



## 2023-2024 Vermont Multi-tiered System of Supports (VTmtss) Survey

[16 V.S.A. §2902](#), directs that within each school district's comprehensive system of educational services, each public school shall develop and maintain a tiered system of academic and behavioral support using educational support teams for the purpose of providing all students with the opportunity to succeed or to be challenged in the general education environment. Superintendents most often delegate the completion of this survey to the principal at each school in the supervisory union or supervisory district for completion.

For your convenience, here is [a link to the VTmtss Statewide Survey questions for the school year 2023-2024](#) so principals can review questions.

Respondents can save and resume their survey at any time using a link that will be emailed directly to them upon hitting the "Save" button within this form.

For questions regarding the content of this survey, please contact Caitlin Chisholm at [caitlin.chisholm@vermont.gov](mailto:caitlin.chisholm@vermont.gov).

## Vermont Multi-tiered System of Supports Survey Purpose

The purpose of this annual school-level survey collection is to gather data on the extent to which school leaders have incorporated the best practices within the VTmtss Framework to increase equitable access to high-quality interventions.

The following resources were consulted while developing the questions and best practices outlined in the response choices: [VTmtss Field Guide 2019](#), [District Management Group \(DMG\) Report](#), and [Educational Support Teams \(EST\) Guidance Documents](#).

## Directions for Save and Resume Option

Click on "Save" at the end of the form. A pop-up screen will appear with the option of, "Email me my link". Click on "Send". An email will be sent with the option "Resume Now" which will allow you to go back to the form to finish entering your data. Finish entering your data then click on "Submit". A confirmation email will be sent along with a PDF of your submission.

## Contact Information

**a. Name of Principal**

First

Last

**b. Principal's Email**

**c. Principal's Phone**

**d. Name of Superintendent**

First

Last

**e. Superintendent's Email**

**f. Superintendent's Phone**

**g. Supervisory Union**

**h. School Name (If you are the principal of more than one school or of a campus, please submit a survey for each school.)**

**i. Total student population**

**j. The grades taught in this school.**

- |                                       |                              |                              |                               |
|---------------------------------------|------------------------------|------------------------------|-------------------------------|
| <input type="checkbox"/> PreK         | <input type="checkbox"/> 3rd | <input type="checkbox"/> 7th | <input type="checkbox"/> 10th |
| <input type="checkbox"/> Kindergarten | <input type="checkbox"/> 4th | <input type="checkbox"/> 8th | <input type="checkbox"/> 11th |
| <input type="checkbox"/> 1st          | <input type="checkbox"/> 5th | <input type="checkbox"/> 9th | <input type="checkbox"/> 12th |
| <input type="checkbox"/> 2nd          | <input type="checkbox"/> 6th |                              |                               |

**k. Grade band that best describes your school.**

- |   |  |                                      |                                |
|---|--|--------------------------------------|--------------------------------|
| <input type="checkbox"/> PreK and/or Kindergarten | <input type="checkbox"/> Elementary/Middle | <input type="checkbox"/> Middle/High | <input type="checkbox"/> Other |
| <input type="checkbox"/> Elementary               | <input type="checkbox"/> Middle            | <input type="checkbox"/> High School |                                |

# Increasing Capacity for the Collaborative Development of System Expertise

## Scheduling

**1. Select all staff members who are involved with the creation of the school's master schedule. Select all that apply.**

- School principal
- Special education administrator(s)
- Contents specialist
- Classroom teacher

## **Educational Support Teams (EST)**

**2. Select all individuals who are consistently included in your school's EST meetings. Select all that apply.**

- administrator
- family member or guardian
- district-level representative
- school counselor
- school psychologist
- social worker
- special educator
- staff with academic expertise
- staff with behavioral expertise
- student
- teachers (appropriate PreK-12 grade level related to student needs)
- other non-school supports/advocates

**3. Is any educational support team meetings embedded within your school's master schedule? Select one.**

- Yes  No

**4. How frequently does your educational support team meet throughout the year? Select one.**

- Less than once per month
- Once per month
- Twice per month or more

## **Questions 5 and 6: Responsive Decision Making - EST Plans**

**5. Select the systemic approaches always used in your school to enhance any academic intervention plans developed for a student by your school's EST.**

