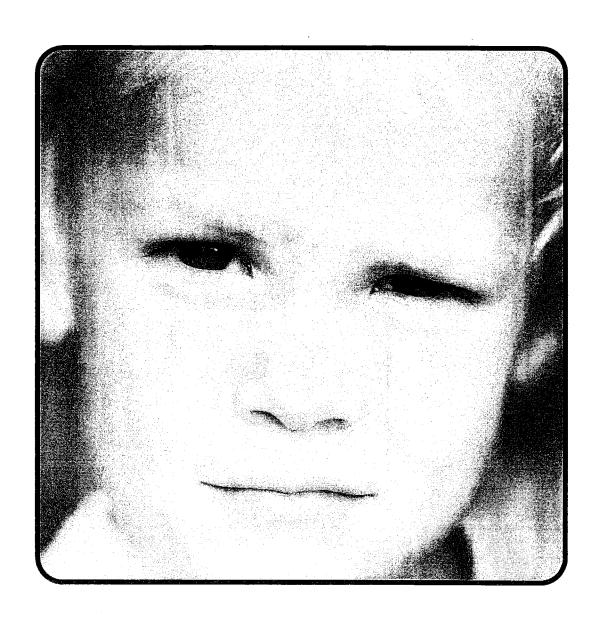
Ohio Appendix



OHIO -- EARLY CHILDHOOD EDUCATION

Children are ready for school as the result of access to health services, relationships with adults that foster social skills and a sense of self worth, and the opportunities and experiences associated with learning and early reading skills. Therefore, families, schools, early learning settings and communities all have critically important roles to play in helping young children get off to a good start.

In Ohio's state-funded early learning programs, particular attention is paid to academic content, program quality and accountability for programs. Content learning is defined in Ohio's Early Learning Content Standards. With indicators that identify concepts and skills that are representative of what young children should know and be able to do by the time they enter kindergarten. The Early Learning Content Standards in English/Language Arts, Mathematics, Science and Social Studies are aligned to the Ohio Academic Content Standards K-12 and grade level Benchmarks, and provide a seamless transition from preschool to kindergarten.

In addition, Ohio's Early Learning Program Guidelines (ELPG) identify aspects of high quality early childhood care and education programs. The ELPG are organized around four research-based themes:

All children are born ready to learn

Environments matter

Relationships are influential, and

Communication is critical.

Within these four themes, indicators define elements that must be in place to ensure programs are organized and accountable in meeting the health, developmental and educational needs of children and their families.

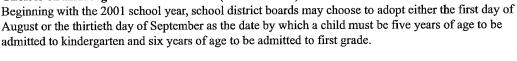
Finally, Ohio has in place a system of data collection to ensure accountability at the child, classroom and program levels. The Get it! Got it! Go! literacy assessment provides data to track child progress and inform instruction. The Early Language and Literacy Classroom Observation (ELLCO) instrument provides data of the classroom environment and teacher-child interactions relative to literacy learning. ELLCO data are also used by the state to design high-quality professional development. Together these assessment measures provide an evaluation of our current practice and inform our continued work on behalf of Ohio's children and families.

To learn more about Ohio's Early Learning Initiative, other programs and resources visit: http://www.ode.state.oh.us/GD/Templates/Pages/ODE/ODEPrimary.aspx?Page=2&TopicRelationID=463



OHIO LEGISLATION GOVERNING KINDERGARTEN

Choices on Kindergarten Entrance Date (ORC 3321.01)





Age Requirements

A student must be age 5 to enter kindergarten or age 6 to enter grade one.

Compulsory school age is 6. However, if a child enters kindergarten at age 5, they are considered to be of compulsory school age.

No district shall admit to the first grade any child who has not successfully completed kindergarten, except as provided below:

Pupil Personnel Services Committee

Upon the request of a parent, the pupil personnel services committee may waive the kindergarten experience requirement if the child turns age 6 by Sept. 30 of the year of admittance and demonstrates to the satisfaction of the committee the possession of the social, emotional and cognitive skills necessary for first grade.

