

# *Potsdam Central School District*

## *Description of*

### *Academic Intervention Services Grades K-12*

*Effective July 1, 2015 – June 30, 2018*

#### **Introduction**

As of July 1, 2000, each school district must have a written plan of the Academic Intervention Services to be offered in grades K-12. As of July 1, 2012, districts must have a written Response to Intervention Plan (RTI) for K-4 which can be in place of, or in addition to, the AIS plan. Academic Intervention Services means additional instruction and/or student support services which supplement the instruction provided in the general curriculum, and assist students in meeting the state learning standards. Academic Intervention Services are intended to assist students who are at risk of not achieving the state learning standards in English/Language Arts, Mathematics, Social Studies and/or Science; or who are at risk of not gaining the knowledge and skills needed to meet or exceed designated performance levels on state and/or local assessments. Academic Intervention Services shall be made available to students with disabilities on the same basis as non-disabled students, provided that such services shall be provided in a manner consistent with the student's individualized education program.

The Potsdam Central School District, located in St. Lawrence County, has a student enrollment of approximately 1400 students. The district believes that all students should be provided specific and appropriate opportunities for academic assistance and intervention so that they may be successful in meeting the New York State learning standards. Analysis of multiple assessments and sources of evidence will be used to identify students that are eligible for AIS. The following District Description of Academic Intervention Services (AIS) includes criteria for eligibility, and two (2) components of AIS:

- Additional instruction that supplements the general curriculum (regular classroom instruction); and/or
- Student support services needed to address barriers to improved academic performance.

K – 4	AIS is provided in ELA and Mathematics
5 –12	AIS is provided in ELA, Math, Social Studies, and Science

### **Eligibility for Academic Intervention Services**

- Students who fail to meet the designated state performance standards or district approved procedures are eligible for AIS, including those with disabilities and/or limited English proficiency.
- In grades where no state assessments are given, students will be eligible for AIS if they are determined to be at risk of meeting state standards, according to criteria established by the district. The district procedure will always be used when a student is absent for all or part of a state assessment, or when a student transfers in.

### **State Assessments**

- Students in grades 4 – 8 will be eligible for AIS if they score below the designated performance level on the elementary or intermediate state assessments in ELA, Mathematics, Science or Social Studies.
- Students in grades 9 – 12 will be eligible for AIS if they score below the approved passing grade on any Regents exam required for graduation in ELA, Mathematics, Science, or Social Studies. Students in 9<sup>th</sup> grade will be eligible if they score a 1 on the Grade 8 Assessments and will be evaluated for AIS services if they score a 2 on these assessments. A 9<sup>th</sup> grade student who fails in an 8<sup>th</sup> grade core curriculum course, yet promoted, may be provided services, depending on need. All students who are recommended by a teacher will also be eligible for AIS.
- Students who are identified as not proficient in the English Language and score below the approved level on the Language Assessment Battery – Revised (LAB-R), which is given at the time of the student’s enrollment in this district, will be eligible for ESL services. In May the student is given the NYSESLAT to determine proficiency level.

## Local Assessments

- Students in grades K - 4 will be governed by the Response to Intervention Plan. Additionally, Grade 4 students will be eligible for AIS if they score below the designated performance level on the grade 3 assessments in ELA or Math.

## Types of AIS Services That May Be Provided

The Potsdam School District will provide Academic Intervention Services in the areas of academic instruction and support services. Decisions related to the frequency and intensity of service will be made by the building administrator in consultation with members of the Student Study Team and/or counselors based upon individual student needs.

## Criteria for Identification and Services Available to Meet AIS Needs in Grades K-12:

Criteria (One or more must be met for identification)	Services (To be determined by individual student's needs)
<b>Student scores 1 or 2 on a New York State Assessment in ELA, Math, Science, or Social Studies. (Grades 4-9)</b>	<ul style="list-style-type: none"> <li>- Title I (English Language Arts and Math)</li> <li>- AIS English, Math, Social Studies, Science</li> </ul>
<b>Student fails to meet local assessment standards on Classroom ELA and Math Assessments. (Grades K-12)</b>	<ul style="list-style-type: none"> <li>- Title I (English Language Arts and Math)</li> <li>- AIS English, Math</li> <li>- Extended Day – ELA &amp; Math (as offered)</li> <li>- Summer School (K-12, as offered)</li> <li>- Community Literacy (as available)</li> </ul>

