



# **Russell Independent Schools**

## **Lau Plan**

### **Lau Plan Team Members:**

**Sean Horne, Superintendent**

**Heather Aldrich, Chief Academic Officer**

**Amy McGuire, Director of Special Education**

**Phillip Cassity, Director of Pupil Personnel**

**I. Lau Plan Introduction**

Russell Independent Schools is a district that is equipped to educate all students including immigrants and students who speak a language other than English. In compliance with Title VI of the Civil Rights Act and Equal Educational Opportunities Act, the Russell Independent School District is committed to providing appropriate placement, including curricular, instructional, and other related programs to ensure ELL's are able to participate effectively in the schools educational programs. To facilitate this the Russell Independent School District's Lau Plan details the procedural requirements and services provided to ELL's including identification, assessment, placement, and exit from English Language Learner (ELL) services and referral procedures to ensure appropriate identification of ELLs requiring special education and gifted talented services.

**II. Enrollment, Identification, and Initial Placement of ELLs**

- The Home Language Survey is included in the enrollment packet for Russell Independent Schools. The Home Language Survey identifies students whose first language is not English. If the answer to any question on the Home Language Survey indicates a language other than English, the school contacts the District ELL Coordinator.
- Upon receiving the Home Language Survey, the District ELL Coordinator makes arrangements to administer the WIDA Screener to the ELL student and notify the student's parents of the results within the first 30 days of school. For students who are enrolled after the first 30 days of the school year, the District ELL Coordinator will screen and notify parents within 2 weeks of enrollment.
- Upon completion of screeners and notification to parents, a meeting should be scheduled to develop a Program Service Plan for the student.

**III. Description of the Language**

Russell Independent Schools provides Sheltered English Instruction/Immersion to English Language Learners through collaboration and professional development of general education teachers and English language development staff. We provide pull-out resource time or after-school tutoring for students who are in the beginning stages of English development. The amount of time spent in direct language instruction is determined by the needs of the student and the recommendation of the PSP committee.

**IV. Process to Provide Meaningful Access to all Co-curricular and Extracurricular Programs and Activities**

ELL students will have the same access to co-curricular programs as the general education populations. We use a variety of indicators to determine placement in intervention programs, special education, primary talent pool, and advanced placement classes as test scores are not indicative of the ELL students' ability in all areas.

Such indicators include:

- KAS scores
- ACCESS scores
- Classroom performance
- Parent input
- Student interviews
- Teacher recommendation

In addition, extracurricular activities provided by the district and the community are announced through means of school newsletters and announcements that are provided in English and the students' home language.

**V. EL Professional Development for Staff who Deliver Instruction or Support the PSP for ELL's**

Russell Independent Schools is committed to providing professional learning opportunities for staff that work with our English Language Learner students. Russell Independent will follow all state requirements and guidelines needed to ensure our staff are afforded appropriate training for the English Language Learner population and that our students will achieve academic success.

**Section 2.** Each local school and district shall develop a process to design a professional development plan that meets the goals established in KRS 158.6451 and in the local needs assessment. A school professional development plan shall be incorporated into the school improvement plan and shall be made public prior to the implementation of the plan. The local district professional development plan shall be incorporated into the district improvement plan and posted to the local district Website prior to the implementation of the plan.

**Section 3.** Each school and local district professional development plan shall contain the following six (6) elements:

- A clear statement of the school or district mission;
- Evidence of representation of all persons affected by the professional development plan;
- A needs assessment analysis;
- Professional development objectives that are focused on the school or district mission, derived from needs assessment, and that specify changes in educator practice needed to improve student achievement; and
- A process for evaluating impact on student learning and improving professional learning, using evaluation results.

**VI. Annual English Language Proficiency Assessment and Administration**

English proficiency and growth are measured each year using WIDA ACCESS for ELs Online Assessment for grades 1-12 and K-ACCESS for Kindergarten. As required by the Kentucky Department of Education, all EL students are assessed each January. This assessment measures English proficiency in the four domains of language: listening, speaking, reading, and writing. This test can be administered by any district employee who has been trained and certified by WIDA to administer this assessment

**VII. EL Exit Criteria**

EL exit criteria are based on WIDA ACCESS scores. Students grades 1-12 who reach a composite score of at least 4.5 are considered English proficient and will exit the EL program. Neither students who completed Tier A of ACCESS nor Kindergarten students will exit the program. Students who reach proficiency begin the four year monitoring process on the first day of the following school year.