The responsibilities of the pupil personnel services committee shall be limited to the issuing of waivers allowing admittance to first grade without the successful completion of kindergarten. The committee shall have no other authority. The committee shall be composed to all of the following members to the extent such personnel are either employed by the district or employed by the governing board of the educational service center:

- (1) The director of pupil personnel services;
- (2) An elementary school counselor;
- (3) An elementary school principal;
- (4) A school psychologist;
- (5) A teacher assigned to teach first grade.



Request for Early Entrance

If a child does not turn age 5 or 6 by the district cut-off date (Aug. 1 or Sept. 30), but turns age 5 or 6 by Jan. 1, the parent may request that the child be tested for possible placement in kindergarten or first grade respectively. Districts conducting such tests shall:

Utilize a standardized testing program; and

Establish the necessary standards it will accept for the purpose of early admission.



Successful Completion of Kindergarten

No school district shall admit a child to first grade that has not successfully completed kindergarten except as outlined above. Successful completion of kindergarten means that the child has completed the kindergarten requirements at one of the following:

- 1. A pubic or chartered nonpublic school OR
- 2. A kindergarten program that is all of the following:
 - a. Offered by a day-care provider licensed under Chapter 5104 of the revised code.
 - b. If offered after July 1, 1991, is directly taught by a teacher who holds one of the following:
 - (i) a valid certification/educator license issued under Section 3319.22 of the revised code;
 - (ii) a Montessori preprimary credential or age-appropriate diploma granted by the American Montessori Society or the Association Montessori Internationale;
 - (iii) certification for teachers in nontax-supported schools pursuant to section 3301.07.01 of the revised code.
 - c. Determined to be developmentally appropriate.



Screening (ORC 3313.673)

By Nov. 1 of the school year in which a child is enrolled for the first time, the child must be screened for:

- Vision
- · Hearing
- Speech and communication
- · Medical problems
- · Developmental disorders

If the screening reveals the possibility of potential learning needs, the district must provide further assessment. Schools must note that screenings are not intended to diagnose educational disability or to be used for placement procedures.



Instruction Time and Length of School Year (ORC 3313.48)

For the purpose of instruction, schools must be open a minimum of 182 days in each school year including a maximum of 2 days for individualized parent-teacher conferences, 2 days for professional development and 5 days for calamity. For kindergarten, pubic school districts are only required to provide 2.5 hours of instruction per day.



Full-Day Kindergarten (ORC 3321-05)

Any school district may operate all-day kindergarten. If a district provides full-day kindergarten and the parent requests half-day services (minimum hours), the district must accommodate that request.

It is permissible for districts providing full-day services and not receiving Poverty Based-Assistance (State Formula Funding) funding to charge a fee for providing the full-day services. School districts must charge families based on a sliding fee-scale.



Teacher-to-Student Ratio (ORC 3301-35-05)

The ratio of teachers to students in kindergarten through fourth grade on a district-wide basis shall be at least one full-time equivalent classroom teacher per 25 students in the regular student population.



OHIO'S STATEWIDE KINDERGARTEN ASSESSMENT KINDERGARTEN READINESS ASSESSMENT – LITERACY (KRA-L)

Purpose:

The assessment is designed to help educators evaluate young children's literacy skills at the beginning of the kindergarten year.

Legislation:

Ohio Revised Code 3301.07.15 mandates that all public and community school districts assess all first time kindergarten students. The KRA-L is the only statewide kindergarten assessment required for kindergarten. Results are reported via EMIS during the October Reporting Period.

Administration Window:

Districts must administer no sooner than four weeks prior to the start of school and not later than October 1st. Change effective March 1, 2007 per H.B. 276.

Length of Assessment and KRA-L Components:

The KRA-L is administered individually and takes approximately 15 minutes for each child. The components include: Answering Questions, Sentence Repetition, Rhyming Identification, Rhyming Production, Letter Identification and Initial Sounds.

KRA-L Score and Score Bands:

The assessment yields a total composite score of 29. There is no "cut-score" as this is not a high stakes or a pass or fail assessment. The scores should be used to determine if further assessment is needed as follows:

- 0-13: Assess broadly for intense instruction
- 14-23: Assess for targeted instruction
- 24-29: Assess for enriched instruction

KRA-L Resources:

How to KRA-L: A Manual for Teachers and Other Education Professionals

The manual provides a more in-depth look at the purpose of the KRA-L, how and why it was developed. It contains scenarios to help educators gain a better understanding of assessing for pre-reading readiness, strategies for collecting and organizing assessment data, sharing the information with parents and using the results to inform instruction.

