- Population Transience and Growth: Schools serving populations in which students were
 frequently moving or being added throughout the year were challenged in staying on top of
 screening, intervention, and communication with parents.
- **English Learners**: Screening English learners, especially kindergartners, and communicating with their parents about the pilot presented unique challenges.
- **Communication**: Communicating with parents about screening and student data and making time for staff to collaborate was important, but difficult at times.
- Staff: Teacher shortages and increased demands on existing staff were seen as challenges.
- Screening Logistics: Finding the time, space, and personnel to conduct screening could be difficult.
- **Training for screening**: Training on screening tools needed to extend beyond those staff who regularly conducted screening.
- **Intervention**: Finding the time to provide intervention and starting intervention as early in the year as possible was often difficult, and staff had to learn new programs for providing support.

School Context



Strengths. Contextual factors were reported as implementation strengths by four schools:

• **Size:** Four schools mentioned their school or district size as a benefit to implementation. Two small schools said their size made it easier to provide coaching to teachers or allowed staff to engage in much more vertical planning than they would otherwise. One school said its district's small size helped facilitate effective communication and quick decision-making between school and district staff. A large school reported that its size enabled it to hire a large support staff and more interventionists, which helped it meet students' needs.

- **Student Demographics:** One school noted that its highly stratified student population—with large proportions of high-performing and low-performing students but a small number of students in the middle—meant that teachers were experienced in providing small group instruction and targeting students' specific needs, which is a key part of pilot implementation.
- Challenges. All six schools pointed to context-specific challenges they faced in implementing the pilot:
 - Population Transience and Growth: Transient student populations and students who were
 frequently tardy or absent created difficulties with conducting screening and progress
 monitoring, organizing intervention groups and providing the intervention students needed,
 and meeting with parents about student progress. One fast-growing school said the
 continuing influx of new students required constant efforts to screen them and made it
 necessary to frequently change the makeup and/or focus of intervention groups.
 - English Learners: School staff had difficulty communicating with families about the pilot
 when parents did not speak English, and English learners were often flagged as "at risk" by
 screening tools when their difficulties likely stemmed from their level of English language
 acquisition.

Communication



<u>Strengths.</u> Three schools pointed to communication as a strength of their implementation efforts. Two spoke of the importance of ensuring frequent communication among staff about students, whether that occurred in weekly teacher meetings or through informal conversations. One school described feeling supported by the information received from the district and screening tool publisher.



<u>Challenges.</u> Every school interviewed also identified some aspect of communication as a challenge to pilot implementation. Five of the six schools cited communication difficulties with parents about screening, data, and what dyslexia is and is not. Two schools described finding time for staff to collaboratively analyze data, discuss students, and plan for instruction and intervention as a challenge.

Staffing



Strengths. Three schools described their staff as an implementation strength:

• Support Staff: Two schools said that their ability to fund support staff was very helpful for pilot implementation (interventionists in one school; EIP and English to Speakers of Other Languages (ESOL) support teachers, an ESOL coach; and a dedicated school literacy coach and MTSS Coordinator in the other). These staff assisted with screening, provided intervention support for students individually and in small groups, and served as key resources for teachers as they reviewed student data and planned for instruction.

- Staff Buy-In: Three schools noted a high degree of staff buy-in for pilot practices. This buy-in was evident in how administrators prioritized having common time for planning and data analysis and how teachers prioritized intervention and continuous improvement in reading instructional practices. These schools praised the willingness of their staff to engage in continuous learning—including learning from each other—and to seek new knowledge and expertise (e.g., completing Orton-Gillingham training or obtaining the dyslexia endorsement).
- Low Staff Turnover: Two schools identified low staff turnover as a benefit because they did not have to continually train new staff on tools and processes.
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<u>Challenges.</u> Three schools described staff-related challenges to pilot implementation. Two pointed to the need to shift staff roles and assign additional responsibilities to existing staff (e.g., communicating screening results to parents); while one cited difficulty with teacher shortages and hesitancy about increasing the demands on teachers.

Screening



<u>Strengths.</u> All six schools described satisfaction with their current screening tools and the data the tools provide. Several said this data is "very valuable" and is being used effectively for planning instruction and intervention and having conversations with parents about student progress. Two schools said that training instructional support staff, such as paraprofessionals and interventionists, to conduct screening helped them screen students with minimal impacts on instructional time. Two schools reported being pleased with their ability to screen all students efficiently.



Challenges. A number of challenges related to screening also surfaced across the six schools:

- Logistics: Three schools named finding the time, space, and personnel to conduct screening as notable challenges to pilot implementation, as well as deciding on the timing of screening throughout the year.
- **Training:** Two schools said it would have been helpful if more staff were familiar with and trained to use the school's screening tools.
- English Learners: Two schools said that navigating screening results for students with limited English proficiency and accurately identifying students who struggled for other reasons was difficult, especially in kindergarten.
- Other: Other screening-related challenges mentioned by one school each, include screening kindergartners (who have limited school experience, short attention spans, and little experience with the digital tools some schools used for screening), navigating decision rules for identifying students as at risk, and the redundancy of screening efforts when using multiple tools.