**VIII. Monitoring Procedures after Students Exit the EL Program**

Exited EL students are monitored for four years after meeting the Kentucky requirements for English proficiency. The District EL Coordinator is required to monitor exited students following the guidelines set forth by the Kentucky Department of Education and under the obligation of Title VI of the Civil Rights Act and the Equal Educational Opportunities Act. To ensure exited EL students are sustaining academic progress, the District EL Coordinator will collect and record data each grading period. The data includes: grade reports, benchmark assessments (if appropriate), common assessments, teacher, student, and parent input. Students who show persistent deficits in any academic area will be provided the support necessary to be successful, including any interventions available. In addition, District EL staff may administer the WIDA MODEL to re-assess the student's English proficiency. If it is determined that a student exited prematurely from the EL program, the student may re-enter the English Language Development Program. If determined by the Program Service Plan committee or the Lau Team that a student should be re-entered, a parent meeting will be required and a Program Service Plan will be created to meet the needs of the student.

**IX. EL Program Evaluation**

The Lau Plan Team will evaluate the EL program utilizing data and a yearly survey provided to staff and parents. Using the most recent ACCESS scores at the end of each school year, the District ELL Coordinator will analyze the percentage of exiting EL students, the percentage of students making growth, the number of long term EL students, and data trends for the schools. Staff and parents will be provided a survey each year to determine future needs for staffing, resources, professional development, home/school communication, and any other related EL services.

**Russell Independent Schools**  
**ESL Program**  
**Limited English Proficient Student Program Services Plan (PSP)**

**STUDENT INFORMATION**

Name: _____ (Last) (First) (Middle Initial)		Date of Birth:	
Preferred Name:		Country of Birth:	
Primary Language:		Date of Enrollment in U.S. Schools:	
<input type="checkbox"/> Male <input type="checkbox"/> Female		Date of Enrollment in RIS:	
<input type="checkbox"/> Refugee <input type="checkbox"/> Migrant <input type="checkbox"/> Immigrant		Date of Home Language Survey:	
School: <input type="checkbox"/> RPS <input type="checkbox"/> RMIS <input type="checkbox"/> RMS <input type="checkbox"/> RHS		Current Grade:	Plan Date:

**INITIAL LANGUAGE ASSESSMENT (LAS)**

Date: _____		Test Type: <input type="checkbox"/> WAPT <input type="checkbox"/> ACCESS		
Speaking _____ Score: _____ Level: _____	Listening _____ Score: _____ Level: _____	Reading _____ Score: _____ Level: _____	Writing _____ Score: _____ Level: _____	Composite _____ Score: _____ Level: _____

**TYPE OF INSTRUCTIONAL SUPPORT (completed by ESL administrative office only)**

<input type="checkbox"/> <b>Type 1:</b> No LEP services – Parent/guardian waived services	<input type="checkbox"/> <b>Type 6:</b> Some LEP services/significant native language
<input type="checkbox"/> <b>Type 2:</b> No LEP services	<input type="checkbox"/> <b>Type 7:</b> Extensive LEP services/all English
<input type="checkbox"/> <b>Type 3:</b> No LEP services/some instructional support	<input type="checkbox"/> <b>Type 8:</b> Extensive LEP services/some native language
<input type="checkbox"/> <b>Type 4:</b> Some LEP services/all English	<input type="checkbox"/> <b>Type 9:</b> Extensive LEP services/significant native language
<input type="checkbox"/> <b>Type 5:</b> Some LEP services/some native language	<input type="checkbox"/> <b>Type 10:</b> LEP monitoring

**DATE EXITED FROM ESL PROGRAM:** \_\_\_\_\_

\*See attached exit documentation (LAS report, exit letter/parent notification)

\*\*Exited students will be monitored by ESL staff for 4 years after exit date.