- General ed instructor(s) meets with member(s) of the team assigning the intervention plan to discuss the details of the intervention
- Documentation is provided to all the student's instructors detailing specific information regarding the intervention plan
- Relevant instructor(s) are provided a documented timeline around expectations for tracking and reporting on intervention data
- General educators are prepared to assume responsibility for the continued implementation of support or accommodations at the completion of an intervention plan
- Students are made aware of the details and provided relevant resources within the plan
- Families are made aware of the details and provided relevant resources within the plan

**6. Select the systemic approaches always used in your school to enhance any Social Emotional Learning (SEL) support or behavioral intervention plan developed by your school's EST.**

- General ed instructor(s) meets with member(s) of the team assigning the intervention plan to discuss the details of the intervention
- Documentation is provided to all the student's instructors detailing specific information regarding the intervention plan
- Relevant instructor(s) are provided a documented timeline around expectations for tracking and reporting on intervention data
- General educators are prepared to assume responsibility for the continued implementation of support or accommodations at the completion of an intervention plan
- Students are made aware of the details and provided relevant resources within the plan
- Families are made aware of the details and provided relevant resources within the plan

**7. Which of the following data sources does your EST often review during EST meetings.**

- Screener Data (e.g., SEL or academic screener data)
- Family Qualitative (e.g., family input (verbal or written), observational)
- Student Qualitative (e.g., student input (verbal or written), observational)
- Progress Monitoring Data (e.g., periodic benchmark assessments, formative assessments)
- Diagnostic data (e.g., Student's IEP plan, behavior-related data, attendance data)
- Outcome Data (e.g., Summative assessments compared to benchmark/standard, proficiency-based assessments)

**8. Select all of the following elements that are contained within your school’s EST plans.**

- Current level of performance always noted on the plan
- Concerns are clearly defined and detailed in the plan
- Concern is measurable and informed by data - noted on the plan
- Plan to promote change is measurable and will be measured by data – noted on the plan
- Plans clearly define roles: i.e., what will occur, by whom, where, and when
- Includes information on how to enhance general education setting for student
- Dates are noted to ensure short-term, frequent review of student progress occurs
- Space to note adaptations or changes made after review of outcomes data is provided on the EST plan template

**9. How many active Educational Support Team (EST) plans are still in place from last school year?**

**10. For how many students was a request for assistance made to the Educational Support Team (EST) for the first time this school year?**

**11. Of the students in Question 10, who received a request for assistance to EST for the first time this school year, how many received an EST plan?**

**12. Of the students in question 11, who received an EST plan for the first time this year, how many had a Section 504 plan developed for the first time this year?**

**13. Of the students in question 11, who received an EST plan for the first time this year, how many were recommended for a special education evaluation for the first time this school year?**

**14. Of the students in question 13, who were recommended for special education evaluation, how many had an Individualized Education Program (IEP) developed for the first time this school year?**

**15. Out of all current EST plans, how many were completed this school year? (“All” means adding total from question 9 and 11.)**

## **Equitable Access to Interventions and Supports**

### **Questions 16-18: Student Supports**

**16. Select all options that are available to enhance ANY type of support to ALL students in your school.**

Extra time is embedded in teacher schedules offer support  Extra time is embedded in student schedules to receive support  Intentional short or long-term goals that are based on multiple sources of data inform any support received  The most highly-skilled professionals related to the support provided are always available for learners who require them  Support provided does not supplant nor limit students' access to universal instruction  Timely monitoring is always used for any support to determine support adaptation  Student data is evaluated by educators to measure the progress or outcome of support received  Family is provided the opportunity to be involved with making decisions around the support to be provided

**17. Select all systems-level approaches that are in place to provide high-quality mental health (MH) supports to all students who may need them in your school.**

Supporting student mental health and wellbeing is reflected in the school's continuous improvement plan (goals or change ideas)  Supports for mental health and wellness are vertically aligned to be age and grade-appropriate  Processes are in place to support students' mental health needs through coordinating relevant services  Protocols and processes for supporting mental health needs are understood by all school staff  Mental health professionals are accessible to students in a timely manner  Families are provided the opportunity to be involved with making decisions around the support to be provided  There are opportunities for students to discuss and request support from the relevant staff member

**18. Select all systems-level approaches that are in place to provide high-quality social-emotional (SEL) support to all students who may need them in your school.**