Intervention



Strengths. Three schools named intervention as a strength of their implementation efforts. Two felt that by this point in the pilot they had worked out the challenge of making time to provide intervention support to students. One liked that students could use the district's intervention program remotely, from their homes. Another school spoke of the importance of having different intervention options, but also consistency across schools in the district in what is available for each teacher to use.



<u>Challenges.</u> Four schools noted that finding the time to provide intervention to students was a challenge. In some cases, they had to make choices about the instruction students would miss in order to receive intervention instead. One school struggled with the length of its delay in starting intervention due to the need to complete the screening process and analyze student data, and another noted that new students arriving in the middle of the year meant there were frequent changes to established intervention groups. One school said that learning the ins and outs of a new intervention program was a challenge for staff.

3. How the Pilot Affected Practices

The Georgia Dyslexia Pilot was perceived as having positive impacts on schools' practices. In some cases, the impacts exceeded the pilot's intent to improve identification of and intervention for students with

characteristics of dyslexia and reflected changes that benefit all students, as described below.

Strengthened Core Reading Instruction

Four schools pointed to ways in which participating in the pilot helped them improve core reading instruction for students. Interviewees said that pilot-related training (e.g., Orton-Gillingham training and the dyslexia endorsement) has changed and enhanced their schools' teaching practices and they feel better equipped to teach reading to all

students, including students with reading difficulties. They also described increasing their use of

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[The pilot] definitely did bring to light how many things were being done, which has led to narrowing down and really identifying what each kid needs and a quicker turnaround of [changing an] intervention [that] is not working, instead of adding another one.

different instructional resources, which pushed them toward instructional practices based on the science of reading, namely incorporating explicit phonics instruction and decodable readers, and focusing more on foundational reading skills.

Better Tools and Data

Four schools said that the pilot led to improvements in the screening and progress monitoring tools available to them and helped them better target intervention based on screening results. The new screening tools they implemented to meet pilot requirements enabled them to "drill down" into students' skills and needs in ways

I even think back on my old students and I'm like, oh

my. There was so much more I could have done

had I had some of this

training and awareness.

they felt they could not have done with previous tools. Some of these tools integrated screening and progress monitoring, which interviewees found especially helpful for analyzing data and grouping students for intervention. They reported that easier data analysis and student grouping led to intervention that was better targeted at students' needs.

With more detailed screening data came the opportunity to create better and more consistent decision rules for identifying students in need of intervention support and/or further assessment. Every school interviewed spoke of improvements in this area. Overall, they said that teachers were more knowledgeable about student data and better at using it to inform instruction and intervention.

Effective Communication with Families

Not only were teachers better at using data in the classroom, but interviewees reported teachers were able to have more effective conversations with families about students' progress. Two schools noted that their communication with families became more datacentered and staff felt free to have "courageous conversations" with families about students' specific reading difficulties and what they might mean, including using the term "dyslexia." School staff were also better able to relate student progress in a way families could understand using the data they now had at hand.

We're not saying [to parents], 'I guess they're doing okay, they could do better.' We're going to say, 'They're performing on a first grade level and they're getting ready to go to middle school.' So it puts it in black and white, which I love.

4. Support Schools Needed from Districts and the GaDOE

Interviewed schools were asked to identify supports they needed from either their district or the state. Their responses are summarized in Figure 2 below.

Figure 2. School-Identified Needs for Support

State Information and Guidance

Four schools identified types of information or guidance they needed from the state. Two spoke of needing more guidance on identifying students as having characteristics of dyslexia. One school wished for state-issued parent resources about dyslexia and the pilot. Another felt that a state-developed intervention bank would be helpful, and one school hoped for the state to issue a list of screening tools appropriate for S.B. 48 implementation.

State Funding

Three schools said that additional funds from the state were either necessary or helpful. One school said state funding for screening tools would be necessary for many schools to implement S.B. 48. Another felt that additional funding for professional learning would be helpful, while a third wished for better pay for teachers to balance the increased expectations S.B. 48 will bring.

Time for Planning, Instruction, and Intervention

Two schools referenced the need for their districts to help them create time in the master schedule to support implementation of S.B. 48. One school had a district-created weekly collaborative planning time for staff during COVID, but recently lost it when the district returned to a normal schedule. They had not yet been able to set aside the time staff needed to analyze student data and plan instruction and intervention. An interviewee at another school described a need for dedicated blocks for phonics instruction and intervention during the school day.



Direct Support from District Staff

Three schools wanted more direct support from their districts. Two schools felt it would be helpful for their districts to dedicate district staff to taking tasks off the plates of school staff, such as screening students and communicating with parents about screening results. Two schools reported a need for their districts to have a staff member dedicated to managing the pilot and merging pilot requirements with existing MTSS structures.

Other Needs from Districts

Other needs identified by one school each included:

- Making training on screening tools easily accessible for all teachers (with particular attention to the time of day training is offered);
- Expanding use of the district's screening and intervention tool to 4th and 5th grades;
- Streamlining communication with parents about the pilot and processes for obtaining parent consent for screening and/or intervention; and
- Ensuring consistency in the district's selected screening tools by not changing them frequently.