<p><b>Student fails Regents Exam, Local Final Exam or One of the Core Curriculum Subject</b></p>	<ul style="list-style-type: none"> <li>- AIS English, Math, Social Studies, Science</li> <li>- Summer School (K-12, as offered)</li> </ul>
<p><b>Student fails to meet district standards on quarterly reports.</b></p>	<ul style="list-style-type: none"> <li>- Title I (English Language Arts and Math)</li> <li>- AIS English, Math, Social Studies, Science</li> <li>- Opportunity Room or Student Learning Center (Middle/High School, as offered)</li> <li>- Summer School (K-12, as offered)</li> <li>- Community Agencies (As available)</li> <li>- Mentor Program (Elementary/Middle School-as offered)</li> </ul>
<p><b>Student is recommended by teacher(s) based on classroom performance, observations, etc., in addition to the progress data obtained by working with the student.</b></p>	<ul style="list-style-type: none"> <li>- Title I (English Language Arts and Math)</li> <li>- Opportunity Room or Student Learning Center (Middle/High School, as offered)</li> <li>- Summer School (Grades 1-4, as offered)</li> <li>- Community Agencies (As offered)</li> <li>- Mentor Program (As offered)</li> <li>- AIS Math, English, Social Studies, Science</li> </ul>
<p><b>Student's academic progress is negatively influenced by <u>Mobility</u>:</b> Student moves frequently and/or has been identified under the regulations regarding homeless students.</p>	<ul style="list-style-type: none"> <li>- Records from previous schools will be obtained, as soon as possible, to determine if the student qualified for support services or interventions.</li> <li>- Peer guides will be assigned to incoming students</li> </ul>

	<ul style="list-style-type: none"> <li>- Referral to the Migrant Tutorial Program</li> <li>- Referral to the Homeless Liaison</li> </ul>
<b>Student's academic progress is negatively influenced by <u>Family Concerns</u>:</b> Issues at home are affecting a student's school progress.	<ul style="list-style-type: none"> <li>- Referral to counseling services</li> </ul>
<b>Student's academic progress is negatively influenced by <u>Health and Nutrition</u>:</b> Concerns in this area are affecting a student's school progress.	<ul style="list-style-type: none"> <li>- Referral to the school nurse</li> <li>- Referral to counseling services</li> <li>- Utilize the free/reduced lunch program</li> </ul>
<b>Student's academic progress is negatively influenced by <u>Language</u></b>	<ul style="list-style-type: none"> <li>- ESL (as determined by NYSESLAT or LAB-R)</li> <li>- Title 1</li> </ul>
<b>Student's academic progress is negatively influenced by <u>Discipline</u>:</b> Student exhibits behaviors that interfere with academic progress.	<ul style="list-style-type: none"> <li>- Phone calls and/or written reports to parents</li> <li>- Conference with the principal</li> <li>- Counseling intervention</li> <li>- In-school alternative placement</li> </ul>
<b>Student's academic progress is negatively influenced by <u>Attendance</u>:</b> Student's absenteeism exceeds the acceptable limit set forth by the district.	<ul style="list-style-type: none"> <li>- Follow the school attendance policy</li> <li>- Counseling Intervention</li> </ul>

### **Procedures for Parent Involvement/Notification**

School staff will provide evidence of the necessity for academic intervention services and work with the parents to assure appropriate provision of these services.

Parents are welcomed to express their thoughts and concerns about any decisions in this regard. However, placement in educational programs during the regular school day remains the responsibility of the district and school. According to the State Education Department, a student is required to participate in appropriate academic programs including AIS.

The building principal shall be responsible for parental notification indicating the need for and discontinuance of Academic Intervention Services. This notification is to be made in writing and will include a summary of the services provided to the student, including when the services will be provided. The reason(s) for AIS will be reviewed and the consequences of not achieving the standards will be stated. Parents will also be kept apprised of their child's progress through report card comments, parent conferences or consultations each semester, and suggestions for working with the student at home. When AIS is discontinued, the parent will be notified in writing that the services will be ending, the criteria for ending services, the current performance level of the student, and /or the assessment(s) that were used in determining the student's level of performance.