Supporting student social emotional learning is reflected in school's continuous improvement plan (goals or change ideas)

Standards to influence social-emotional learning are integrated within the academic curriculum and instructional practices

Processes are in place to support students' social-emotional needs through coordinating relevant services

Protocols and processes for supporting social-emotional needs are understood by all school staff

Family is provided the opportunity to be involved with making decisions around the support to be provided

There are opportunities for students to discuss and request support from the relevant staff member

**19. Select any data sources general educators in your school review to inform their lesson planning.**

- Ongoing formative progress monitoring data
- Interim or periodic benchmark assessments
- Family provided qualitative data
- Student provided qualitative data
- Performance based assessments
- Universal screening
- Students' IEP plans
- Students' Section 504 plans
- Summative assessments
- Staff observations of student behavior benchmark/standard

**20. Does your school administer a universal social-emotional screener? Select one.**

- Yes  No

**21. Does your school administer a universal mental health screener? Select one.**

- Yes  No

**22. Does your school administer a School Climate Survey? Select one.**

- Yes  No

**23. Which of the following Mental Health and Social Services and Supports are part of your school's multi-tiered system of support? Select all that apply.**

- |   |  |
|---|--|
| <input type="checkbox"/> Behavior Intervention Specialist and Services  | <input type="checkbox"/> Child Protection Team   |
| <input type="checkbox"/> Conflict Resolution Program  | <input type="checkbox"/> Coordinated Service Plans (Act 264)                                       |
| <input type="checkbox"/> Counseling/Guidance Services   | <input type="checkbox"/> Home School Coordinator   |
| <input type="checkbox"/> Family Support Personnel   | <input type="checkbox"/> School Psychological Services   |
| <input type="checkbox"/> Social Worker  | <input type="checkbox"/> School-based Clinician  |
| <input type="checkbox"/> Restorative Approaches   | <input type="checkbox"/> Board Certified Behavior Analyst (BCBA) Student Assistance Programs (SAP) |
| <input type="checkbox"/> Substance Use/Abuse Prevention Programs  | <input type="checkbox"/> SU/SD Wide Whole School, Whole Community                                  |
| <input type="checkbox"/> Teacher Advisor System Whole Child Team  | <input type="checkbox"/> Peer Monitoring   |
| <input type="checkbox"/> Trained Crisis Response Team   | <input type="checkbox"/> Suicide Prevention Training   |
| <input type="checkbox"/> Transportation (of students to medical or counseling appointments off school campus) | <input type="checkbox"/> Other services provided by local Designated Agency                        |

**24. Does your school have a memorandum of understanding with your local designated mental health agency or other local health and mental agency providers? Select one.**

- Yes  No

**25. Select all funding sources you used this school year for mental health and social services.**

- |   |  |
|---|--|
| <input type="checkbox"/> Agency of Education Tobacco Use Prevention     | <input type="checkbox"/> IDEA (Coordinated Early Intervening Services)   |
| <input type="checkbox"/> 21st Century Community Learning Centers Grants | <input type="checkbox"/> Medicaid Reimbursement  |
| <input type="checkbox"/> Title I  | <input type="checkbox"/> Department of Health Substance Use/Abuse grant  |
| <input type="checkbox"/> Title V  | <input type="checkbox"/> No Mental Health and Social Services and funding Prevention Programs Supports offered |
| <input type="checkbox"/> Local/School Budget                            | <input type="checkbox"/> Elementary and Secondary School Emergency Relief Fund                                 |
| <input type="checkbox"/> State Special Education                        | <input type="checkbox"/> Act 112 Grant Fund  |
| <input type="checkbox"/> Other Sources for Substance Use/Abuse Grants   | <input type="checkbox"/> Success Beyond Six  |
| <input type="checkbox"/> Title IV                                       | <input type="checkbox"/> No Mental Health and Social Services and funding Prevention Programs Supports offered |
| <input type="checkbox"/> <input type="text"/>                           |  |

## Increasing Capacity for the Collaborative Development of Collective Expertise

**26. How frequently do general educators in your school have time intentionally embedded in their schedule to do the following?**

**a. Meet with an intervention specialist to inform their lesson plans. Select one.**

- Daily
- At least once per week
- At least once per month
- More than 4 times per year
- Less than 4 times per year
- There is no intervention specialist on staff this year