5. Suggestions for Schools Across Georgia

Interviewees offered advice for schools across Georgia as they prepare for implementation of S.B. 48's requirements in 2024-25. The main elements of their advice are described below.

Getting Started

Several of the schools interviewed said that implementing S.B. 48 will likely require schools to "start small" and take things one step at a time. They acknowledged that there will be frustration as staff become accustomed to new tools and processes, as there is with any big change. Three schools recommended that schools start by training staff on the selected screening tool, ideally in a grade-levelspecific format that allows teachers to learn how to use the tool and how to interpret the data it provides in their classroom context. However, two of these schools also noted that some teachers might not buy into the screening process and the need for it until they see the screener in action and are able to see and use the data they receive about their own students' needs.

I think probably the biggest piece of advice would be to eat the elephant one bite at a time, because it's easy to go in and have the big picture vision and want to get to the masterpiece all at one time, and it doesn't happen that way. You really have to pick and choose and then be strategic about what you get rolled out, and then be patient as people learn.

I think involving the MTSS coordinators across the district on the front end to figure out the matches [in processes and tools] ... would definitely be beneficial instead of having to figure that out after it's been rolled out.

One school also noted that districts establishing processes for and providing guidance on S.B. 48 implementation to their schools need to first determine how the new processes and tools relate to those currently in place across the district. Creating new, district-wide processes that do not account for variation in schools without consulting school leaders can lead to more work for school staff later on as they attempt to figure out what implementation looks like. While one school felt that its district's development of standard operating procedures for the pilot was very helpful for

implementation, another noted that district processes should also allow enough flexibility across schools to account for individual students' differences and unique needs.

Supporting Teachers

It takes a while for buy-in from teachers ... once you see all the different ways you can better support your students, then the buy-in comes. You're going to get more pushback at first until teachers really see the value.

Two schools spoke of the importance of supporting staff once S.B. 48 is implemented. In particular, they mentioned being patient with teachers as they learn to use new screening tools, providing support in data analysis and use, and allowing the time necessary to complete and score screeners. Providing this type of support can help create buy-in. One school also mentioned the importance of providing support to substitute teachers, who may lack the background and training of regular classroom teachers. Interviewees suggested scheduling a day for substitutes to plan together, talk with school leaders, and become clear on expectations.

Another aspect of supporting staff that was mentioned by three schools was the need to consider existing scheduling structures and priorities carefully. One school mentioned guarding intervention time in the school day. Another suggested scheduling a regular time for teachers to review their students' progress monitoring data and make decisions about instruction and intervention. The third has struggled this year with a lack of common planning time for school staff to review student data and plan for instruction and intervention and is acutely aware of the need to make time for this on a weekly basis.

Steps to Take Now

Determining how S.B. 48's requirements relate to existing school and district processes is one action schools and districts can take now; considering existing time structures and priorities is another. Other suggestions for how schools could start preparing for S.B. 48 implementation included improving teacher preparation and training for structured literacy instruction and making targeted small group instruction a regular part of students' daily literacy block if it is not already. Two schools also noted a need for both districts and schools to consider how they will share information about dyslexia, screening, and student data with parents and help parents understand what this information means.

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Get the systems and processes in place for assessment and for the turnaround of assessment into instruction. I feel like that's been the success here: there were already really strong systems in place. While there was an initial rub of figuring out where this new piece [fit in], the structures for identification and instruction were already there.

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Appendix A: School Summaries

While the main body of this report contains interview findings summarized from across the six schools, Appendix A contains individual school summaries of each of the interviews in order to provide a sense of how the six schools varied in their approaches to implementation of the pilot. Each of the six school summaries (School A - F) begins with a short description of the school's context, followed by information from the interviews organized by the following areas:

- 1) Before the Pilot
- 2) Pilot Impacts
- 3) Challenges
- 4) Strengths
- 5) Integration with MTSS and School Improvement

School A

School A is a very small, rural school serving students in Pre-K through sixth grade. Students in this school have relatively high mobility, and most who move in or out transfer between School A and schools in Florida. The school has two classrooms each for first, second, third, and fifth grades; there is only one classroom each for kindergarten and fourth and sixth grades.

Before the Pilot

Prior to the Georgia Dyslexia Pilot, School A used DIBELS (now named Acadience) to screen for early literacy skills. Intervention occurred during the school day or after school, but "was definitely lacking back in those days." Interviewees reflected that Tier 1 instruction has seen many changes over the past few years and is much stronger now than it was before the pilot.

Pilot Impacts

At the start of the pilot, School A was already initiating some changes to literacy screening due to its receipt of a Literacy for Learning, Living, and Leading (L4GA) grant. As part of the L4GA requirements, the school transitioned to using Acadience as its universal reading screening and progress monitoring tool during the first year of pilot implementation. In the years since, School A has worked to address gaps in how its core reading curriculum addresses phonics and other foundational reading skills. The school recently implemented Saxon Phonics to help fill those gaps, and staff have been trained using MaxScholar's Orton-Gillingham-based multisensory approach to teaching foundational reading skills.

