Minnesota READ Act Literacy Plan

2025-26 Data Submission and 2026-27 Continuous Improvement Plan

For

Yellow Medicine East (2190-01)

Date Submitted to the State 06/12/2026

This is the Local Literacy Plan submitted to the Minnesota Department of Education (MDE) by Yellow Medicine East (2190-01). This plan is a requirement of the Minnesota READ Act, Minn. Stat. 120B.12 (2024). The Local Literacy Plan must be updated annually and submitted to MDE by June 15th. The plan must also be posted to the district or charter school's official website.

Minnesota READ Act Goal

The goal of the READ Act is to have every Minnesota child reading at or above grade level every year, beginning in kindergarten, and to support multilingual learners and students receiving special education services in achieving their individualized reading goals in order to meet grade level proficiency.Minn. Stat. 120B.12 (2024).

Table of Contents

1. Read Act Goals
2. Screening Tools K-3
3. Screening Tools 4-12
4. Screening Summary Student Counts Grades K-3
5. Dyslexia Screening Summary Student Counts Grades K-3
6. Screening Summary Student Counts Grades 4-12
7. Data-Based Decision Making for Action
8. Parent Notification and Involvement
9. Tier 1 (Core) Curricular Resources
10. Literacy Intervention Resources
11. Literacy Aid Funds
12. Professional Development Plan
13. Professional Development Educator Count
14. Multi-tiered System of Supports (MTSS)
15. Dual Language Immersion Programs

1. Read Act Goals

District or Charter School Literacy Goals

Yellow Medicine East (2190-01)'s literacy goal(s) for the 2025-26 school year:
75% of identified (as noted on our local Capti Screener Training document) Yellow Medicine East educators will receive Capti training during the school year 2025-2026.

The following was implemented or changed to make progress towards the goal(s):
The school district purchased and implemented the Capti Literacy Screener for students in grades 4-12 to support literacy assessment, identify student learning needs, and inform instructional decision-making. Seventeen identified staff members participated in professional learning opportunities throughout the 2025-2026 school year to strengthen literacy instruction and support the implementation of evidence-based reading practices. YME's District Literacy Lead provided ongoing support, coaching, resources, and training materials to educators throughout the 2025-2026 school year to enhance literacy instruction and support implementation efforts aligned with the Minnesota Read Act. Additionally, YME's District Literacy Lead participated in professional development and received ongoing guidance and support from the regional service cooperative and the Collaborative Minnesota Partnerships to Advance Student Success (COMPASS). These opportunities strengthened district literacy leadership capacity and helped ensure alignment with Minnesota Read Act requirements and best practices in literacy instruction.

The following describes how Yellow Medicine East (2190-01)'s current student performance differs from the literacy goal detailed in the READ Act:
Universal screening data for students in grades 4-5 indicate that a majority are performing below expectations in critical foundational literacy skills, including vocabulary, reading efficiency, and decoding. Targeted screening data for students in grades 6-12 who are reading below grade level reveal: High rates of foundational reading skill deficits among students in grades 6-8. A gradual decline in the percentage of students demonstrating these deficits in the upper grades; however, a notable subgroup continues to exhibit significant literacy needs. A substantial proportion of students, particularly in grades 6-8, display characteristics associated with dyslexia. In response to these identified needs, the district purchased and implemented the Capti Read Basix Literacy Screener for students in grades 4-12 to support literacy assessment, identify student learning needs, and inform instructional decision-making. Additionally, 17 identified staff members participated in professional learning opportunities throughout the 2025-2026 school year to strengthen literacy instruction and support the implementation of evidence-based reading practices.

Yellow Medicine East (2190-01)'s literacy goal(s) for the 2026-27 school year:
Grades: K-3 The percentage of all students in grades K-3 who perform at or above the "Low Risk" range on the FastBridge Reading Screening (early Reading and aReading) assessments will increase from 44% in the spring of 2026 to 50% in the spring of 2027. (Group Screening Report - early Reading (grades K&1); aReading (grades 2 & 3) Grades 4-5 Students in grades 4 and 5, with a scaled score of strong and high average performance (blue and green) in the area of word recognition and decoding will improve from 27% in May 2026 to 40% in May 2027. (ReadBasix Overview: Group Report (Tier 1) Grades 6-12 The percentage of all students in grades 6-12 who were administered the Capti Read Basix due to grade level performance in reading will decrease from 60% in Fall 2026 to 50% in Fall 2027. (School generated form)

The Local Literacy Lead, Sheri Schneider, for Yellow Medicine East (2190-01) has an FTE of .40