### **Student Progress Reports**

Quarterly AIS reports will document progress of students, and will indicate when the student will be considered for discontinuance from AIS. Quarterly AIS progress reports will be sent to parents by the service provider(s). At the high school level, progress in AIS will be reported via report card comments. The progress report will describe:

- The nature of the service provided
- Identification of student's progress

### **Criteria for Ending AIS Standard Forms**

- AIS will be discontinued when a student no longer meets the criteria set forth by the district for inclusion in the AIS program, and is no longer determined to be at risk of not meeting state standards.

### **Process and Timeline**

- Academic Intervention Services may start at any time, but must begin no later than the beginning of the semester following a determination that a student needs such services. At the high school level, AIS cannot be postponed until students are scheduled for a course in which AIS is needed. This must be determined individually for each student based on need.

### **Records of Progress**

- Documentation of types of services provided as well as the frequency of contact
- Office attendance records
- Report card grades
- Teachers' observations
- Annual local and state testing
- Tracking number of discipline referrals

### **Possible Range of Academic Interventions**

1. Individualized Instruction (K-12)
2. Scheduling options, including class time Title I (K-12)
3. Extended Time (Elementary & Middle Schools, as offered)
4. Instructional Modifications (K-12)
5. Small Class Size (K-12)
6. Student Support Team (K-12)
7. Co-teaching (As offered)
8. Extended Day Program (Elementary & Middle Schools, as offered)
9. Summer Programs (K-12, as offered)
10. Math Lab (Elementary-as offered)
11. Sheard Literacy Center (Elementary & Middle School, as offered)
12. Mentor Program (Middle School, as offered)
13. Community Programs (K-12, as offered)
14. Student Learning Center (High School, as offered) & Opportunity Room (Middle School, as offered)
15. Counseling (K-12)

**Potsdam Central School District**  
29 Leroy Street  
Potsdam, NY 13676  
315-265-2000

**Academic Intervention Services/Title I Services  
Quarterly Report**

---

*(Date)*

Dear Parent/Guardian:

8



Re: \_\_\_\_\_  
*Student's full name*                      *Present Grade*                      *Teacher or Guidance Counselor*

This is your quarterly report on your child. Please see the following identifying your child's present progress in the identified AIS area and any concerns noted.

**List Services:** \_\_\_\_\_ **Present Status:** \_\_\_\_\_

English Language Arts AIS    Title I	Needs to Improve
Math AIS    Title I	Showing Inconsistent Progress
Social Studies	Showing Consistent Progress
Science	Satisfactory Progress
Support Services	

**Comments:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you have any questions, please contact me.

Sincerely,

\_\_\_\_\_  
Service Provider

Cc *Student's Cumulative Folder*  
*Service Provider(s)*

*Guidance Counselor*  
*Teacher(s)*

**Potsdam Central School District**  
**Lawrence Avenue Elementary School**  
**29 Leroy Street**  
**Potsdam, New York 13676**  
**(315) 265-2000**

## Title I Service Notification

Date:

Dear ,

Your child, \_\_\_\_\_ , has been recommended to receive AIS/Title 1 services. This program focuses on improving grade level skills to meet the NYS Standards in Reading Readiness Skills, English Language Arts and/or Math. When students have demonstrated adequate academic growth, they will no longer need to receive Title 1 services. Your child has been recommended to receive services in:

Language Arts

The AIS/Title 1 Program will be in addition to the regular classroom reading or math program and offers a minimum of 30 minutes of small group instruction from two to five times per week. The Title 1/AIS Program is funded through a special grant that focuses on improving grade level skills to meet NYS Standards in Reading Readiness Skills, English Language Arts and/or Math. If you have any questions, please feel free to contact us at school.