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I feel like we go a step further in that we no longer just want to identify these kids that are at risk. Now we want to know what specifically can we offer that student to help fix their issues early and not wait until they're in third, fourth, and fifth [grades] and they still are lacking in foundational skills.

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In the 2022-23 school year teachers were asked to prioritize small group instruction and look closely at Acadience data to inform instructional content, which now centers

on foundational skills, fluency, and comprehension. Paraprofessionals and special education teachers push into classrooms and ensure that each teacher with an ELA block can dedicate at least 45 minutes daily to small group instruction. Interviewees noted that "those changes [to core instruction] were actually initiated prior to the actual pilot, but we've gotten better with what we're doing with all of that content because of the pilot."

Interviewees reported that the pilot has helped them focus on identifying and responding to students' specific needs. They have also noted an overall mindset shift away from teachers informally identifying students who they believe need special education services and working to get the students evaluated, with the assumption that they will get the instruction they need once they are found eligible. Instead, the enhanced screening data collected is used to identify the specific support those students need and provide that support as early as possible in the general education classroom. While the school is unable to point to an obvious reduction in the number of students being found eligible for special education, they have seen a noticeable decline in the number of third, fourth, and fifth graders who are struggling with foundational reading skills.

Challenges

School A reports that its rural location and economically disadvantaged population present barriers for students, which translates to additional challenges for the school. Families often lack the resources and opportunities to provide children with experiences that promote school readiness and support their academic needs outside of the school day. The school's fairly high mobility rate also presents a challenge, as the school receives students who have not had the same level of literacy instruction and may be well below grade level.

Finding the time for staff to analyze student data and plan for instruction and intervention was a struggle in 2022-23. For the two years prior to that, all schools in the district released early on Wednesdays (originally as a response to COVID, to allow time to clean schools) and teachers were able to use this time to plan collaboratively. Interviewees felt that the staff "were using it very effectively for data driven conversations and for instructional planning." This year the district returned to a regular schedule and School A's staff are only able to plan together about once per month. The school has not been able to replace the lost weekly collaborative planning time, which has hampered staff's ability to have timely data-driven conversations.

Strengths

As a small school with limited staff and funding, the additional funds available due to the L4GA grant have been instrumental for implementing the Georgia Dyslexia Pilot. The school used some of these funds to hire interventionists who assist with screening and intervention and to pay for the Acadience platform, books, and other supplies.

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If it had not been for L4GA we probably would not have been able to do all that we've done ... it's been a key factor in how far we've come with the pilot.





Teacher turnover is very low at School A, meaning that the school does not need to constantly retrain staff and can instead focus on enhancing their knowledge and skills. The small number of classroom teachers enables—and in fact requires, since some teachers are the only teacher for their grade level—a greater degree of vertical planning than might take place in larger schools. Even teachers in the upper grade levels are able to support students who are lacking in foundational reading skills. The school staff were described as having "a dynamic synergy," and their buy-in to this initiative was a strength.

Integration with MTSS and School Improvement

School A reported that the pilot requirements for screening integrated well with their universal screening processes. However, the additional level of screening needed to identify students with characteristics of dyslexia was an added requirement that did not exist before the pilot. The strengthened focus on monitoring student progress in reading has also integrated well with other school improvement initiatives.

School B

School B is a mid-sized, suburban, K-5 Title I school with primarily Hispanic and Black students. The school also serves almost all of the K-5 students experiencing homelessness in the district and has a high student mobility rate. Teacher turnover is low, which interviewees credit to the school's leadership.

Before the Pilot

Prior to the Georgia Dyslexia Pilot, the school used the state Early Intervention Program (EIP) Checklist to screen kindergartners. Measures of Academic Progress (MAP), Fountas & Pinnell Running Records, the Developmental Reading Assessment (DRA), and phonics inventories by Brenda Fitzgerald were also used as screening tools. Existing MTSS structures included established processes and decision rules for identifying students who needed intervention beyond what they received through EIP support and requirements for progress monitoring. Intervention programs used before the pilot began included System 44, Read 180, Fundations, 95% Phonics, Lexia, and Just Words. Students could receive multiple interventions—in some cases, for a total of two hours or more per day.

Pilot Impacts

School B's district undertook multiple efforts to reform reading instruction around the same time as the pilot, making it difficult to separate out impacts of the pilot from impacts of other district initiatives. In 2018-19 the district began training elementary general and special education teachers, paraprofessionals, EIP teachers, and ESOL teachers in the Orton-Gillingham Approach. The Georgia Dyslexia Pilot began in 2020-21, and that spring the district began training principals and district level staff on structured literacy and the science of reading as part of an external grant. This training was

[The pilot] definitely did bring to light how many things were being done, which really has led to narrowing down and really identifying what each kid needs and a quicker turnaround if an intervention is not working—instead of adding another one, changing [the intervention].

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then pushed down to the school level. Interviewees said this science of reading training would have occurred with or without the Georgia Dyslexia Pilot Program, but that being in the pilot put district and school staff "a step ahead" in terms of where the district was already headed.