The Local Literacy Lead engages with the District and School Leadership Teams in the following manner:
The District Literacy Lead has actively engaged with local, regional, and state literacy leaders throughout the 2025-2026 school year by participating in the Minnesota Department of Education (MDE)/Compass District Literacy Lead Community of Practice sessions, Local Certified Facilitator Community of Practice sessions, Capti ReadBasix professional development sessions, the Southwest West Central Service Cooperative (SWWC) Regional Literacy Symposium, and through membership in the The Reading League Minnesota. In addition to collaborating with literacy leaders across the state, the District Literacy Lead has supported district educators by providing a variety of professional learning opportunities throughout the school year and by developing and distributing classroom resources and instructional handouts. The District Literacy Lead has also shared district literacy initiatives and Minnesota Read Act updates with the YME School Board during regularly scheduled public meetings, helping to keep stakeholders informed of district progress and implementation efforts. As a certified LETRS facilitator, the District Literacy Lead has provided LETRS training for Phase I educators within the district. She has also delivered eight hours of Science of Reading professional development to district paraprofessionals, expanding literacy knowledge and instructional capacity across multiple staff groups. Additionally, the District Literacy Lead serves on several district leadership and advisory teams, including the PLC Q-Comp Council, MTSS Team, School Leadership Team, District Curriculum Advisory Council, and ELA School Committee, contributing to ongoing district improvement efforts and supporting literacy-focused decision-making.

The Local Literacy Lead has an active state license from the allowable licenses list on MDE's Website:

MDE Read Act Literacy Lead License List

Yes

Yes - The District Literacy Lead has completed an MDE approved READ Act Professional Development Program from the list below:

- CAREIALL (Advancing Language and Literacy - Center for Applied Research and Educational Improvement)
- OL&LA (Online Language and Literacy Academy)
- LETRS (Language Essentials for Teachers of Reading and Spelling)
- CAREIAll Secondary
- Neuhaus Structured Literacy Modules
- OL&LA Secondary
- STRIVE Science of Reading Grades 4-12

Yellow Medicine East (2190-01) Local Literacy Plan is posted on the district website at https://www.isd2190.org/district-information/publications-forms

2. Screening Tools K-3

The Minnesota READ Act requires that all students in grades K-3 are universally screened for mastery of foundational reading skills and characteristics of dyslexia in Fall, Winter and Spring using an MDE approved screening tool.

Yellow Medicine East (2190-01) has administered an MDE approved K-3 READ Act screening tool

Yes

The table below details the screening tool used by Yellow Medicine East (2190-01) and the criteria used to determine if students are reading at benchmark. It also includes any additional screening tools utilized.

Screening Tools Used for Grades K-3:

Screening Tool	Grades Implemented	Criteria Used to Determine Benchmark	Additional Screeners
FastBridge: earlyReading (Grades K-1) and CBMReading (Grades 1-3)	Kindergarten	Vendor Composites using vendor benchmarks	Star Early Literacy, Star Reading
	Grade 1	Vendor Composites using vendor benchmarks	Star Early Literacy, Star Reading
	Grade 2	Vendor Composites using vendor benchmarks	Star Early Literacy, Star Reading
	Grade 3	Vendor Composites using vendor benchmarks	Star Early Literacy, Star Reading

The district or charter school conducted oral language screening in the 2025-26 school year?

Yes

3. Screening Tools 4-12

The Minnesota READ Act requires that all students in grades 4-12 who are not reading at grade level be screened for characteristics of dyslexia using an MDE approved screening tool.

The district or charter school administered the MDE approved grades 4-12 READ Act screening tool Capti ReadBasix in the 2025-26 school year.

Yes

Students in grades 4-12 not reading at grade level were identified through the following process:

Two-step screening process: Step 1, A district determined tool was used to identified students not reading at grade level. Step 2, Capti ReadBasix was administered to identified students.

The table below details the screening tool(s) used by Yellow Medicine East (2190-01) to screen for characteristics of dyslexia and the criteria used to determine if students are demonstrating characteristics of dyslexia.