Administration DVD

This five-part administration DVD was developed as a training tool for teachers and staff to understand the purpose and how to administer the assessment. It contains children in authentic settings being assessed with the KRA-L.

KRA-L Score Interpretation Workbook

The workbook was developed especially for kindergarten teachers. It provides guidance to help organize and use the scores as well as essential intervention strategies.

A Family Guide to Understanding Early Reading Skills: The Kindergarten Readiness Assessment – Literacy (KRA-L) This guide is provided to schools on an annual basis for the purpose of sharing with families. This guide was developed for families to explain the types of activities involved in the assessment. It also includes suggestions for how families can help their children at home, a book list and online resources.

ODE Online Results:

The KRA-L score results are available on the web. The results are listed by county by district and include the number of children assessed, the district average and the percentages within each score band.

www.ode.state.oh.us, Keyword: KRA-L

OHIO'S DIAGNOSTIC ASSESSMENT SYSTEM

Goals of Ohio's Diagnostic Assessments

The role and nature of the diagnostic assessments is different than that of other state-developed tests (proficiency and achievement). Diagnostic assessments serve as tools that assess student strengths and weaknesses to inform instructional decisions. They are flexible tools designed to help Ohio administrators, teachers and students reach two overarching goals:

- Increase student learning of the Academic Content Standards
- · Inform and strengthen classroom instruction

Assessment is only one of the many methods for achieving these goals. Diagnostic assessment is integral to a comprehensive, statewide system of improving learning and instruction. Questions districts should consider:

- How do teachers communicate observations/results from assessments to other teachers, students and parents?
- How will the observations/results from assessments be used to inform instruction?
- How are students motivated to achieve a better understanding of Ohio's Academic Content Standards?
- How can these diagnostic assessments complement existing assessment programs within districts?

Components of Ohio's Diagnostic Assessments

The diagnostic assessments have four components:

Short Screening Measure: Provides a six- to eight-item assessment that can be used to quickly determine whether students are on track to meet end-of-year expectations.

Screening Measure: Provides an analysis of key or fundamental concepts and skills. These carefully selected tasks identify students who may be at risk and need early intervention to learn successfully at their grade level. The screening measure may be used in a variety of ways, including with all students early in the school year, with students new to the district or classroom during the course of the school year, and with at-risk students as evidence of learning key concepts and skills.

Diagnostic Measure: Provides a more in-depth assessment of students' strengths and needs for continued success in meeting the standards. It provides a profile that can be used as a formative or summative assessment at key checkpoints during the school year or as a measure of progress that students have made as a result of the instruction provided during the school year.

Observation Measure: Provides curriculum-embedded assessment strategies to document student progress. This includes a variety of mechanisms for observing and collecting work samples as a means for monitoring students' progress and intervention needs. Available only on the Ohio Department of Education Web site at: http://www.ode.state.oh.us/proficiency/Diagnostic Achievement/default.asp.

Diagnostic Assessment Requirements

According to House Bill 3 (2003), Amended Substitute Senate Bill 2 (2004) and Amended Substitute House Bill 66 (2005) ALL districts must use diagnostic assessments as follows:

Kindergarten: A kindergarten diagnostic assessment must be administered to transfer students only as described below. There is no annual requirement in the law to use kindergarten diagnostic assessments with all kindergarten students. (The KRA-L is the only state assessment that must be administered to all kindergarten students. The KRA-L may not be substituted as a diagnostic assessment for transfer students.)

Grades 1 and 2: All students must be administered a diagnostic assessment in reading, writing and mathematics at least annually. Districts that met AYP in the previous school year may use a diagnostic assessment of their choice. Districts who have not met AYP the previous year must use a state-developed diagnostic assessment (short screening measure, screening measure or diagnostic measure) in order to meet the requirement.

Grade 3: Only buildings in "School Improvement" status must administer a grade 3 writing diagnostic assessment to all third grade students. A state-developed diagnostic assessment (screening measure or diagnostic measure) must be used if the district has not met AYP the previous year. If the district met AYP the previous school year then the building in "School Improvement" status may use a diagnostic assessment of their choice.

