

**TESTIMONY ON HB 1231
SENATE EDUCATION COMMITTEE**

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By: Brenda Ehrmantraut, Assistant Director of Academic Support

701-328-1809

North Dakota Department of Public Instruction

Chairman Elkin and Members of the Committee:

My name is Brenda Ehrmantraut and I am an Assistant Director with the Department of Public Instruction. I am here to provide information on House Bill 1231 relating to teacher license requirements for reading instruction competency and a dyslexia screening and intervention program report and legislative study.

The Department of Public Instruction is grateful to the 66th and 67th Legislative Assemblies for the opportunity to operate and learn from a pilot program between 2019 and 2023 supporting selected districts in setting up systems for screening and providing intervention instruction to students with characteristics of dyslexia. The program also provided professional development to teachers within the pilot sites about recognizing signs of dyslexia and supporting students struggling with identified reading skill deficits. Pilot sites were required to provide periodic updates to the Department of Public Instruction on the success of their approaches.

Dyslexia is a neurobiological condition characterized by slow or inaccurate reading, poor spelling, poor writing or mixing up similar words. The International Dyslexia Association states that 15 – 20% of the student population may exhibit

characteristics of dyslexia. Not all students with symptoms of dyslexia will qualify for special education, but they will likely struggle with many aspects of academic learning. Systematic, explicit instruction in reading, writing, and language benefit many students who are challenged by dyslexia. The skills in the areas of phonemic awareness, phonics and fluency are frequently indicative of dyslexia and are targeted for intervention.

The districts in the North Dakota pilot program have learned to rely on a systematic approach to screening, identifying, instructing, and progress monitoring to provide early and direct support to students with dyslexic characteristics. First, all pilot districts have developed a universal early screening and follow-up process for deeper examination of subtests to identify children at risk of academic struggles due to dyslexia. Second, all pilot schools have identified scientifically based programs and practices to provide intervention instruction specifically aligned with the skill deficits revealed through screening and diagnosis. Third, all districts involved have provided dyslexia awareness professional development and explicit and systematic literacy instruction training to teachers of early elementary students. Last, all districts monitored the progress of students and provided evidence of increased phonemic and word recognition skills since adjusting their core and intervention delivery models. School teams also work together to adjust programmatic approaches to intensify intervention as necessary.

Sometimes, it is necessary for a student to receive intensive support under the supervision of an expert in dyslexia intervention. The pilot schools have demonstrated that much can be done within a well-designed, well-informed local school system to meet the needs of students with dyslexia traits. Early identification and intervention of students with dyslexic characteristics and the appropriate provision of individual interventions can significantly affect the individual student's future academic success.

Chairman Elkin and Members of the Committee that concludes my prepared testimony and I will stand for any questions that you may have.