My conclusions from reading research:
Compelling evidence from a convergence of reading research is indicating that 90% to 95% of all students can achieve literacy skills at or approaching grade level. These statistics include students with dyslexia and other learning disabilities. Students succeed when they receive intensive, comprehensive, and high-quality prevention and early intervention instruction, provided by well-informed and well-supported teachers.
The most powerful instruction is systematic, explicit, multimodal and intensive, designed to appropriately integrate elements of oral language development, phonemic awareness, phonics and decoding, fluency, vocabulary development, and reading comprehension skills and strategies.

Jan Hasbrouck, Ph.D.

Gaab, 2017; Torgesen, 2007; Vellutino & Fletcher, 2007; Rashotte, MacPhee, Torgesen, 2001; Al Otailba, Connor, Foorman, Schatschneider, Greutich, Sitler, 2009;
**Educators as Physicians**

- Benchmark/Screening
- Diagnostic
- Progress Monitoring

**OUTCOMES-BASED MODEL**

**STEP ONE:** Identify students at risk

**A Professional Parallel...**

Tier I: Annual Check-up; Standard treatment; REGULAR physician Screening data

“Universal Screening”

**BIG IDEA of ALL ASSESSMENTS**
All assessments are conducted to answer a QUESTION!
Educators’ Question? 

WHO needs help?

Benchmark Screening 
3x Year: Fall, Winter, Spring

- Significantly Below Benchmark
- Slightly Below Benchmark
- At or Above Benchmark

“universal screening”

Common Benchmark Assessments Using ORF

- DIBELS 8 Dynamic Indicators of Basic Early Literacy Skills K-6
- Acadience K-6
- AIMSweb Pearson K-8
- easyCBM Riverside K-8
- FAST Fastbridge Learning 1-8

All are versions of CBM ORF assessments

ORF essentially measures RATE 
Automaticity? Hosp & Suchey, 2014
ORF assessments function as a thermometer

QUICKLY provide information
- Reliable (accurate)
- Valid (relevant, useful, & important)
- Compared to benchmark...

BUT... body temperature only one single indicator of general health or illness:

Normal? 103 degrees?

ORF measures of accuracy + rate provide one reasonably dependable indicator of a student’s academic “health” or “illness”—NEVER a diagnosis for a treatment plan!

30+ years of research...

ORF measures have a moderate-to-strong correlation with reading comprehension

Fuchs, Fuchs, Hosp, & Jenkins (2001)
Reschly et al. (2009)
Tindal (2013)

The ABCs of CBM
(2016) 2nd Ed
Michelle Hosp, John Hosp, & Ken Howell
Benchmark Screening
3x Year: Fall, Winter, Spring

OUTCOMES-BASED MODEL

STEP ONE:
Identify students at risk

STEP TWO:
Determine individual needs and plan instruction

“universal screening”

A Professional Parallel...

Tier II
Strategic, Supplemental Care
SPECIALIST working with regular physician

Differentiated Assessments for Diagnosis

“Treatment without diagnosis is malpractice.”
Educators As Physicians: Assessing Foundational Skills
Jan Hasbrouck, Ph.D.

Educators’ Question?

WHAT help do they need?

DIAGNOSTIC ASSESSMENTS

Benchmark Screener

- Significantly Below Benchmark
- Slightly Below Benchmark
- At or Above Benchmark

Consider diagnostic assessments

- Core + Intervention or Core Replacement Tier 3
- Core + Supplementary Support Tier 2

Collect additional information as necessary

- Begin or Continue Core Instruction Tier 1

Five Key Instructional Components

- Phonemic Awareness
- Phonics
- Fluency
- Vocabulary
- Comprehension Skills

Arkansas Foundational Skills K-5

- Print Concepts
- Phonological Awareness
- Phonics and Word Recognition
- Fluency

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**PA Assessments**

- PAST (Phonological Awareness Screening Test) Kilpatrick
- Comprehensive Test of Phonological Awareness (CTPA)
- Test of Phonological Awareness in Spanish (TPAS)
- Test of Phonological Awareness (TOPA)
- Lindamood Auditory Conceptualization Test
- Yopp-Singer Test of Phoneme Segmentation (K-1)
- Rosner-Simon Auditory Analysis Test (Grade 2+)

**Assessing Phonics & Decoding**

- Identify sounds in isolation
- Apply decoding strategies to nonsense and real words
- Assess full range of skills (cvc, ccvc, ccve, ccvcc, etc.) & multi-syllable words
OUTCOMES-BASED MODEL

STEP ONE:
Identify students at risk

STEP TWO:
Determine individual needs and plan instruction

STEP THREE:
Implement plan

STEP FOUR:
Monitor progress

STEP FIVE:
Make changes or continue the plan

A Professional Parallel...

Tier III
Intensive Care
TEAM of doctors, nurses, technicians, etc. Monitoring data

Greater need?
MORE - and more FREQUENT -- data collected!

Educators’ Question?

Is the work WORKING?

Differentiated Progress Monitoring in Reading

On-Level (Tier I)
Repeat benchmark assessments
3x year or as indicated
+ daily observation & in-program assessments

Supplemental (Tier II) or Intervention (Tier III)
Curriculum-based Measurement (CBM) ORF or maze
Graph the results
**INTERPRETING Progress Monitoring Graphs**

**General Rules:**

*from National Center for Student Progress Monitoring*

Use 5 consecutive scores.

- If all **ABOVE** goal-line: Keep current intervention and increase goal
- If all **BELOW** goal-line: Keep current goal and modify the instruction
- If **NEITHER ABOVE OR BELOW** goal-line: Maintain current goal & instruction & continue monitoring

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**What to MODIFY?**

- Appropriate "MATCH" of instruction
- QUALITY of program & instruction
- FIDELITY of instruction
- INTENSITY of instruction
- DURATION of instruction

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Available for download at:

www.gha-pd.com/resources

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THANK YOU!!

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Diagnostic Assessment Sequence

- Informal Reading Inventory (modified) + Fluency
- Phonics & Decoding
- PA, Sight Words, Spelling

K - 1 begin assessments here
Gr. 2 - 12+ begin here

Continue appropriate instruction based on assessment results
Assess phonics & decoding if instruction has started for this skill
Teach blending, segmenting, sounds & sight words