Screening Tool	Grades Implemented	Timing of Administration	Criteria/ Benchmark Used + Other Criteria Used Explain
Capti ReadBasix	Grade 4	2 time per year	N/A CaptiReadBasix used as Step 1 & 2
	Grade 8	1 time per year	N/A CaptiReadBasix used as Step 1 & 2
	Grade 5	2 time per year	N/A CaptiReadBasix used as Step 1 & 2
	Grade 9	1 time per year	N/A CaptiReadBasix used as Step 1 & 2
	Grade 10	1 time per year	N/A CaptiReadBasix used as Step 1 & 2
	Grade 6	1 time per year	N/A CaptiReadBasix used as Step 1 & 2
	Grade 11	1 time per year	N/A CaptiReadBasix used as Step 1 & 2
	Grade 12	1 time per year	N/A CaptiReadBasix used as Step 1 & 2
	Grade 7	1 time per year	N/A CaptiReadBasix used as Step 1 & 2

For the 2025-26 school year, MDE required the following Capti ReadBasix subtests be administered to students in grades 4-12 who were not reading at grade level:

- Word Recognition and Decoding
- Vocabulary
- Morphology
- Reading Efficiency

The following subtests were recommended in the 2025-26 school year and will be required in 2026-27:

- Sentence Processing
- Reading Comprehension

Yellow Medicine East (2190-01) administers the following Capti ReadBasix subtests for the 2025-26 school year:

Other - Grades 4-5 all subtests were administered. Grades 6-12 four required subtests.

Capti ReadBasix was used for progress monitoring:

No

Continuous Improvement for Screening Tools Used in Grades 4-12

Yellow Medicine East (2190-01) will make the following changes to screening tools or criteria in grades 4-12 in the 2026-27 school year:

Students who did not receive benchmark scores indicating proficiency for word recognition and decoding and reading efficiency in the Spring of 2026 will be required to take Capti ReadBasix in the Fall. Students who are not reading at grade level in the Fall of 2026, according to the results of the Fall screening, will be assessed a second time.

4. Screening Summary Student Counts Grade K-3

Universal screening for foundational reading skills for Yellow Medicine East (2190-01) resulted in the following number of students screened and scoring at or above benchmark at each screening time point:

Grade	Number of Students Universally Screened: Fall	Number of Students at or Above Benchmark: Fall	Number of Students Universally Screened: Winter	Number of Students at or Above Benchmark: Winter	Number of Students Universally Screened: Spring	Number of Students at or Above Benchmark: Spring
Kindergarten	41	11	41	11	40	10
1st	44	6	40	7	40	13
2nd	46	14	45	14	46	16
3rd	41	12	41	20	40	19

NOTE: As a standard practice when reporting public data, the Minnesota Department of Education will not report results if fewer than 10 students participated. CTSTR = Counts too small to report

5. Dyslexia Screening Summary Student Counts K-3

The following section describes how Yellow Medicine East (2190-01) engaged in screening for characteristics of dyslexia, and the number of students demonstrating characteristics of dyslexia. NOTE: demonstrating characteristics of dyslexia is not the same as a diagnosis of dyslexia.

Yellow Medicine East (2190-01) uses the following criteria to identify students demonstrating characteristics of dyslexia:

MDE Composites

Dyslexia Screening Summary Student Counts K-3

Grade	Number of Students Screened for Dyslexia	Number of Students Demonstrating Characteristics of Dyslexia
Kindergarten	40	10
1st	40	12
2nd	45	19
3rd	40	9

NOTE: As a standard practice when reporting public data, the Minnesota Department of Education will not report results if fewer than 10 students participated. CTSTR = Counts too small to report

Yellow Medicine East (2190-01) used the following process to administer the Nonsense Words subtest to measure decoding skills in grades 2 and 3:

Integrated: All students in Grades 2 and 3 were administered the Nonsense Word subtest

Continuous Improvement for Dyslexia Screening Summary Student Counts in Grade K-3

Yellow Medicine East (2190-01) will make the following changes to dyslexia screening in grades K-3 in the 2026-27 school year.

Students in grade 3 will only be administered the Nonsense Word subtest if they didn't make the benchmark in the Spring of grade 2.

6. Dyslexia Screening Summary Student Counts Grades 4-12

The following table displays the number of students in Yellow Medicine East (2190-01) who were identified as not reading at grade level, were screened for characteristics of dyslexia, and are demonstrating characteristics of dyslexia. NOTE: demonstrating characteristics of dyslexia is not the same as a diagnosis of dyslexia.

Grade	Total Number of Students in Grade Level	Number of Students Administered District Step 1 Tool (If no Step 1 tool used then enter zeros (0) in this column)	Number of Students Administered Capti ReadBasix	Number of Students Demonstrating Reading Difficulties (Reporting Optional in 2026)	Number of Students Demonstrating Characteristics of Dyslexia	Number of Students Identified as Not Reading at Grade Level Who Were Opted Out of Screening
4th	36	36	36	30	14	0
5th	45	45	45	42	14	0
6th	38	38	14	14	14	0
7th	34	34	13	13	13	0
8th	44	44	21	21	19	0
9th	37	37	19	19	15	0
10th	58	58	21	10	10	0
11th	34	34	13	13	11	0
12th	29	29	17	17	6	2

NOTE: As a standard practice when reporting public data, the Minnesota Department of Education will not report results if fewer than 10 students participated. CTSTR = Counts too small to report

7. Data-Based Decision Making for Action

READ Act screening data should be the basis for data-based decision making to determine which students need more support in reading. This could include differentiation of core (Tier 1) instruction, supplemental (Tier 2) or intensive (Tier 3) instruction.