Sincerely,

Mr. Larry B. Jenne  
Elementary Principal

A. A. Kingston Middle School  
\*Designated a *School to Watch*\*  
Potsdam Central Schools

29 Leroy Street  
Potsdam, NY 13676

Phone (315) 265-2000

Fax (315) 265-8103

To Be Determined,  
Middle School Principal

Kristen Zender,  
Guidance Counselor

### **Title I Service Notification**

September 12, 2013

Dear Parent(s) or Guardian(s):

You are receiving this letter to inform you that your child, «First\_Name» «Last\_Name», did not meet proficiency on their NYS exam in either Math or English Language Arts in the 2012-2013 school year.

AIS is a service we supply in compliance with the New York State regulation. Potsdam Central School will provide AIS for all students who scored either a Level 1 or Level 2 on the exam.

Your son/daughter will be receiving AIS services in the following subject(s):

#### **Subjects**

This schedule change will take place immediately with minimal effect on their current schedule. Your child must be enrolled until they prove their proficiency in that subject area.

If you have further questions regarding our AIS program you may contact me at your convenience.

Thank you,

To Be Determined  
Middle School Principal

**POTSDAM CENTRAL SCHOOL DISTRICT  
Potsdam High School**

29 Leroy Street  
POTSDAM, NEW YORK 13676  
(315) 265-2000

**Title I Service Notification**

This letter is to inform you that your child will be receiving math Academic Intervention Services (AIS) during the current school year. Academic Intervention Services (AIS) are services designed to help students achieve the learning standards in English language arts and mathematics in grades K-12 and social studies and science in grades 4-12. These services include two components: additional instruction that supplements the general curriculum and/or student support services needed to address barriers to improved academic performance.

Students qualify for Academic Intervention Services based on one or more of the following criteria:

- Scoring below proficiency (level 1 or 2) on a New York State Assessment
- Earning a failing report card grade in a core academic subject
- Teacher recommendation
- Guidance counselor recommendation

At Potsdam High School, students are generally scheduled for AIS on an every other day basis. Either a content area teacher or a teaching assistant under the supervision of a teacher may provide AIS.

AIS providers offer quarterly updates to parents via report card comments.

If you have any questions about your child's Academic Intervention Services, please feel free to contact the guidance office.

Sincerely,

Joann Chambers  
High School Principal

**Potsdam Central School District**  
**29 Leroy Street**  
**Potsdam, NY 13676**  
**315-265-2000**  
**Academic Intervention Services/Title I Services**  
**Notification of Discontinuance**

\_\_\_\_\_  
*(Date)*

Dear Parent/Guardian:

Re: \_\_\_\_\_  
*Student's full name*                      *Present Grade*                      *Teacher or Guidance Counselor*

Please be informed that your child is discontinuing Academic Intervention or Title I services in the area noted below. He/She may, however, be receiving services in other areas.

List Services	Criteria for Discontinuance	Level of Performance
<input type="checkbox"/> English/Language Arts <input type="checkbox"/> AIS <input type="checkbox"/> Title I		
<input type="checkbox"/> Math <input type="checkbox"/> AIS <input type="checkbox"/> Title I		
<input type="checkbox"/> Social Studies		
<input type="checkbox"/> Science		
<input type="checkbox"/> Support Services		

The exit criteria above show that he/she:

-Has obtained the competencies necessary to perform at an acceptable level for his/her grade.

-Is scheduled to repeat the grade level or course. (Applies to Title I only)

If you have any questions, please contact me.

Sincerely,

---

*(Principal's Signature)*

Cc: Student's cumulative folder

Service Providers

Guidance Counselor/Teacher(s)

**Lawrence Avenue Elementary School**

### **STUDENT SUPPORT TEAM (SST) REFERRAL PROCEDURE**

Teacher has concern about a student.

©

Teacher implements and documents classroom interventions and parent contact for at least four weeks (Reading Rtl 12 – 14 weeks).

(See Intervention Check Sheet and Parent Contact Log)  
(Consultation and support available)

©

If classroom interventions are not successful, the teacher meets with principal and shares Intervention Check Sheet and Parent Contact Log. Principal makes recommendation for next step, which may include alternate classroom interventions, Title I, or SST referral.

©

Teacher fills out Student Referral Form and meets with the principal to determine Title I services or referral to SST.

©

Teacher notifies parents of outcome of interventions and discusses the next step.

©

Principal notifies Title I Coordinator or schedules student for next SST meeting. Secretary sends Title I Service Notification or SST Parent Consent Form to parents.