One clear impact of the pilot was an effort to streamline intervention support and better align support with what each student needed. Prior to the pilot, students in need of support often received multiple types of intervention, with new interventions added on top of the old if existing ones were not producing improvement. The pilot led staff to look more closely at students' specific needs, select interventions that addressed those needs, and consider changing interventions instead of stacking them.

Challenges

The biggest challenge interviewees at School B reported was figuring out how to fit intervention "into each child's larger jigsaw puzzle of their educational day." This could be especially challenging when students were frequently absent, came to school late, or left school early, missing their scheduled intervention time.

The school also struggled with teasing out whether reading difficulties were due to a child's level of English language acquisition or might indicate characteristics of dyslexia when considering screening results for its large population of English learners. Initially, School B established cutoff points using ACCESS language proficiency

One thing we know is that we don't add an additional 30 minutes onto [a student's] day. So taking the time to do that intervention has to replace something. So then the question is what's the right thing for it to replace?

scores—students scoring below a certain level were not considered for dyslexia-specific intervention, as the assumption was that their difficulties were due to their level of English language acquisition. However, as the pilot proceeded the school found that these decisions need to be made on a child-by-child basis and take into account observations from both classroom and ESOL teachers, as well as each child's ACCESS score history as a way of factoring in the student's language growth.

Another challenge for School B was parent communication in general and obtaining parental consent more specifically. Communicating with parents about the pilot and what dyslexia is (and is not) is an area in which interviewees felt they could use more support. The district's processes include requesting consent for a second level of screening and requesting consent for students to receive intervention if they are identified as at-risk for characteristics of dyslexia. "Seeking out a lot of parent permission, it's time consuming," said one interviewee. The amount of time required to send and receive multiple consent forms means that there is sometimes a delay of one or more months before students can receive the dyslexia-specific intervention they need.

Strengths

The number of in-house staff who can provide instructional support for teachers was described as one of the school's strengths in pilot implementation. School B's principal chooses to invest heavily in support staff who can pull students from across classrooms and work with them in small groups or one-

on-one. These primarily consist of EIP and ESOL teachers. The school also has a dedicated literacy coach, an MTSS Coordinator, and an ESOL coach.

Interviewees from School B reflected that their district's small size helped facilitate direct and regular communication between the school and district levels, which helped them make "quick pivots" when decisions needed to be made about instruction and intervention for specific students. On the other hand, interviewees also mentioned that these decisions often involve review by many different school and district staff and the sign-off process could be more streamlined.

Another strength is that the district funds the main intervention programs used by its schools, which frees up school funds for other purposes. As such, School B did not feel that a lack of funding was a barrier to implementation. A benefit of consistent district-wide intervention programs is that transient students who move between schools within the district are able to continue receiving the same intervention support, said interviewees.

Integration with MTSS and School Improvement

In School B, the pilot operates both within and alongside existing district-wide MTSS processes, which were well-developed prior to the pilot. All students are screened for reading difficulties, but those identified as at-risk then receive additional screening and are considered for dyslexia-specific intervention. Interviewees report that the school's principal has done a great job of "making the pilot fall in line with what existed at the school level."

School C

School C is a small, suburban, Title I school serving students in kindergarten through second grade. It has a culturally and socioeconomically diverse student population that includes English learners from across the world, including many from Middle Eastern and African nations.

Before the Pilot

Interviewees reflected that the school had strong MTSS structures in place prior to the pilot. These processes included using Measures of Academic Progress (MAP) and DIBELS (prior to DIBELS' name change to Acadience) for screening, as well as consistent decision rules for determining which students qualified for support. The school used a "What I Need" (WIN) block to make time for intervention. Fundations has been available as an intervention option since before the pilot began. In 2020, many teachers received training in the Orton-Gillingham Approach thanks to an external grant. This training helped start a culture shift that was enhanced by the school's participation in the pilot.

Pilot Impacts

The biggest pilot impacts reported by School C were the additional layer of screening to identify students with characteristics of dyslexia and enhanced communication with families about reading progress and dyslexia. Interviewees said that conversations with parents about their students had



shifted from general communication about low reading performance to more specific conversations about how the school was supporting the student. They reflected that teachers feel more equipped to have those conversations and to discuss that a child's specific difficulties could indicate characteristics of dyslexia. With knowledge gained from the pilot, staff feel more confident talking about dyslexia and in their ability to address students' individual needs.

I think the pilot is making conversations about dyslexia more the norm, and being able to feel a little bit more equipped.... I think it just normalizes a little bit more what dyslexia is. That's a big part I think of the culture shift.

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Challenges

School C's biggest reported challenges relate to screening English learners and communicating with families about screening results. Interviewees indicated that English learners may be flagged numerous times by different assessment tools as at-risk for reading difficulties due to their lack of English proficiency. Each time a student is flagged, a notice is sent to the student's family. As a result, families may receive several different pieces of communication about their child's reading difficulties, which can lead families to question and even distrust the school's motives. Interviewees also noted a need for additional education for the community about dyslexia, because there is still a lack of understanding about what it is and what it means for students.