- The following accommodations/modifications should be applied for **both** instructional and state-required assessment.
- Accommodations/modifications shall not be made **solely** for state-required assessment.
- Students who are **waived** via parent request **will receive** accommodations/modifications.
- Students who have **exited** the ESL program **will not receive** accommodations.

**ACCOMMODATIONS/MODIFICATIONS** (completed by ESL staff member in conjunction with student's principal/teacher)

<input type="checkbox"/> Reader in English	<input type="checkbox"/> Extended time
<input type="checkbox"/> Simplified language	<input type="checkbox"/> Assistive Technology
<input type="checkbox"/> Bilingual or English dictionary	<input type="checkbox"/> Scribe responses
<input type="checkbox"/> Small group/single test form administration	<input type="checkbox"/> Bilingual or English glossary language
<input type="checkbox"/> Reader in primary language	<input type="checkbox"/> Prompting/cueing
<input type="checkbox"/> Oral native language support	

**STATE ASSESSMENT INFORMATION** (completed by ESL staff member)

Will student participate in state required assessment this year?  Yes  No

If yes, define participation/exclusions:

**SPECIAL ED: SEE IEP**

Yes  No

**CLASSROOM/INSTRUCTIONAL STRATEGIES USED BY TEACHERS**

<input type="checkbox"/> Read text in English	<input type="checkbox"/> Oral native language support	<input type="checkbox"/> Assistive technology
<input type="checkbox"/> Scribe Responses	<input type="checkbox"/> Read text in primary language	<input type="checkbox"/> Adapt pace of instruction
<input type="checkbox"/> Bilingual or English dictionary	<input type="checkbox"/> Extended time	<input type="checkbox"/> Use computer/software
<input type="checkbox"/> Prompting/cueing	<input type="checkbox"/> Small group/single test form admin.	<input type="checkbox"/> Provide language objectives
<input type="checkbox"/> Provide visuals/organizers	<input type="checkbox"/> Provide adapted materials/tech.	<input type="checkbox"/> Model language/task completion
<input type="checkbox"/> Use spell check	<input type="checkbox"/> Link instruction to prior learning	<input type="checkbox"/> Provide interaction opportunities
<input type="checkbox"/> Provide content objectives	<input type="checkbox"/> Build background knowledge	<input type="checkbox"/> Simplified language
<input type="checkbox"/> Engage in academic conversations	<input type="checkbox"/> Scaffold responses (oral/written)	
<input type="checkbox"/> Teach and model meta-cognitive	<input type="checkbox"/> Bilingual or English glossary	

**PERSONS INVOLVED IN THE DEVELOPMENT OF THE PROGRAM SERVICES PLAN (PSP):**

	Principal/School Coordinator		Teacher
	ESL Staff		Teacher
	Counselor		Teacher
	Parent		Teacher
	Parent		Teacher
	Teacher		Teacher

Initial Date Plan Implemented: \_\_\_\_\_  
 OR  
 Parent Refused Services: \_\_\_\_\_

**\*\*Parents have the right to refuse ELL services. However, the student will be still be required to participate in ACCESS testing\*\***

***For office use only:***

<input type="checkbox"/> Continue with Plan <input type="checkbox"/> Moved <input type="checkbox"/> Monitor Progress <input type="checkbox"/> Released	Date of Annual Review:		ESL STAFF
<input type="checkbox"/> Continue with Plan <input type="checkbox"/> Moved <input type="checkbox"/> Monitor Progress <input type="checkbox"/> Released	Date of Annual Review:		ESL STAFF
<input type="checkbox"/> Continue with Plan <input type="checkbox"/> Moved <input type="checkbox"/> Monitor Progress <input type="checkbox"/> Released	Date of Annual Review:		ESL STAFF
<input type="checkbox"/> Continue with Plan <input type="checkbox"/> Moved <input type="checkbox"/> Monitor Progress <input type="checkbox"/> Released	Date of Annual Review:		ESL STAFF





# Russell Independent Schools

908 Powell Lane

Flatwoods, Kentucky 41139 (606)  
836-9679

**M. SEAN HORNE**

Superintendent

## Parent Notification

Dear Parents/Guardian:

Welcome to the Russell Independent School System and the 2021-2022 school year. We are glad that you are a part of our community and that your child is attending Russell Primary School.