Yellow Medicine East (2190-01) uses the following process and data to assure that evidence-based instruction and intervention matches to a student's needs:

Evidence-based instruction and intervention are matched to student needs through a data-driven problem-solving process. Universal screening, diagnostic assessments, classroom performance data, progress-monitoring measures, attendance, behavior records, and teacher observations are analyzed to identify specific areas of need. Educators select research-based instructional practices and interventions aligned to identified skill deficits and monitor student progress regularly. Data teams review outcomes to determine the effectiveness of interventions and make adjustments as needed to ensure students receive appropriate levels of support and demonstrate continuous growth.

The processes for monitoring fidelity and differentiating Tier 1 instruction include:

Grades K-5: To ensure all students receive high-quality core instruction, Tier 1 reading instruction will be implemented with fidelity using district-approved curriculum, instructional practices, and assessment procedures. Fidelity will be monitored through classroom observations, instructional walkthroughs, lesson plan reviews, and ongoing collaboration between teachers, interventionists, and administrators. Feedback will be provided to support consistent implementation of instructional practices and adherence to the core reading program. Tier 1 instruction will be differentiated to meet the diverse learning needs of students. Teachers will use screening data, classroom assessments, progress-monitoring results, and observational data to inform instructional decisions. Differentiation may include flexible grouping, targeted small-group instruction, scaffolded support, varied instructional strategies, adjusted pacing, and the use of evidence-based interventions within the core instructional block. Student progress will be regularly reviewed through universal screening, classroom assessments, and ongoing formative assessments. Grade-level teams will meet to analyze student data, identify areas of need, and make instructional adjustments to ensure students receive appropriate support within Tier 1 before consideration for additional intervention services. Grades 6-12: To ensure all students receive high-quality core instruction, Tier 1 reading instruction will be implemented with fidelity using district-approved curriculum, instructional practices, and assessment procedures. Fidelity will be monitored through classroom observations, instructional walkthroughs, lesson plan reviews, and ongoing collaboration between teachers, specialists, and administrators. Feedback will be provided to support consistent implementation of instructional practices, use of district literacy screeners, and use of the district's core reading program with fidelity.

Student progress will be regularly reviewed through universal screening, classroom assessments, and ongoing formative assessments. Departments will meet to analyze student data, identify areas of need, and make instructional adjustments to ensure students receive appropriate support within Tier 1 before consideration for additional intervention services.

Criteria for entrance into supplemental (Tier 2) and/or intensive (Tier 3) targeted reading intervention include:
Upon completion of the screening process, the Title I team and classroom teachers will review student data to identify students who are not making adequate progress with Tier 1 core reading instruction. Students scoring below established benchmark levels and/or below the 25th percentile on screening measures will be considered for Tier 2 intervention, as these students may be at increased risk in the areas of decoding, fluency, comprehension, and reading accuracy. Additional factors that may be considered include attendance, behavior, and previous progress-monitoring data. When reviewing Minnesota Composite Scores, students demonstrating the greatest level of need will be prioritized for placement in Tier 2 targeted reading intervention services. Students may be considered for Tier 3 intensive reading intervention when progress-monitoring data indicate an insufficient response to Tier 2 interventions despite consistent participation and implementation with fidelity. The Title I team, classroom teacher, and other relevant staff will review multiple sources of data, including screening results, progress-monitoring data, classroom performance, diagnostic assessments, attendance, and behavior records. Students demonstrating significant and persistent reading deficits in areas such as decoding, fluency, comprehension, or reading accuracy, and whose rate of improvement remains substantially below expected growth after receiving Tier 2 support, may qualify for Tier 3 intervention. Placement decisions will be based on the severity of need and documented evidence that additional intensity, frequency, or individualized instruction is required for the student to make adequate progress toward grade-level expectations.
Progress monitoring data collection for students in Tier 2 occurs:
Once every two weeks
Progress monitoring data collection for students in Tier 3 occurs:
Once a week
The kindergarten - 12th grade progress monitoring protocol that has been established to determine any necessary intensifications or modifications of supplemental (Tier 2) and/or intensive (Tier 3) targeted reading instruction include:
Students receiving Tier 2 and Tier 3 targeted reading interventions will be monitored regularly using reliable, research-based progress-monitoring assessments aligned to the area of reading need. Progress-monitoring data will be collected at least biweekly for students receiving Tier 2 interventions and weekly for students receiving Tier 3 interventions. The interventionist and classroom teacher will review student progress data to determine whether the student is responding adequately to the intervention. Data reviewed may include curriculum-based measures, diagnostic assessments, classroom performance, and observational information. At designated data-review meetings, the intervention team will compare the student's rate of improvement and level of performance to established goals and benchmark expectations. Decisions regarding intervention changes will be based on multiple data points rather than a single assessment result. Interventions may be intensified or modified when data indicate that a student is not making sufficient progress toward established goals. Intensification may include increasing instructional time, reducing group size, increasing intervention frequency, providing more explicit instruction, or implementing a more individualized intervention approach. If a student demonstrates consistent progress and meets established goals, the intervention team may consider reducing the intensity of support or transitioning the student to a less intensive level of