A related challenge reported by School C was the additional knowledge and time required for staff to communicate with families about students' screening results, especially when those families' first language is not English. This task usually fell to the school's EIP teachers, and even with a district call line for translators, interviewees said teachers often had to make one or more follow-up calls and "the finesse of explaining what was on the assessments was difficult in translation."

Strengths

Interviewees at School C reported that at this point in time, teachers have a good understanding of screening data and of how to help students who struggle with reading. This knowledge has evolved over the course of the pilot, and they note that it took some time to get buy-in from teachers because they have to first acclimate to changes, then recognize how the screening tools help them better support students.

Both screening tools currently used by the school—MAP Growth and Acadience—were perceived positively, though in different ways. Interviewees said that Acadience provides more specific information about students' skills and is more likely to flag students with characteristics of dyslexia, while MAP is more useful for identifying high performing students who could benefit from enrichment and extension.

Intervention was another strength reported by the school. The interventionists and EIP teachers who provide support to students who need it are trained in a variety of different strategies, including Orton-Gillingham, and interviewees felt that School C does a very good job of targeting students' needs. They noted that this is true for English learners as well, whom they observed benefit from a structured

literacy approach and tend to quickly move from Tier 3 support to Tier 2 support as they acquire foundational elements of English.

Integration with MTSS and School Improvement

Interviewees at School C felt that some aspects of the Georgia Dyslexia Pilot—namely the additional screening processes—could be redundant with MTSS, given that their school already had a structure and processes in place for supporting students with reading difficulties. One concern driving that feeling related to not wanting to over-test students. They suggested that careful thought be put into merging an existing process with new ones to ensure that any extra layers of screening provide valuable data. In addition, they said care should be taken to leave enough flexibility that only students who truly need additional screening (for example, not those whose reading difficulties are due to English language acquisition) are targeted for that extra screening.

School D

School D is a mid-sized urban school serving K-5 students. It has a relatively large special education population because it hosts several self-contained special education classes for the district. Because it plays this role, the school also has a large number of support staff.

Before the Pilot

School D's efforts to support students before the pilot were led by the Student Support Team chair, 504 chair, and a lead special education teacher. Students were screened using Star Early Literacy and Star Reading, as well as the Fountas & Pinnell Benchmark Assessment System and Educational Software for Guiding Instruction (ESGI). There were existing decision rules for using screening data to identify students in need of intervention support, but interviewees report that they were less well-defined than they are now. Interventions were largely selected from those available at InterventionCentral.org and other resources.

Pilot Impacts

Entry into the pilot brought an additional layer of screening using Star CBM for students identified as at-

risk on Star Early Literacy or Star Reading. Star CBM is also used for setting goals for students, progress monitoring, and data analysis, as it generates graphs and trend lines that can be used to monitor progress toward the established goals. Decision rules for screening and progress monitoring have been formalized in district Dyslexia Standard Operating Procedures. Dyslexia pilot leaders at each school have access to this document and are responsible for familiarizing teachers with the decision rules.

Interviewees at School D reported that they have participated in a variety of professional learning opportunities since the start of the pilot,

They were not fun to put into place, they were not fun to review, but our standing operating procedures.... I do think that really helped us know exactly where to go.



including Orton-Gillingham training and the dyslexia endorsement. While they said they likely would have pursued these opportunities even without the pilot, they have been "more meaningful" because of the school's pilot implementation. The new knowledge gained from this professional development aligned with pilot efforts and pushed the school toward more intentional and explicit phonics instruction and the use of decodable readers in place of leveled readers.

Challenges

Finding the time, space, and staff to screen and progress monitor students were all challenges reported by School D. Classroom teachers sometimes struggled to hear the students they were screening within the classroom and had to conduct some parts of screening in the hall. Some paraprofessionals have also been trained to conduct screening, which leaves teachers free to continue instruction, but these paraprofessionals are only state-funded in kindergarten classrooms. The four first grade classrooms shared two paraprofessionals, some of whom were not trained to use Star CBM, and second grade classrooms had none. One interviewee reported feeling overwhelmed by the task of pulling students from her class for screening at the beginning of the year, considering all of the other demands on her time and the difficulty of managing a classroom of young students as they completed independent work.

Another challenge interviewees noted was obtaining signed parent consent forms for the second-level Star CBM screening. Without consent for this non-universal screening, staff cannot screen students and obtain data to help target intervention to students' needs. Interviewees suggested that perhaps consent should carry over from year to year for students who continue to need support in order to reduce the amount of time staff spend trying to obtain consent and collect the signed forms.

Strengths

The multifunctionality of Star CBM is something School D finds very valuable for determining intervention needs, collecting and analyzing progress monitoring data, and communicating with parents about student progress. Star CBM also allows for mixed-format use—either on a computer or on paper—which interviewees said was very helpful, especially for kindergarten students who may struggle to use computers independently.