State and federal law requires that school systems identify students whose primary or home language is not English. It also requires that schools support these students in attaining English proficiency and high academic achievement in English. We want to make sure that your child meets the same challenging expectations as all of Kentucky's children.

Your child, \_\_\_\_\_, has been identified as limited English proficient (LEP) based on information from the home language survey and the results of the WIDA Access Placement Test (WAPT) which assesses proficiency in speaking, reading, writing, and understanding in the English language.

A meeting has been scheduled to review these results and complete a Program Service Plan for \_\_\_\_\_.

If you cannot attend please call me at 836-1881.

Sincerely,

Amy McGuire  
Director of Special Education



# Russell Independent Schools

908 Powell Lane

Flatwoods, Kentucky 41139 (606)  
836-9679

**M. SEAN HORNE**

Superintendent

## Parent Notification

Dear Parents/Guardian:

I would like to take this opportunity to inform you that your son/daughter \_\_\_\_\_ has been exited from the English Learners Program at Russell Independent Schools. Students exited from the program have met the criterion set forth by the Kentucky Department of Education. The criterion used to determine the students to be exited is as follows:

- Student attained a score of 4.5 or higher Overall Composite Proficiency Level of ACCESS 2.0

As a district, we will continue to monitor your child's academic progress in the following years to ensure success.

I appreciate all your support while your child participated in the EL program. If you have any questions or concerns, please call me 836-1881.

Thank you,

Amy McGuire  
Director of Special Education

**Russell Independent Schools  
Monitoring English Language Learners**

Student Name \_\_\_\_\_ Grade \_\_\_\_\_  
 School \_\_\_\_\_ School Year \_\_\_\_\_  
 Exit Date for direct ESL Services \_\_\_\_\_ Number years in LEP program \_\_\_\_\_  
 Monitoring Year: Year One \_\_\_\_\_ Year Two \_\_\_\_\_ Year Three \_\_\_\_\_ Year Four \_\_\_\_\_

<b>ASSESSMENT DATA</b>					
(Enter any assessments used and the corresponding data)					
KAS		ACT		OTHER:	
KAS-EOC		NAEP		OTHER:	
OTHER:		OTHER:		OTHER:	
<b>ACCESS 2.0 DATA</b>					
(enter the corresponding Proficiency Levels)					
Listening		Reading		Literacy	
Speaking		Writing		Overall	

First Quarter Grades		Second Quarter Grades	
<u>GRADES:</u>	<u>ACTION TAKEN:</u>	<u>GRADES:</u>	<u>ACTION TAKEN:</u>
Third Quarter Grades		Fourth Quarter Grades	
<u>GRADES:</u>	<u>ACTION TAKEN:</u>	<u>GRADES:</u>	<u>ACTION TAKEN:</u>

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**Observations**

<u>DATES:</u>	<u>BY</u> <u>WHOM:</u>	<u>OBSERVATION INFORMATION:</u>

**Meetings/Conferences (Attach minutes)**

<u>DATES:</u>	<u>ATTENDEES:</u>
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**NOTES:**

**Please attach any additional documents or pertinent information.**

Please respond in  
English

ENGLISH  
Home Language Survey

HOME LANGUAGE SURVEY

Date: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_

Student's Name: \_\_\_\_\_

Parent or Guardian's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ (home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell)

1. Is the student's first learned or home language anything other than English?  Yes  No

If yes, please respond to the following questions:

2. What is the student's country of origin? \_\_\_\_\_

3. Which language did your son/daughter learn when he/she began to talk? \_\_\_\_\_

4. What language does your son/daughter most frequently use at home? \_\_\_\_\_

5. What language do you most frequently speak to your son/daughter? \_\_\_\_\_

6. What is the language most frequently spoken at home? \_\_\_\_\_

7. Please describe the language understood by your child (check only one).

- A.  Understands only the home language and no English.
- B.  Understands only the home language and no English.
- C.  Understands the home language and English equally.
- D.  Understands mostly English and some of the home language.
- E.  Understands only English.

8. If available, in what language would you prefer to receive communication from the school? \_\_\_\_\_

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date