©

**IF SST REFERRAL IS RECOMMENDED,**

©

Classroom teacher and SST review documentation and discuss student's strengths and challenges.

©

Team develops SST Intervention Plan and completes SST Minutes.

©

Teacher informs / meets with parents to discuss proposed SST Intervention Plan.

©

Intervention plan is implemented and monitored for six to ten weeks. Teacher and/or support staff continue to document interventions and parent contacts.

©

A subsequent review will be scheduled to assess effectiveness of the plan.

**ALL INTERVENTION DOCUMENTATION** (including Intervention Check Sheet, Parent Contact Log, Student Referral Form, Title I Service Notification, SST Parent Consent Form, SST Intervention Plan, SST Minutes) **WILL BE RECORDED AND MAINTAINED IN THE SST FILE.**

**POTSDAM CENTRAL SCHOOL DISTRICT**

**Student Referral Form to Student Support Team**

Student Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Teacher/Counselor \_\_\_\_\_ Grade: \_\_\_\_\_

Person Initiating Referral: \_\_\_\_\_

**Presenting Problem(s):**    Behavior                       Mental Health                       Social Skills

Academic                       Discipline                       Motor                       Attendance

Health Issues                       Physical Hygiene    Other: \_\_\_\_\_



**Specific Description of Problem(s):**

---

---

---

---

**Intervention(s) Tried:** \* *Please include Intervention Check-Sheet.*

---

---

---

**Relevant Data Submitted:**

- Work Samples     Attendance Records     Report Card     Discipline File
- Cumulative Folder     Grade History     Health Records
- 504 Plan     Special Education Records     Outside Agency Records/Reports
- Other:

---

**Areas of Strength and Achievement:** (Academic, social, learning style, interests, etc...)

---

---

---

---

---

---

---

---

---

---

---

---

*Please check all areas of concern:*

**Reading:**

- |  |   |
|--|---|
| <input type="checkbox"/> Oral reading is non-fluent      | <input type="checkbox"/> Pace of reading is slow          |
| <input type="checkbox"/> Fails to use word attack skills | <input type="checkbox"/> Difficulty finding main idea     |
| <input type="checkbox"/> Poor sight word retention       | <input type="checkbox"/> Difficulty sequencing facts      |
| <input type="checkbox"/> Loses place while reading       | <input type="checkbox"/> Does not finish assignments      |
| <input type="checkbox"/> Comprehension difficulties      | <input type="checkbox"/> Difficulty with independent work |
| <input type="checkbox"/> Other:                          |   |
- 

**Phonics / Spelling:**

- |  |   |
|--|---|
| <input type="checkbox"/> Difficulty with weekly tests    | <input type="checkbox"/> Difficulty with non-phonetic words |
| <input type="checkbox"/> Does not apply spelling skills  | <input type="checkbox"/> Does not know letter sounds        |
| <input type="checkbox"/> Does not know grade level words | <input type="checkbox"/> Fails to use spelling rules        |

\_\_\_\_\_ Other:

---

**Written Expression:**

- |   |  |
|---|--|
| _____ Written work done carelessly      | _____ Difficulty with independent work |
| _____ Fails to use capitals and periods | _____ Difficulty organizing ideas      |
| _____ Does not use complete sentences   | _____ Incorrect grammar/verb tenses    |
| _____ Other:                            |  |
- 

**Handwriting:**

- |  |  |
|--|--|
| _____ Incorrect letter formations        | _____ Poor spacing of letters and words  |
| _____ Reverses letters and numbers       | _____ Writing too small or too large     |
| _____ Difficulty copying from near-point | _____ Difficulty copying from a distance |
| _____ Other:                             |  |
- 

**Mathematics:**

- |                                      |   |
|--------------------------------------|---|
| _____ Difficulty learning math facts | _____ Difficulty learning math operations |
| _____ Difficulty learning time/money | _____ Difficulty with regrouping          |
| _____ Confuses operational signs     | _____ Does not understand basic concepts  |
| _____ Difficulty with word problems  | _____ Problems in writing or aligning     |
| numbers                              |   |
| _____ Other:                         |   |
- 