intervention while continuing to monitor progress. All intervention decisions, progress-monitoring data, and instructional changes will be documented and communicated with relevant staff and families as appropriate.

Criteria for exit from supplemental (Tier 2) and/or intensive (Tier3) targeted reading intervention include:

A student may be considered for exit from Tier 2 intervention when multiple sources of data indicate that the student is able to successfully access grade-level reading instruction with Tier 1 supports alone. Criteria for exit include demonstrating performance at or above the established benchmark or grade-level expectation on universal screening assessments, maintaining progress at or above the expected rate of improvement for a minimum of 6-8 consecutive weeks, and showing successful performance within the core reading program without significant additional support. Classroom assessment data, teacher observations, and student work samples should also indicate sustained proficiency in the targeted reading skill areas. A student may be considered for exit from Tier 3 intervention when data demonstrate substantial progress toward closing identified reading skill gaps and the student has met established intervention goals. The student should be performing near or within grade-level expectations on multiple measures and show a consistent positive response to intervention, as evidenced by progress-monitoring data meeting or exceeding the expected growth rate for at least 6-8 consecutive weeks. In addition, diagnostic assessments, classroom performance, and progress-monitoring data should support a reduction in intervention intensity. Final decisions regarding exit from Tier 3 intervention will be made by the MTSS team based on a comprehensive review of student data and evidence that intensive supplemental intervention is no longer necessary. Students who exit Tier 2 or Tier 3 interventions will continue to receive high-quality Tier 1 core reading instruction and will be monitored through universal screening assessments, classroom performance data, and teacher observations. The MTSS team will continue to review student progress to ensure that gains are maintained and that the student continues to make adequate progress toward grade-level expectations. If subsequent data indicate that a student is not maintaining expected growth or is experiencing difficulty meeting grade-level standards, the MTSS team may reconvene to review the student's needs and consider additional supports, intervention adjustments, or re-entry into targeted intervention services.

8. Parent Notification and Involvement

The READ Act legislation requires districts to notify the parents of each student in grade K-3 who are not reading at or above grade level.

Does Yellow Medicine East (2190-01) notify parents or guardians when children are identified as not reading at grade level?

Yes

The table below indicates the frequency and method of parent notification for each grade level.

Parent Notification Frequency by Grade

Grade	Frequency of Notification	Method of Notification
Kindergarten	3 times per year	Other - mail or parent-teacher conferences
Grade 1	3 times per year	Other - mail or parent-teacher conferences
Grade 2	3 times per year	Other - mail or parent-teacher conferences
Grade 3	3 times per year	Other - mail or parent-teacher conferences
Grade 4	3 times per year	Other - mail or parent-teacher conferences
Grade 5	3 times per year	Other - mail or parent-teacher conferences
Grade 6	2 times per year	Other - parent-teacher conferences, mail
Grade 7	2 times per year	Other - parent-teacher conferences, mail
Grade 8	2 times per year	Other - parent-teacher conferences, mail
Grade 9	2 times per year	Other - parent-teacher conferences, mail
Grade 10	2 times per year	Other - parent-teacher conferences, mail
Grade 11	2 times per year	Other - parent-teacher conferences, mail
Grade 12	2 times per year	Other - parent-teacher conferences, mail

READ Act requires the following information be included in parent notifications:

- Student's reading proficiency level as measured by the MDE approved screener
- Reading related services currently being provided to the student
- Strategies parents/families can use at home in helping their student succeed

Parent Notifications from the district or charter includes all required information?

