

# **Educational Support Team Plan Forms**

### **Purpose**

Included is a set of two form templates: one for use at an initial EST meeting to support the development of an individual plan for a student, and a second to guide the review of progress for that plan later. These forms provide a format to record the essential information that an EST should include in every student plan. They are also intended to structure an efficient team process.

### **Background**

Educational Support Teams are expected to adopt practices that include:

- the use of student data to identify specific concerns,
- the use of the expertise of the team to develop time-limited plans,
- the use of data to review the effectiveness of these plans,
- to decide to continue, modify, transition, or end plans based on that review, and
- documentation of meetings, plans, and outcomes

These forms were developed after a series of conversations with representatives from more than a dozen districts, as well as other recent requests from the field for such support.

The AOE recommends that EST typically meet at the school level but that they are operated under the oversight of the school district. The district has a responsibility to ensure uniformity, equity, and efficiency of EST procedures and support to students. See the <u>District-level EST Oversight</u> guidance for more information.

## Are these forms required?

Schools and Districts are not required to use these forms for EST plans at this time. However, the AOE strongly recommends that they use these forms to set a baseline for their EST plan content. A district may also choose to include additional fields as needed, modify the format of the forms, and add content. The AOE may elect to review ESTs as a part of a monitoring visit or other site visit. Those reviews will use these templates as a quality standard when making determinations about LEA and/or school EST plan quality and efficacy. Keeping copies of the forms will be helpful in responding to VTmtss Survey questions.

#### **Contact Information:**

If you have questions about this document or would like additional information, please contact:

Tom Faris, Student Support Services, <u>Thomas.Faris@vermont.gov</u>.

## **Educational Support Team Plan**

Student:		Meeting Date:
Grade:		Referred by:
1.	Describe the area of concern that prompted	the EST referral (include relevant data):
2.	Describe the support that will be provided (	what, by whom, how often, where):
3.	When will the student's progress be reviewed	ed? (must be within 9 weeks)
4.	What will appropriate student progress look	k like? (data)

# **Additional Data**

7. Has this student previously or currently received services?

5. Who else needs to be informed of this plan/included in this plan?

6. Does the team feel that there may be unmet mental health/social-emotional/substance-related issues? If yes, list referral(s) for additional supports.

- EST (dates)
- ELL (dates)
- IEP (dates)
- Section 504 (dates)
- 8. Describe how the student's family was engaged in developing the plan:
- 9. Describe how the student will be engaged in monitoring the plan:



### **Educational Support Team Plan Review**

Student:	Review Date:
Grade:	

- 1. Describe the student's progress (data):
- 2. Has the student met the expected goal(s) of this plan?
- 3. Should the plan be (select one):
  - a. Concluded no further support needed
  - b. Transferred some elements of the plan continued in a classroom setting(describe)
  - c. Continued (describe why this is recommended)
  - d. Modified (describe modification and rationale)
  - e. Other action (describe)
- 4. Does the student's Personalized Learning Plan (PLP) need to be modified to reflect information about the student's learning style informed by this intervention?
- 5. Next Review date, if needed: (no more than 9 weeks)