Transfer Students (K-3): ALL districts regardless of "School Improvement" status or AYP:

- Must assess students (K-2 in reading, writing and mathematics and grade 3 in writing) who transfer into the district or to a different school within a district if each applicable diagnostic assessment was not administered in the previous district or school;
- May assess students who transfer into the district or to a different school within a district if it cannot be determined that the student was administered a diagnostic assessment in the previous district or school.

Districts who have not met AYP the previous year must use a state-developed diagnostic assessment (short screening measure, screening measure or diagnostic measure) in order to meet the transfer requirement. Districts that met AYP the previous year may use a diagnostic assessment of their choice with transfer students.

Districts are required to administer a diagnostic assessment with transfer students within 30 calendar days of a student's enrollment. Students are considered to be transfer students for the purpose of diagnostic assessment after the EMIS October count week (usually the first full week in October).

Reading First schools may use federal diagnostic tests to meet the state diagnostic testing requirements.

Intervention Policy Requirement

Among the many elements of Senate Bill 1 (2001) is the requirement (Section 3313.6012, Ohio Revised Code) that each district must adopt a policy governing the conduct of academic prevention/intervention services for all grades and schools. The policy must include all of the following:

- Procedures for using diagnostic assessments to measure student progress toward the attainment of academic standards and to identify students who may not attain those academic standards as determined through the use of the diagnostic assessments;
- Plan for design of classroom-based intervention services to meet the instructional needs of individual students as determined by results of diagnostic assessments;
- Procedures for the regular collection of student performance data;
- Procedures for using student performance data from proficiency, achievement or diagnostic assessments to evaluate the effectiveness of intervention services and, if necessary, to modify such services.

In addition to the district policy, each district has to provide prevention/intervention services in pertinent subject areas to students who score below proficient on proficiency or achievement tests or who do not demonstrate academic performance at their grade level based on the results of the diagnostics.

District Policy Decisions

Legislation governs which districts and/or schools must administer diagnostic assessments. However, it is the districts decision as to how the diagnostic assessments are to be administered locally. Districts should determine, based on an evaluation of their current assessment requirements, when and how the diagnostic assessments best fit the district needs within the requirements of the law. In making these decisions it is very important to involve classroom teachers, building administrators and curriculum supervisors, since these decisions will impact instruction, curriculum and intervention.

In guiding district policy decisions, some questions districts might ask to determine what is best for their district are:

- What assessments are currently used in the district? Districts should first take time to look at the assessments currently administered and identify strengths and weaknesses of their assessment program and its alignment to Ohio's academic content standards. Districts may determine which assessments could be replaced with the state-developed diagnostic assessments. Districts may determine which state diagnostic assessments could be used to complement assessments within their program.
- How will these diagnostic assessments best meet the needs of the student? When districts are required to administer a state-developed diagnostic assessment they must administer an assessment at least once a year. There is flexibility in terms of when and how the assessments are used. For instance, districts can choose to use either the short screening measure, screening measure or the diagnostic measure, or any combination of the three measures. Districts can choose when during the school year to give the measure(s). Teachers may choose to give the full measure at one time or to use sections or activities before and/or after instruction is provided on a particular skill. Teachers may select activities from either the screening or diagnostic measure to give to students at the beginning of the year, and then move to additional activities (either easier or more difficult) based on individual student performance. Teachers may decide to administer some of the activities in small group rather than individually (see section -Modifying "Administrative Type" for the Diagnostic Assessments).

Use of any of the above procedures would meet the requirement for administration of a Diagnostic Assessment.

- Who should administer? While administering individually or in small groups, it is the students' teacher who gains the most insight by administering these assessments. However, this does not preclude the district from finding alternative ways of assessing students, while still benefiting the student and teacher. As one example, some districts utilize assessment teams. These teams administer the test while the teacher continues with instruction and after the assessment takes place, the team provides input to the teacher about each student's identified strengths and weaknesses.
- How should scores be used? The diagnostic assessments are informal, standardized, and criterion-referenced to help teachers identify student strengths and weaknesses relative to Ohio's academic content standards. They were designed for the purpose of informing instruction to improve student achievement of grade-level indicators. However, in order to use the scores for individual student performance, the entire measure should be administered at a point in time rather than sections throughout the school year. They should be administered according to the standardized administration procedures in the Administration Manual. Altering the administration type from individual to small group may have some impact on test scores if students within the small group can benefit from other student's responses. It should be noted that teachers benefit from observing student performance and those observations can be more important than obtaining a score. This is why, unlike with the achievement tests, flexibility is given to districts as to how hey can benefit most from these diagnostic assessments.