**b. Meet with a special educator to inform lesson planning. Select one.**

- Daily
- At least once per week
- At least once per month
- More than 4 times per year
- Less than 4 times per year



**c. Discuss the details of a paraprofessional's responsibility or role in supporting students. Select one.**

- Daily
- At least once per week
- At least once per month
- More than 4 times per year
- Less than 4 times per year

**d. Share best practices with another grade level or content area general educator. Select one.**

- Daily
- At least once per week
- At least once per month
- More than 4 times per year
- Less than 4 times per year

**e. Discuss the progress of a student with a family member. Select one.**

- Daily
- At least once per week
- At least once per month
- More than 4 times per year
- Less than 4 times per year

**f. Discuss the progress of a student with that student. Select one.**

- Daily
- At least once per week
- At least once per month
- More than 4 times per year
- Less than 4 times per year

**27. How is needs-based professional learning determined at your school? Select all that apply.**

- Student data informs individual professional learning needs of staff
- Opportunities are determined by regular administrator observations of all teachers' classrooms
- Intervention specialists provide coaching as they determine necessary on an individual basis for staff members
- Regular review of school-wide, disaggregated data, determines coaching needs around specific skills
- Professional learning is determined based on its alignment to SMART goals in the school's theory of improvement

**28. Which of the following needs-based professional learning opportunities are available in your school? Select all that apply.**

- |   |  |
|---|--|
| <input type="checkbox"/> Mentorships                                  | <input type="checkbox"/> Professional learning communities   |
| <input type="checkbox"/> Ongoing coaching                             | <input type="checkbox"/> Staff receive differentiated training based on individual need                |
| <input type="checkbox"/> Content-specific discussion and study groups | <input type="checkbox"/> Paraprofessionals receive differentiated training based on individual need    |
| <input type="checkbox"/> Networked Improvement Community (NIC)        | <input type="checkbox"/> All staff are trained in school-wide programs or frameworks (e.g., UDL, PBIS) |
| <input type="checkbox"/> Peer observation                             |  |

**29. How many total paraprofessionals are currently employed as full-time at your school?**

**How many of those paraprofessionals are primarily assigned to the following role(s)?**

**29a. Support of an assigned student (as indicated in student's Individualized Education Program)**

**29b. Support of an assigned student (Not designated by an IEP)**

**29c. Support core instruction within a whole class or small group support setting**

**30. Which opportunities has your school made available throughout the year for meaningfully engaging families in decisions regarding the school? Select all that apply.**

- Families are invited to participate in planning meetings (e.g., planning of system-level decisions such as mission and vision or classroom expectations)
- Time is intentionally planned for families to share unique experiences or knowledge
- There is process for systemic inquiry of families' feedback throughout the year
- Families are provided opportunities to participate in developing, implementing, and evaluating critical school programs
- Families are considered partners when reviewing any data to make school-based decisions
- Consideration of leveraging family engagement to achieve goals in school's continuous improvement plan

**31. Our school has at least one staff member represented on a district-level educational support team. Select one.**

- Yes  No

**32. Answer the following questions for your school, based on who you anticipate will fill these roles in School Year 2023-2024.**

**a. Family Engagement Coordinator**

**Name**

**Email**

**b. Multi-tiered System of Supports (MTSS) Coordinator**

**Name**

**Email**

**c. Educational Support Teams (EST) Coordinator**

**Name**

**Email**

**d. Designated Employees (each school must have two)**

**First Person's Name**

**First Person's Email**

**Second Person's Name**

**Second Person's Email**

**e. Section 504 Coordinator**

**Name**

**Email**

**f. Behavior Coordinator**

**Name**

**Email**

**33. Which of the following VTmtss Team tools did your school use to inform and support your VTmtss Framework this school year? Select all that apply:**

- Making Connections with VTmtss series
- VTmtss Driver Diagram
- VTmtss System Screener

**View the following documents online:**

- [Making Connections with VTmtss series](#)
- [VTmtss Driver Diagram](#)
- [VTmtss System Screener](#)

**34. As principal, I assure to the best of my understanding that the information provided is correct for the School's Vermont Multi-Tiered System of Supports (VTmtss) Survey Data.**