## **FY21 Strong & Healthy Schools Survey**

What is your Supervisory Union/Supervisory District							

## Operations - Please Complete this section for each School in your SU/SD

Once you have completed the response for one school, click "Add School" at the bottom of this page. When you have completed this section for all schools in your SU/SD, move on to the next section by clicking "Next"

clicking "Next"							
School 1							
What type of school? O Public School (k - 12)	What is your school?	Which Independent School?	Which CTE Center	?			
O CTE Center							
O Independent School							
What grade levels at □ Elementary school High school							
Did your school close at any time in September as a result of COVID-19? ○ Yes ⊙ No							
Could families choose which learning model (in- person; hybrid; remote) their	If your school has a hybrid learning model is it on a:	Does your scho have staggered start times? O Yes @ No					
student will participate in? ⊙ Yes ○ No							
What % of your <u>Elementary</u> students this month will:							
Engage in fully onlin learning?	ingage in fully online Engage in earning?		Engage in fully in- person learning?	<b>Total</b> 0%			
What % of your <u>Middle school</u> students this month will:							
Engage in fully onlin learning?	e Engage in learning?	hybrid/blended	Engage in fully in- person learning?	Total 0%			

What % of your <i>High School</i> students this month will:							
Engage in fully online learning?	Engage in hybrid/bl learning?		Engage in fully in- person learning?	Total 0%			
What is the total enrollment	How many students are in the school on any given day						
What is the total number of sthis school?	How many staff are physically in the school each day during school hours?						
How many staff are virtual d	P How many staff are onsite when school is not in session?						
What number of those staff who are physically present are in the COVID at-risk population?	What percentage of in each school were available for work of COVID-related issue personal or family i quarantine, childca	e absent/n lue to a e (e.g. Ilness,	absent/not needed, was the school able to e to a obtain adequate substitute teac (e.g. coverage? ness, ○ Yes ⊙ No				
Does your school allow visitors ? ○ Yes ⊙ No							
To what extent does your school have the following types of visitors							
	Never allowed	Non-sch hours	•	Regularly scheduled	Drop in		
Parents	0	0	0	0	0		
Volunteers	0	0	0	0	0		
Professional Development Staff/Consultants	0	0	0	0	0		
Contractors/Delivery/Building Maintenance	<b>&amp;</b>	0	0	0	0		
Other	0	0	0	0	0		
Are there screening procedures in place for staff/students/visitors?	What screening pro staff/students/visito ☐ Temperature Chec	ors?	questions do you h	ave in place f	or		
⊙ Yes O No	☐ Covid screening q						

strategies/platfoi Email	SMS/Te	nity Access		re/supplemei	Webpage Phone Call ntal communic	Auto-call
What % of stude strategies/platfor Email Social Media	SMS/Te				. 0	Auto-call
strategies/platfoi	rms a <b>b</b> ove.	xt	LMS		Webpage	Auto-call
	nts/families o	do you conn	ect with t	through each	n of the variou	s
□ Social Media						
□ Mail				☐ Community Access TV		
□ Auto-calls	] Auto-calls			☐ Phone calls		
□ LMS				☐ Webpage		
What communica students/families □ Email		ies/platforms	-	use to comn □ Text/SMS		
Continuity	of Learn	ing - Co	mmur	nications	3	
		Please chec	k all that	apply		
		☐ Gloves				
O 163 O NO		☐ Face shie	ld			
schools and/or s		☐ Face mas				
Are visitors required to use PPE when visiting your		What PPE a  ☐ N95 Mask		rs required t	o use?	
			k all that	apply		
		☐ Hand Sar	nitizer			
			ace Shie	eld		
			00			
		☐ Isolation r	room			

deliver instruction:

Does your SU/SD have a plan in place for

Do you have a plan to address challenges that

## **Continuity of Learning - Student Structures for Success**

behavior regarding Covid-19 (sympto coverings, etc). ⊙ Yes ○ No	ms, facial
dditional social/emotional/wellness	
onal social/emotional/wellness	
need academic remediation and/or	
tion and Feedback	
mine proficiencies for the coming school year changed, and if	How many?
O Yes ⊙ No	
	or Yes O No Additional social/emotional/wellness  conal social/emotional/wellness  shave you leveraged, if any, to provide or your school community?  The tion and Feedback  Was the number of critical proficiencies for the coming school year changed, and if so by how many?

What % of your teachers are engaging in teaming structures (across content or role) to plan and/or

Elementary	Middle	Hi	igh	
M/hat 9/ of your tacabar	o will be teaching you	motoly/online full	time?	
What % of your teachers	s will be teaching rei	motery/omine run	ume :	
Elementary	Middle	High		
What # of your staff eng			d on online teaching practices and/or	
What # of your staff will and/or OTS certification			focused on online teaching practices	
What % of your faculty a trauma-informed practic		l engage in profes	ssional learning related to SEL and	
% of classroom teacher	% of specialist counselors, et		rs, % of paraprofessionals	
Continuity of Le	earning - Ensu	uring Acces	sibility	
What % of English Lang	juage Learners atten	ıd:		
Extended learning oppo	ortunities/extended d	lays? additional student bo	days (beyond that of the overall ody)?	
What % students on IEF	Ps attend:			
Extended learning oppo	ortunities/extended d	lays? additional student bo	days (beyond that of the overall ody)?	
What # of students will accomodations in order				