Yes

Families or the community are engaged around literacy through the following:

- More than one of the above

9. Tier 1 (Core) Curricular Resources

The Minnesota READ Act requires districts to use evidence-based curriculum materials that are designed to ensure students mastery of literacy skills at each grade level. In 2024 MDE partnered with the University of Minnesota Center for Applied Research and Educational Improvement (CAREI) to identify literacy curricula that are evidence-based and aligned to structured literacy. The findings of this review can be found on the MDE READ Act Curricula Resources-Tier I webpage.

Tier 1 (Core) Litearcy Instruction and Curricula

The following table displays the Tier 1 (Core) Literacy Instruction and Curricula Resources utilized by Yellow Medicine East (2190-01), how the recourse is used and the minutes of instructional delivery per day in grades K-5.

Implemented Curricula	Curricula Type	Grades Implimented	Instructional Delivery Minutes Per Day
Amplify Core Knowledge Language Arts (CKLA), K-5, 2022 (Partially Aligned)	Comprehensive	Kindergarten	90
	Comprehensive	Grade 1	90
	Comprehensive	Grade 2	60
	Comprehensive	Grade 3	60
	Comprehensive	Grade 4	60
	Comprehensive	Grade 5	60
Functional Phonics+Morphology, K-5, 2023 (Hig hly Aligned)	Foundational	Grade 1	30
	Foundational	Grade 2	30
	Foundational	Grade 3	30
	Foundational	Grade 4	30
	Foundational	Grade 5	30

The district used or will use the following process to select an evidence-based Tier 1 (Core) curricular resource:
The district selected its Tier 1 curricular resource through a collaborative and data-driven review process. A representative committee analyzed student achievement data, identified instructional needs, established evaluation criteria, and reviewed multiple evidence-based programs for alignment with state standards and research-based instructional practices. Selected resources were evaluated using established review protocols, pilot implementation data, and stakeholder feedback. The final selection was based on demonstrated effectiveness, support for diverse learners, assessment features, and implementation feasibility. Following adoption, the district established professional learning, coaching, and fidelity-monitoring processes to support successful implementation and continuous improvement.

The selection and implementation timeline (e.g., selection, training, fidelity checks, standards alignment) include:
The district implemented the Tier 1 curricular resource through a phased process beginning with a comprehensive needs assessment and curriculum review. During Year 1, a representative committee evaluated evidence-based programs, selected a resource aligned to state standards, and completed standards crosswalks and pacing documents. Prior to implementation, educators participated in extensive professional learning. Beginning in Year 2, the district implemented the curriculum with ongoing coaching, fidelity monitoring, and data reviews. Student achievement data, implementation evidence, and stakeholder feedback continue to be analyzed annually to ensure effective implementation and continuous improvement. Midyear, it was obvious that the Tier 1 curricular program was weak in the foundational phonics skills. At this time, the district invested in a program called Functional Phonics and Morphology is meet the phonics needs of the students.

Continuous Improvement for Tier 1 (Core) Literacy Instruction and Curricula Resources

Yellow Medicine East (2190-01) will make the following changes to Tier 1 (Core) curricular resources for the 2026-27 school year:
Kindergarten will implement Functional Phonics and Morphology in the 2026-2027 school year.

10. Literacy Interventions Resources

The Minnesota READ Act requires districts to use evidence-based intervention materials that are designed to support literacy instruction at each grade K-12. In 2025 MDE partnered with the University of Minnesota Center for Applied Research and Educational Improvement (CAREI) to identify literacy interventions that are evidence-based and aligned to structured literacy. The findings of this review can be found on the MDE Intervention Program Review webpage.

Literacy Intervention Resources Grades K-12

The following table displays the reading intervention resources utilized by Yellow Medicine East (2190-01) in all grades K-12. NOTE: Tier 2 and Tier 3 intervention resources do not have to be different.

Tier 2 & 3 Resources	Resource Used for	Grades Implemented	instructional Delivery Minutes
Path to Reading Excellence in School Sites (PRESS)	Tier 2 & 3	Kindergarten	20
	Tier 2 & 3	Grade 1	20
	Tier 2 & 3	Grade 2	20
	Tier 2 & 3	Grade 3	20
	Tier 2 & 3	Grade 4	20
UFLI	Tier 2 & 3	Kindergarten	20
	Tier 2 & 3	Grade 1	20
	Tier 2 & 3	Grade 2	20
	Tier 2 & 3	Grade 3	20
	Tier 2 & 3	Grade 4	20
Other Resources - Advanced Word Study	Tier 2 & 3	Grade 5	30
Other Resources - Decodable Readers	Tier 2 & 3	Grade 1	20
	Tier 2 & 3	Grade 2	20
Other Resources - Word Connections	Tier 2	Grade 5	30

Continuous Improvement for Litearcy Intervention Resources

Yellow Medicine East (2190-01) will make the following changes to literacy intervention resources for the 2026-27 school year:

UFLI and PRESS are two interventions that were marked as "strong" on the list of interventions by MDE. Our district has chosen to use these two interventions for grades K-5 for the 2026-2027 school year.

