

Improving the Academic Performance of First-Grade
Students with Reading and Math Difficulty

NCT03991234

Informed Consent Form: Teacher Consent

10/26/2023

Date: _____

Dear Teacher:

I am a faculty member at Vanderbilt University. This year, I am doing a research project at your child's school. The purpose of this project is to identify how schools can improve children's math and reading performance. This first-grade project has been approved by the Metropolitan-Nashville Public Schools' central office.

We would like you to participate in this project, which involves the following activities. You would send consent forms home with your students to request parent permission for children's involvement in the project. We would provide your entire class with a reward of stickers or pencils if 90% of students return the consent forms, whether or not parents agree to have their child participate.

We would help administer the 30-minute whole-class math test session near the start of the school year, which you can use to help plan intervention in your school.

We would use results from those tests to determine which of the children whose parents provide consent to participate are a good fit for this project. (We would not collect tests for children whose parents do not provide consent.) Students who score low on the math test would complete other math and reading tests in an individual session that last 1 hour. On these tests, children name letters, name numbers, read words, answer math problems, explain what words mean, and solve puzzles. A graduate student, who is a research assistant on this project and experienced working with children this age, will administer the tests. We will use scores on these tests to identify which children are a good fit for this project; that is, children who look like they may develop difficulty in math and reading.

For students who continue in the study, the following activities will occur. First, you would complete forms. On one 5-minute form, you report the child's age, gender, ethnicity, race, history of special education, years retained, English language services status, and school system ID number (the district will use this ID number to help us follow children if they change schools this year) how well the child pays attention and how hard he/she works in class. For children who are non-native English speakers, you also report English proficiency scores on the school's ACCESS test. You would also complete a 2-minute form on which you provide your own demographics. (Also, we will obtain the child's educational advantage status from the district.) The last form, which you would complete later in the school year, describe information about your reading and math instructional program and provide information on tutoring the school delivered to your students in the project. This form takes about 15 minutes.

Second, students in the project would complete two more individual test sessions, each 1 hour long. On these tests, answer questions about sounds in words, read words, answer math

Date of IRB Approval: 10/26/2023
Date of Expiration: 10/25/2024

Institutional Review Board



problems, solve puzzles, and remember words and numbers they hear. A research assistant on this project who is experienced working with children this age will administer the tests. Near the end of the year, a research assistant will test your child again, in one 45-minute small-group session and two 45-minute individual sessions. The tests ask children to solve puzzles, answer math problems, read words, and answer questions about stories they read.

We will also provide tutoring to three of every four children in the project. One of every four students will receive reading tutoring. One of every four students will receive math tutoring. One of every four students will receive reading and math tutoring. The other students will continue in their classroom math and reading program without any change from us. To determine whether a student receives tutoring and if so which type of tutoring, we will randomly assign children. Tutoring occurs 3 times per week, 35 minutes each time, for 15 weeks and is conducted by a graduate student experienced in working with children. Sessions take place during the regular school day. We would work with you to schedule tutoring so students do not miss important reading or math class time.

Testing and tutoring sessions will be audio recorded to ensure the accuracy with which these sessions are conducted. No child's name or teacher's will appear on any of these tapes.

We would watch for signs that the child does not wish to participate (like crying or uncooperative behavior). If we observe this on two separate occasions, we would no longer include the child in the study, and we would let you and the parent know.

Also, we would provide you with the results of the math and reading tests for each child to help you plan your instruction.

This project has the potential to help children in two ways: by providing you with academic testing information to help you plan your teaching program and by providing children with tutoring designed to improve their reading or math skills. We see no risk associated with your or your students' participation. A possible inconvenience is time spent in completing forms and helping schedule testing and tutoring sessions.

We would pay you one of three amounts. If no students in your class are involved in the individual testing or tutoring phase of the study, we would pay you \$25 for sending consents home and work associated with the whole-class test session. If at least 1 student in your class is involved in the individual testing phase, we would pay you an additional \$50 (for a total of \$75) for helping to schedule testing. If at least 1 student in your class is involved in the tutoring phase, we would pay you an additional \$100 (for a total of \$175) for helping schedule testing and tutoring sessions and completing forms. If you withdraw from the study prior to the end of the year, payment will be pro-rated on a monthly basis.

Only you, the parent (if the parent requests information), and the research staff will have access to the children's test scores. No information or scores will be added to any permanent school records. Additionally, reports will not identify any individual or school. Names will be removed from the tests and replaced with identification numbers. Research records will be stored for 1 year in locked files at Vanderbilt University. Efforts will be made to keep the personal

Date of IRB Approval: 10/26/2023
Date of Expiration: 10/25/2024

Institutional Review Board



information in your students' research records private and confidential but absolute confidentiality cannot be guaranteed. Information may be shared with institutional/governmental authorities if required by law.

If you would like additional information, please call us at **615-343-4782**. Also, if you have any general questions about giving consent or about your rights as a participant in this project, you may call Vanderbilt University's Institutional Review Board at 615-322-2918. Your information may be shared with Vanderbilt or the government, such as the Vanderbilt University Institutional Review Board, Federal Government Office for Human Research Protections, or the federal funding agency, but only if you or someone else is in danger or if we are required to do so by law. Vanderbilt may also provide this project's data to other research projects not listed in this letter. If data are shared, please be assured that no one will be able to figure out that you were part of this project. (There are no plans to pay you for the use or transfer of this de-identified information.) Also, please understand that your participation is voluntary, and you may withdraw at any time by calling me at the bolded number. Because this study is supported by the National Institutes of Health, the data we collect are protected by a Certificate of Confidentiality. This means that, in some cases, we cannot release study information even if it is requested through legal means. It does not protect information we have to report by law, and it does not prevent us from disclosing information if we learn of possible harm to you or others. Disclosures you consent to in this document (sharing data for other research projects) are not protected but as mentioned, if data are shared for future research, no one will be able to figure out you were part of this project. Disclosures you choose to make are not protected.

If you decide not to participate or if you agree and later change your mind, please understand that no negative consequences will occur. If you agree to participate, please complete the form at the end of this letter and return it with this letter. We are also providing you with a copy of this letter for your files. Thank you very much.

Sincerely,

Lynn S. Fuchs, Ph.D.
Professor

CONSENT FORM

I, _____, agree to participate in this study.
(name)

I understand that my participation is voluntary and that I may withdraw from the study at any time.

Signature

Date

School

Date of IRB Approval: 10/26/2023
Date of Expiration: 10/25/2024

Institutional Review Board



Date of IRB Approval: 10/26/2023
Date of Expiration: 10/25/2024

Institutional Review Board

