



Virtual PLUS+ Family Survey: Your Thoughts on School Reopening

Thank you for participating in this survey on how we can improve Virtual PLUS+ and next steps in planning for the transition back into our schools. These surveys are critical for us to continue to monitor this situation, better understand your needs and provide options that work for staff, students and families to the best of our ability.

Please take a few minutes to complete this survey by Oct. 4 at 11:59 p.m. Please complete a survey for each of your children.

The anonymous information that you provide will be used to improve our Virtual PLUS+ services while informing us about ways we could potentially begin to transition to in-person learning. Survey results will be discussed at the School Board meeting on October 15.

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If you have more than 1 child attending ACPS, please answer this survey on behalf of your youngest child. At the end of the survey, you can retake the survey for each of your other children.

1. Which school does your child attend? (Select one option)

- | | |
|--|---|
| <input type="radio"/> Early Childhood Center | <input type="radio"/> William Ramsay Elementary School |
| <input type="radio"/> John Adams Elementary School | <input type="radio"/> Samuel W. Tucker Elementary School |
| <input type="radio"/> Charles Barrett Elementary School | <input type="radio"/> Patrick Henry K-8 School |
| <input type="radio"/> Ferdinand T. Day Elementary School | <input type="radio"/> Jefferson-Houston PreK-8 IB School |
| <input type="radio"/> Cora Kelly School for Math, Science and Technology | <input type="radio"/> Francis C. Hammond Middle School |
| <input type="radio"/> Lyles-Crouch Traditional Academy | <input type="radio"/> George Washington Middle School |
| <input type="radio"/> Douglas MacArthur Elementary School | <input type="radio"/> T.C. Williams High School - Minnie Howard |
| <input type="radio"/> George Mason Elementary School | <input type="radio"/> T.C. Williams High School - Satellite |
| <input type="radio"/> Matthew Maury Elementary School | <input type="radio"/> T.C. Williams High School - King Street |
| <input type="radio"/> Mount Vernon Community School | <input type="radio"/> Chance for Change Academy |
| <input type="radio"/> James K. Polk Elementary School | |

2. In what grade is your child? (Select one option)

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

Instruction

3. Which of the following have been the biggest challenges for your child this school year? [Please select at most 3 options.]

- | | |
|---|---|
| <input type="checkbox"/> The amount of teacher-led live instruction required (synchronous instruction). | <input type="checkbox"/> Staying on track through multiple activities during live instruction. |
| <input type="checkbox"/> The amount of independent school work required (asynchronous instruction). | <input type="checkbox"/> Need for help with social-emotional concerns. |
| <input type="checkbox"/> The amount of screen time per day. | <input type="checkbox"/> Differing schedules between multiple students in my home. |
| <input type="checkbox"/> Instruction not meeting my student's individualized needs. | <input type="checkbox"/> Accessing ACPS essential services (e.g., meals, technology support) during school or work hours. |
| <input type="checkbox"/> Too many distractions during the school day. | <input type="checkbox"/> Technology-related concerns. |

4. The amount of teacher-led live instruction time within my child's daily schedule is: (Select one option)

- Too much
- Just right
- Not enough

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Technology

5. My child has adequate technology resources to access Virtual PLUS+ instruction. (Select one option)

- Strongly Agree
- Somewhat Agree
- Somewhat Disagree
- Strongly Disagree

NOTE : Answer the below question only if answer to Q#5 is Somewhat Disagree OR Strongly Disagree

6. What technology resources does your child need to be able to better access Virtual PLUS+ instruction? [Check all that apply.]

- Reliable high-speed Internet
- Laptop or tablet
- Help navigating online learning tools (e.g., Zoom, Canvas, Clever)
- Knowing how to get tech support
- Headphones to reduce distractions
- Other (Please specify) _____

7. How is your child primarily accessing the internet? (Select one option)

- Home internet (Comcast, Verizon, etc.)
- Internet Essentials program
- ACPS-provided Kajeet
- Other (Please specify) _____

Communication

8. Please indicate your level of agreement with the following statements.

	Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree
(a) I have received regular and timely messaging about the ACPS Virtual PLUS+ plan.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(b) The information I have received is easy to understand.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(c) I have the information I need to support my child's learning.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(d) ACPS is responsive to my feedback.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9. The amount of information we have received is: (Select one option)

- Too much
- Just right
- Not enough

NOTE : Answer the below question only if answer to Q#9 is Not enough

10. What additional information would be most helpful to your family?

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Overall

11. I am satisfied with the academic support my child is receiving from their school. (Select one option)

- Strongly Agree
- Somewhat Agree
- Somewhat Disagree
- Strongly Disagree

12. I am satisfied with the social and emotional support my child is receiving from their school. (Select one option)

- Strongly Agree
- Somewhat Agree
- Somewhat Disagree
- Strongly Disagree

13. When the school year began, did you need childcare / supervision to support your child's participation in Virtual PLUS+? (Select one option)

- Yes
- No

NOTE : Answer the below question only if answer to Q#13 is Yes

14. Do you still have childcare / supervision needs that have not been met? (Select one option)

- Yes
- No

Likelihood to Return

15. If an option for in-person learning is offered that meets social distancing and social gathering guidelines, including required masks, six feet apart expectations, and new cleaning practices, how likely would you be to send your child to school? (Select one option)

- Very Likely
- Somewhat Likely
- Somewhat Unlikely
- Very Unlikely

16. In returning to in-person learning, ACPS and families must partner to ensure the safety of the entire community. Please select areas in which you would require support from ACPS to allow your child's safe return to school. [Check all that apply.]

- Providing a clean face mask that fits over the mouth and nose daily.
- Taking your child's temperature before sending them to school daily.
- Ensuring social distancing to and from school, such as at the bus stop or walking.
- None of the above. I do not need support in these areas.

17.

In order to adhere to state health orders and social distancing requirements, there will need to be adequate spacing between students on school buses. This will mean a significant reduction in available seats on each bus, limiting the number of students the division can transport daily. We encourage families to provide transportation for their student if possible to limit our school bus ridership.

**Based on the information you have now, if your student returns to their school building later in the fall, what would your current preference be between the following two options?
(Select one option)**

- I prefer to provide my student's transportation.
- I prefer to use the provided ACPS transportation following social distancing guidelines.
- N/A, my student does not qualify for ACPS transportation.

18. Please use this space to share any additional information about how ACPS can best support you during this time.

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Demographic Information

19. What best describes your race/ethnicity? (Select one option)

- American Indian or Alaskan Native
- Asian
- Black or African American
- Hispanic/Latino
- Native Hawaiian or Other Pacific Islander
- White
- Multi-Racial
- Prefer not to answer
- Other (Please specify) _____

20. Is your child in any of the following programs? (Check all that apply.)

- English Language Learning
- Special Education
- Talented and Gifted
- None of the above