11. Literacy Aid Funds

Literacy Aid Funds

The following are details about annual Literacy Aid Funds.

Yellow Medicine East (2190-01) received the following amount of Literacy Aid Funds in the 2025-26 school year:

$23,676

Amount of Literacy Aid Funds spent in the 2025-26 school year:

$21,446

READ Act Literacy Aid

The following are details about the one-time READ Act Literacy Aid appropriations.

Yellow Medicine East (2190-01) received the following amount of READ Act Literacy Aid in the 2024 school year:

$0

At the completion of this Local Literacy Plan, the READ Act Literacy Aid reserve account had remaining balance of

$20,009

The plan to spend down the remaining funds are as follows:

We will use the remaining funds for literacy materials, screeners, intervention materials and teacher stipends for training.

Literacy Aid Fund Usage

The following table displays how literacy funds were used in the 2025-26 school year.

Use of Literacy Funds	Type of Funds Used
Contracting or employing a District Literacy Lead	Both
Stipends for teachers completing literacy professional development	Read Act Literacy Aid
Evidence-based Tier 1 (Core) curriculum resources (curriculum, materials, training)	Literacy Aid Funds
Approved literacy screeners (this can include materials, training and coaching)	Literacy Aid Funds

12: Professional Development Plan

The Minnesota READ Act requires that districts provide teachers and instructional support staff with responsibility for teaching reading with training on evidence-based reading instruction as approved by MDE. The following section details the district or charter school's professional development plan.

Yellow Medicine East (2190-01) is using the following approved Phase 1 professional development program(s):

- Core OL and LA
- LETRS

Date of expected completion for Phase 1 Professional Development:

09/05/2028

Synchronous professional development sessions were facilitated by:

Local Certified Facilitator

Yellow Medicine East (2190-01) is using the following approved Phase 2 professional development program(s):

- CORE OLLA Secondary

Date of expected completion of Phase 2 Professional Development:

03/01/2027

Synchronous professional development sessions were facilitated by:

Vendor Provided Facilitator

The following support is provided to teachers who do not complete the approved training at the vendor recommended 80% proficiency level:

The District Literacy Lead will help support the teachers who do not complete the approved training at the vendor proficiency level of 80%. Currently, the district does not have any teachers who have not achieved the 80% proficiency level.

The following fidelity data is collected to ensure that elementary teachers are able to implement explicit, systematic, evidence-based instruction in the five areas of phonemic awareness, phonics, fluency, vocabulary, and comprehension:

To ensure fidelity data is being collected, the district utilizes a Danielson rubric for observations, teachers participate in 28 hours of PLCs, teachers complete peer observations, collaboratively lesson plan at grade levels, and participate in district-wide staff development throughout the school year. In addition, as part of our continuous improvement, the elementary school is currently receiving support from the SWWC Regional Literacy Lead and a COMPASS Continuous Improvement Coach, who are overseeing data meetings, review of formative assessment data, and numerous walk-through observations. The district also employs a 0.4 FTE Literacy Lead, who assists the district with supporting data collections, analysis, and action planning to ensure the five areas of phonemic awareness, phonics, fluency, vocabulary, and comprehension are occurring with fidelity.

Based on the results of the fidelity data, the following coaching support and feedback is implemented to ensure that all elementary teachers are able to implement explicit, systematic, evidence-based instruction in the following five areas of instruction: phonemic awareness, phonics, fluency, vocabulary, and comprehension:

The SWWC Regional Literacy Lead, COMPASS Continuous Improvement Coach, local Literacy Lead, and administrative team are assisting with coaching and feedback to ensure the evidence-based instruction in literacy is occurring with fidelity throughout the district.

The following changes in instructional practices have impacted students:

The district purchased a new K-5 ELA curriculum that was fully implemented during the 2024-25 school year. This has supported our mission to build foundational literacy skills, develop reading comprehension, strengthen writing skills, and provide materials to support our Science of Reading training implementation. In addition, the elementary is implementing an evidence based phonics program K-5, for the 26-27 school year.

Yellow Medicine East (2190-01) has implemented the following professional development and support for teachers around culturally responsive literacy practices:

The district has implemented professional development around culturally responsive practices by implementing PBIS programming in grades K-12. The elementary school is a PBIS school, with staff members having undergone years of ongoing professional development training to support PBIS. The middle school and high school were recently accepted into a PBIS program and completed one year of a two-year program during the 2025-26 school year. PBIS programming aligns with diverse needs, supports reduced exclusionary discipline, and promotes equitable discipline. The district provided training for all PreK-12 staff members to assist with understanding equity, belonging, bias, and to identify and discuss organizational cultural norms. The district employs cultural liaisons in both buildings, who assist with bridging cultural and communication gaps between schools and families from diverse backgrounds.

