# How Well Does Our School Meet

### Students' Physiological Needs?

#### Part 1 Directions:

- 1. Review the top concerns families share for their children's physiological needs at school.
- 2. Consider each concern from different perspectives: your leadership team, teachers, non-teaching staff, student, and family members. Rate the state of each area from 1 (needs much improvement) to 5 (this is excellent on our campus / in our district). Then total the scores and move on to Part 2.

|                                   | Perception of Current State by Stakeholder Group  Rank 1 to 5 (5 is high) or "Don't Know" |          |                    |         | Total<br>Out of 25 |           |
|-----------------------------------|---|----------|--------------------|---------|--------------------|-----------|
| _                                 | Leadership  | Teachers | Non-Teaching Staff | Student | Family             | Out 01 23 |
| Meals/Cafeteria                   |   |          |                    |         |                    |           |
| Facilities                        |   |          |                    |         |                    |           |
| Dress Code/Uniforms               |   |          |                    |         |                    |           |
| Attendance/Absences               |   |          |                    |         |                    |           |
| School Schedule                   |   |          |                    |         |                    |           |
| Bathrooms                         |   |          |                    |         |                    |           |
| Lockers & Backpacks               |   |          |                    |         |                    |           |
| Class Schedules                   |   |          |                    |         |                    |           |
| Lunch/Recess                      |   |          |                    |         |                    |           |
| Food/Clothing/<br>Financial Needs |   |          |                    |         |                    |           |



Part 1: Evaluate

## How Well Does Our School Meet Students' Physical Safety & Security Needs?

Part 1: Evaluate

#### Part 1 Directions:

- 1. Review the top concerns families share for their children's safety and security needs at school.
- 2. Consider each concern from different perspectives: your leadership team, teachers, non-teaching staff, student, and family members. Rate the state of each area from 1 (needs much improvement) to 5 (this is excellent on our campus / in our district). Then total the scores and move on to Part 2.

|                                | Perception of Current State by Stakeholder Group<br>Rank 1 to 5 (5 is high) or "Don't Know" |          |                    |         | Total  |           |
|--------------------------------|---|----------|--------------------|---------|--------|-----------|
| -                              | Leadership  | Teachers | Non-Teaching Staff | Student | Family | Out of 25 |
| School Safety/ Campus Security |   |          |                    |         |        |           |
| Student Discipline Systems     |   |          |                    |         |        |           |
| IEP/504 Support                |   |          |                    |         |        |           |
| Student Behavior               |   |          |                    |         |        |           |
| Substance Use                  |   |          |                    |         |        |           |
| Mental Health Support          |   |          |                    |         |        |           |
| Health/Illness                 |   |          |                    |         |        |           |
| Behavior Update                |   |          |                    |         |        |           |
| Counseling                     |   |          |                    |         |        |           |
| Student Illness                |   |          |                    |         |        |           |



| Top Areas of<br>Concern  | Plan?<br>Y/N             | Do students and families know / have input in vision?   | Communication in Place (type)   | How can families and students provide meaningful input moving forward?   |
|--|--------------------------|---|---|--|
| Copy the top areas you want to focus on first or those with the lowest scores in the column below. | to improve in this area? | If no there is plan in place yet:  • How can you address the concerns your staff or families have in this area?  • What planning must be done for future improvement?  If there is a plan of improvement already in place:  • Do students and families know about the plan?  • Have they had the opportunity to provide input in that vision? | How do you or will you communicate the plans and progress toward improving this area internally to staff? Externally to current and prospective families? | Whether you are embarking on a new plan of improvement or you have on in progress, how can families and students provide meaningful input now and in the future? |
|  |                          |   |   |  |
|  |                          |   |   |  |
|  |                          |   |   |  |

### **Summarizing Action Statement**

| We have            | $_{	extstyle }$ areas of concern to address. The top area(s) we w | vill focus on first include         |
|--------------------|---|-------------------------------------|
|                    | To improve these areas, we need to                                | )                                   |
| We can let familie | s know of our plans and progress through                          | Families can contribute their ideas |
| or concerns in thi | s way:  |                                     |