**Organization / Memory / Academic Performance:**

- |  |   |
|--|---|
| _____ Appears generally disorganized   | _____ Difficulty keeping track of materials |
| _____ Difficulty concentrating         | _____ Often distracted by others            |
| _____ Difficulty remaining seated      | _____ Rushes through work                   |
| _____ Does not complete homework       | _____ Does not complete class assignments   |
| _____ Difficulty with independent work | _____ Does not remain on task               |
| _____ Problems with written directions | _____ Does not perform at ability level     |
| _____ Difficulty with transitions      | _____ Problems beginning work promptly      |
| _____ Problems with visual memory      | _____ Difficulty with auditory memory       |
| _____ Problems remembering routines    | _____ Needs directions repeated             |
| _____ Other:                           |   |
-

**Listening / Speaking:**

- |   |  |
|---|--|
| <input type="checkbox"/> Does not follow verbal directions                                    | <input type="checkbox"/> Does not maintain attention       |
| <input type="checkbox"/> Needs 1 to 1 reinforcement   | <input type="checkbox"/> Requires inordinate eye contact   |
| <input type="checkbox"/> Distorts/mispronounces words   | <input type="checkbox"/> Has a limited speaking vocabulary |
| <input type="checkbox"/> Speaks dysfluently   | <input type="checkbox"/> Difficulty with grammatical usage |
| <input type="checkbox"/> Voice is too loud or too soft  |  |
| <input type="checkbox"/> Difficulty in group activities requiring listening and participation |  |
| <input type="checkbox"/> Other:   |  |
- 

**Behavior / Interpersonal Relationships:**

- |  |  |
|--|--|
| <input type="checkbox"/> Makes inappropriate comments    | <input type="checkbox"/> Aggressive with peers                     |
| <input type="checkbox"/> Easily angered or upset         | <input type="checkbox"/> Agitates / teases / distracts others      |
| <input type="checkbox"/> Minimal interactions with peers | <input type="checkbox"/> Minimal interactions with adults          |
| <input type="checkbox"/> Difficulty sharing materials    | <input type="checkbox"/> Responds inappropriately to praise        |
| <input type="checkbox"/> Difficulty taking turns         | <input type="checkbox"/> Does not respect others views             |
| <input type="checkbox"/> Inappropriate use of free time  | <input type="checkbox"/> Difficulty during specials _____          |
| <input type="checkbox"/> Difficulty working in a group   | <input type="checkbox"/> Cannot resolve personal conflicts         |
| <input type="checkbox"/> Tends to blame others           | <input type="checkbox"/> Denies / distorts / exaggerates the truth |
| <input type="checkbox"/> Shows self-destructive behavior | <input type="checkbox"/> Unmotivated                               |
| <input type="checkbox"/> Behaves impulsively             | <input type="checkbox"/> Shows nervous tendencies                  |
| <input type="checkbox"/> Does not respect property       | <input type="checkbox"/> Often appears sad / preoccupied           |
| <input type="checkbox"/> Unpredictable behaviors         | <input type="checkbox"/> Unusual mood swings                       |
| <input type="checkbox"/> Other:                          |  |
- 

**Health / Attendance:**

- |   |  |
|---|--|
| <input type="checkbox"/> Has unexcused absences (_____) | <input type="checkbox"/> Has frequent tardies:             |
| <input type="checkbox"/> Seems tired / lethargic        | <input type="checkbox"/> Seems overly active               |
| <input type="checkbox"/> Has frequent illnesses         | <input type="checkbox"/> Failed school vision test         |
| <input type="checkbox"/> Failed school hearing test     | <input type="checkbox"/> Wears corrective lenses (glasses) |

**Teacher Input:**

- What would you like the student to be doing that he/she is currently not doing now?
  
- Other Comments?

***Please complete this entire form. As soon as the form is complete, return to the principal. DO NOT forget to bring work samples or other pertinent information to the meeting.***

**To be completed by Principal:**

Date Referral Packet was received:

\_\_\_\_\_

Recommendation: Title I Reading / Math Services \_\_\_\_\_ or SST Referral \_\_\_\_\_

Date Notified: Parent \_\_\_\_\_ Title I \_\_\_\_\_ SST Meeting \_\_\_\_\_