Yellow Medicine East (2190-01) engaged with the Regional Literacy Network through the following:

- Attended District Literacy Lead Community of Practice
- Attended Local Certified Facilitator Community of Practice
- Requested district consultation, coaching, and/or support

The following additional literacy focused professional development opportunities will be provided and may include alignment to the strands of the ELA Standards (reading, writing, and exchanging ideas):

During the 2026-27 school year, the SWWC and COMPASS staff will provide elementary teachers with support in the implementation of Functional Phonics + Morphology in K-5 classrooms, including but not limited to using the critical attributes documents, setting goals, reviewing formative assessment data, and determining instructional strategies to fit the needs of our students. In addition, the district will be providing walkthrough cycles three times during the upcoming school year and will provide continued data meetings to review, analyze, and plan instruction based on our local literacy screeners, FastBridge and Capti.

Continuous Improvement for Professional Development Plan

Yellow Medicine East (2190-01) will make the following changes to the professional development plan for the 2026-27 school year:

The district will continue to make changes to the professional development plan based on the needs of the district.

13. Professional Development Educator Count

The following tables provide the number of educators in the district or charter school who have met the READ Act professional development requirements, the number who are currently in training and the number who still need training. This training is occurring in phases, the details for which can be found on the MDE READ Act Professional Development webpage.

Educator Count Phase 1

Phase 1: Educator Role	Total Number in District or Charter Organization	Educators who have completed Training	Educators with Training in Progress	Educators who need Training
Fourth and fifth grade teachers (Sixth grade depending on the structure of your elementary school)	4	2	0	2
Instructional support staff, contractors, and volunteers who assist in providing reading interventions under the oversight and monitoring of a trained licensed teacher	40	37	0	3
Pre-K Classroom teachers Pre-K classroom teachers include Voluntary Prekindergarten/School Readiness Plus, Early Childhood Special Education (Part B/619) responsible for early literacy/reading instruction and School Readiness	4	2	0	2
K-3 Classroom teachers	9	8	1	1
K-12 Teachers holding English as a second language licenses	1	1	0	0
K-12 Reading Intervention Teachers	3	2	0	0
K-12 Special Education educators responsible for foundational reading instruction	9	4	0	0
Pre-K through grade five Curriculum Directors	0	0	0	0

Employees who select literacy instructional materials for grades pre-K through grade five	1	1	0	0

Educator Count Phase 2

Phase 2: Educator Role	Total Number in District or Charter Organization	Educators who have completed Training	Educators with Training in Progress	Educators who need Training
Teachers who provide foundational reading instruction to students in grades 4-12	8	3	4	1
Teachers who provide reading instruction to students in dual language immersion programs	0	0	0	0
Teachers who provide reading instruction to students in a state-approved alternative program	0	0	0	0
Employees who select literacy instructional materials for grades 6-12	7	1	0	0
Grades 6-12 Curriculum Directors	0	0	0	0
Grades 6-12 instructional support staff who provide reading support	11	11	0	0

Of the total number of required instructional support staff, contractors, and volunteers from the above charts, the number that have completed the Paraprofessional Structured Literacy Training (PSLT, 8-hours training).

37

The PSLT was provided by:

District PSLT Trainer

14. Multi-tiered System of Supports (MTSS)

Districts are strongly encouraged to adopt a Multi-tiered System of Supports (MTSS) framework. This framework should include a process for:

- monitoring student progress
- evaluating program fidelity, and
- analyzing student outcomes and needs

in order to design and implement ongoing evidence-based instruction and interventions. Minn. Stat.120B.12, subd. 4a (2025). MDE has developed the Minnesota Multi-Tiered System of Supports (MnMTSS) Framework and encourages districts to adopt this framework when implementing MTSS.

Yellow Medicine East (2190-01) is implementing a multi-tiered system of support framework:

Yes

The MnMTSS framework is being utilized:

Yes

Yellow Medicine East (2190-01) has participated in MDE MnMTSS professional learning:

Yes

15. Dual Language Immersion Programs

MDE defines Dual Language Immersion Programs (DLI) as follows: At the elementary level, students are taught for at least 50 percent of the day in a language other than English. At the secondary level, students take two or more classes in the non-English language.

Yellow Medicine East (2190-01) does not include a DLI Program