Modifying "Administration Type" for the Diagnostic Assessments

The common question arises – Can teachers modify the activities from an individual administration to a small group administration? The answer is yes. There were two underlying decisions in determining administration type when these assessments were developed. The first decision relates to the type of activity – whether it is essential to perform the activity individually, so that other students would not benefit from another student's response i.e., oral reading. Secondly, the number of manipulatives which could be supplied to each classroom had a direct effect on the administration type.

Small and large group activities would require a significant increase in the number of manipulatives tobe provided for each classroom. Districts having similar manipulatives in their classrooms already could assess more than one student at a time, as long as the other students in the group are not influenced by another student's responses.

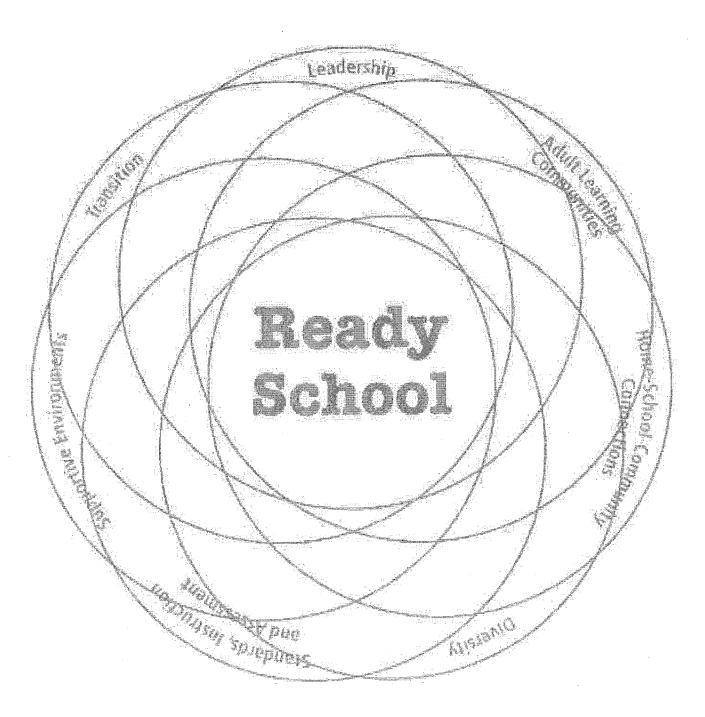
Classroom Management Tips

Planning

- Educators should review all material prior to administration.
- Educators should determine the assessment needs of their students.
- Educators should identify student(s) to be assessed and the amount of time allotted to administer the activity(s).
- · Educators should gather all material prior to administration.
- Educators should decide what they will have the remaining students do while they administer the activity(s).
- Educators should introduce and have students work in activity centers prior to using this management strategy during diagnostic administration.

During Administration

- Embed the administration of activities into everyday classroom instruction.
- Have students who are not a part of the diagnostic assessment work in activity centers.
- Have students divide into small groups working with games/activities that are closely related to the concept
 or skills addressed with the assessments.
- Create student folders designed to meet the needs of each individual student. The materials within the folder should require the students to work independently while the teacher is working with small groups.
- Create a procedure that states when a light is lit or a particular sign is up (e.g., stop sign), students in the class will know that the teacher is working with an individual student or small group and should not be interrupted. Students should have experience operating in this fashion during daily instruction.
- Allow volunteers (e.g., older students, parents, community members, instructional aide. etc.) to work with the small groups of students not involved in the diagnostic assessment.
- Have teachers from teacher teams administer the diagnostic activity(s) while the other teachers work with the remaining students.
- Substitutes can also be used to supervise the students while you administer the diagnostic activity(s).







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