School D's district has expanded the pilot districtwide over the past three years, so while School D has been implementing the pilot since the beginning in 2020-21, it has received some teachers from other schools in the district who were less familiar with the pilot. Interviewees reported that existing teachers have

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The biggest thing I think is that our teachers are more experienced, they have more knowledge, and so they're even less anxious now than when we were in Year One. Year One, it was a lot of, 'It's okay. We'll get through this. We'll learn together.' So that's [what] 2024-2025 [might look like] as a state.

worked together to support teachers who are new to the school and to the pilot. It is now, in the third and final year of pilot implementation, that interviewees felt they were "over the learning curve" in terms of their ability to screen students and interpret and use student data. School leaders are very supportive of staff and are willing to purchase evidence-based resources, as well as support teachers in

seeking professional learning opportunities. The school's administration has also worked to make sure staff have common planning time to discuss student data.

Integration with MTSS and School Improvement

Interviewees at School D reported that the processes and tools they learned to use through the pilot are easier to use than in the past and the data they collect for the pilot aligns very well with existing MTSS and Student Support Team processes. The pilot has also helped the school develop "a common language within MTSS" because screening and progress monitoring is more consistent across classrooms, grade levels, and the school as a whole.

School E

School E is a large and rapidly growing suburban K-5 school. It hosts five self-contained classrooms for the district, resulting in a larger than average population of students with disabilities. As the overall student population has increased, so has the proportion of English learners in the school. The school currently has an MTSS coordinator and eight Early Intervention Program (EIP) interventionists (some full time and some part time) to support students.

Before the Pilot

School E had many of its current assessment and intervention structures and processes in place prior to the start of the pilot, including universal screening three times per year for K-5 students, a district-created data spreadsheet that documented and weighted all the pieces of data collected for each student, and decision rules for determining which students needed intervention. Screening tools included Measures of Academic Progress (MAP), Fountas & Pinnell Running Records, and DIBELS (which later changed to Acadience). Interventions were drawn from an intervention bank that included Fountas & Pinnell Leveled Literacy Intervention, Really Great Reading, and the Orton-Gillingham Approach. DIBELS was used for progress monitoring. The school used to have a dedicated intervention block in the master schedule, but the rapid growth in recent years made scheduling that block so difficult that it was discontinued.

Pilot Impacts

Interviewees reported that the pilot has led School E to refine its screening process and drill down into students' specific skill deficits in reading in order to better target intervention. Rather than just noting that a student needs support, they can now identify which specific type of support students need. The district-created spreadsheet houses all screening data, which has led to a greater understanding of the relative value of different pieces of data. This spreadsheet calculates a risk score for each student that is used to identify students for different levels of reading intervention. While Fountas & Pinnell Running Records are still used, the pilot has led the school to realize that for the purpose of informing instruction and intervention, the more specific data collected from Acadience screening is particularly valuable. As

such, the relative weights of data sources in the spreadsheet have changed to maximize the impact of the more valuable data on student risk scores.

Classroom teachers in School E have received "a significant amount" of professional learning on the screening tools and the use of screening data during the course of the pilot. Interviewees report that in the past, teachers did not have a good understanding of the data in the district spreadsheet or pay much attention to students' rankings. The MTSS team took the lead in identifying interventions for students who needed support. With better teacher understanding of the assessments and what the data means came better use of it to inform instruction. This increased understanding has also helped to create teacher buy-in.

I'm just so happy that this is becoming what it is and that these kids are going to get everything that they need, because they deserve it.

Challenges

School E's rapid growth means that screening is a continuous process and intervention groups frequently change as new students with intervention needs are identified. The school's large student body and group of support staff—a total of nine MTSS and EIP staff, some of whom also support ESOL students—has also created challenges in communicating about individual students' needs and finding time to plan and discuss data collaboratively. Interviewees reported that they communicate with each other through weekly professional learning communities (during which they discuss the students they currently serve), as well as informally through email and text messaging. Each support staff member serves multiple grade levels and is responsible for assisting with screening, managing progress monitoring data, and ensuring that regular data analysis meetings are held for students receiving intervention.

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We did have to go find the money to get [Orton-Gillingham] training ... we wanted to make sure that if we were going to dive into this fully, we were going to provide the best instruction possible. So we really did go after that full force. Scheduling intervention is another challenge for such a large school with many different groups of students who need services beyond general education. The master schedule has to provide time for special education and ESOL services, and interviewees said, "it requires very creative scheduling and that takes months to build out." Since the school has been unable to create a dedicated intervention block in recent years, each support teacher's schedule and the way in which they provide intervention (e.g., push in vs. pull out) varies.

A final challenge reported was finding funds for professional learning. Interviewees from School E said that much of the school's professional learning funds have gone toward STEAM-focused opportunities in recent years, leaving little for other purposes. They applied for and

were awarded external grants through the International Dyslexia Association and local dyslexia networks, which allowed team members to obtain Orton-Gillingham training. This kind of training is something that staff in other schools in the district may not have access to unless they also seek out external funding.

Strengths

While screening such a large number of students three times per year "is a struggle," interviewees reported that School E has worked to develop a very effective system. The school now has an assessment team that includes not just the MTSS and EIP team, but also ESOL teachers and gifted teachers. This large screening team allows the school to complete screening quickly and minimize impacts on classroom teachers' instructional time.

Interviewees felt that School E's structures and processes for screening and intervention are strong, but they also continue to evaluate and refine the use of their current screening tools and data. Now, the school is turning more of its focus toward strengthening core reading instruction by building teacher knowledge of reading instruction and focusing on improving instructional materials (e.g., replacing leveled texts with decodable readers).

Integration with MTSS and School Improvement

Interviewees at School E reported that the pilot integrated well with the school's existing MTSS processes. They also said that it aligned well with their school improvement plan because the two biggest areas of their plan are focused on improving literacy and math. Thanks to the pilot, they can now "drill down and find those kids and remediate where needed," which helps them address these areas of need in the school improvement plan

School F

School F is a midsized suburban K-5 school. Most of its students are English Learners, the majority of whom speak Spanish at home. It has four EIP teachers and more than half a dozen ESOL teachers to support students. However, the school has struggled with staff shortages, which has impacted support staff. At the time of the interview, two of the EIP teachers were covering classrooms due to teacher vacancies.

Before the Pilot

School F's district had well-established MTSS processes and decision rules prior to the pilot. Screening involved observations from classroom and ESOL teachers and data from norm-referenced assessments (including MAP, which is used districtwide) and district-created benchmark assessments. Students whose assessment data "matched with what [teachers] were seeing in class" and showed a need for support would receive Tier 2 intervention and progress monitoring for a defined period of time. If progress monitoring revealed that students needed more intensive interventions, they would be moved into Tier 3. Intervention was provided by ESOL teachers, EIP teachers, and any other support staff who might pull students and work with them individually or in a small group. Progress monitoring prior to the pilot was described as "arduous," and tools had to be obtained from a district-approved website.



Pilot Impacts

Screening, progress monitoring, and intervention using iStation were integrated into School F's processes when the school began pilot implementation. Interviewees reported that one of the biggest pilot impacts is having data that shows a student is struggling in reading. Teachers are using that data to inform decisions about which students need intervention, as well as to adjust instruction and group students based on their level of risk for reading difficulties. Progress monitoring has become much easier, and iStation allows teachers to easily dig more deeply into student data. Teachers are also able to share screening data with parents and pull intervention resources from the

I think one of the biggest things since doing the dyslexia screener is just having the data.... I wasn't just making it up in my mind, this student is really struggling.

iStation or tell students to spend a certain amount of time working in the program at home.

Challenges

School F's large population of English learners has presented some unique challenges to pilot implementation. Interviewees reported that the language barrier was a significant challenge for screening students and obtaining useful data. This was especially true for kindergartners, who often had

Sometimes the ESOL students are classified as being high risk, when they just don't know. They don't know that that's an A or a five or a seven.

limited school experience, English language skills, and exposure to the technology they needed to use to complete the screening. Interviewees reflected, "I don't think the data for kindergarten is appropriate.... I don't really look at the screener for kindergarten." They expressed that screening at the end of the kindergarten year would be more helpful than screening in the fall. iStation does not include a Spanish-language screener, and students with limited English proficiency were often flagged as high risk even when their difficulties were due to their level of familiarity with English.

Another challenge interviewees mentioned was staffing shortages. Like many other schools at this point in time, the school struggled to find both teachers and substitutes. Two of the school's four EIP teachers were covering classrooms at the time of the interview, meaning that they could not provide intervention to students. The substitute teachers the school did have were often not experienced with teaching elementary students. Interviewees reported that in some cases, even long-term substitutes were not clear that the expectation was for them to serve as the classroom teacher and provide day-to-day instruction.

A final challenge reported in School F was that the school had many fourth and fifth grade students whom interviewees felt would have benefited from using iStation, but the program was only provided by the district for students in kindergarten through third grade. As a result, these upper elementary students were not screened like younger students were and were "going to go into middle school and still not be identified." They also did not have access to the iStation intervention resources available at lower grade levels, which interviewees reported would have been helpful for supporting them.

Strengths

The district's chosen dyslexia screening tool, iStation, was seen as an implementation strength by interviewees at School F. They reported that its multifunctionality—as a screening and progress monitoring tool and intervention resource—added significant value to the school's efforts to identify and support students. Interviewees said the screener helped teachers have conversations with parents about student performance. They were also pleased that students could access the program at home for additional support. Teachers found iStation's feedback helpful for adjusting reading instruction and used its library of resources to differentiate instruction and provide extra support to students.

Other reported strengths were that the staff at School F "band together to get the screener done" and ensure that students who are flagged as high risk receive the intervention support they need from iStation each week. Communication from the district to the school level and from the iStation publisher to the school were also strong points.

Integration with MTSS and School Improvement

Interviewees said that using iStation through the pilot was helpful for MTSS because the program provides data in different ways (e.g., reading levels, Lexile levels), which is not only helpful for teachers, but also useful for parent meetings. Being able to easily break down students' data equips teachers to have conversations with parents about how a student is performing in reading and what the school is doing to support the student. The program also includes monthly progress monitoring assessments and short, customized lessons based on the assessment results, which is helpful for determining if students are responding to the intervention.

