

# Hawaii – Parent Survey Engagement Team

April to November 2023



## The task/objectives for the team

- Review current Parent Survey and its Process
  - Design Strategies to improve the survey's return rate
  - · Improve representativeness of respondents
  - · Improve the use of data collected through the parent survey

So that the Hawaii schools can improve parent engagement as measured by the SPP/APR Indicator 8 (Percent of parents with a child receiving special education services who report that schools facilitated parent involvement as a means of improving services and results for children with disabilities.)



#### Parent Survey Engagement Team

Michelle Arakawa – State/MAC **Melissa Cretsinger - Parent Steve Cretsinger - Parent** Patty Dong – State/MAC **Beverly Reidy – PTI (LDAH) Maria Robinson - DES** Mavis Tasaka - Principal **Steven Vanatta – Children's Community Council Jasmine Williams – SEAC/Parent** Jody Yamauchi-Oku – Student Service Coordinator Cesar D'Agord – Facilitator (Sr. Consultant, WestEd)



## Meetings

**Meeting 1 – April 28, 2023** – Introductions and Objectives for the Team: Participants had a chance to discuss all aspects related to the current Parent Survey.

**Meeting 2 – June 30, 2023** – Reviewed of current Hawaii Parent Survey and Review of Parent Surveys from several other states (AS, AZ, CA, CO, DC, and WI): Participants summarized key aspects for a revised survey.

#### **Current Parent Survey**





#### Hawaii Department of Education Parent Survey - Special Education

This is a survey for parents of students receiving special education services. Your responses will help guide efforts to improve services and results for children and families. For each statement below, please select one of the following response choices: very strongly disagree, strongly disagree, disagree, agree, strongly agree, very strongly agree. In responding to each statement, think about your experience and your child's experience with special education over the past year. You may skip any item that you feel does not apply to you or your child. Your responses are confidential and cannot be linked to your child.

	_	_		-		2
Use pendi only. Fill in circle completely: O Schools' Efforts to Partner with Parents 1. I am considered an equal partner with teachers and other professionals in planning	and Disase	Olana	sed at	Very and to bo	and Henory	- Ales
1. I am considered an equal partner with teachers and other professionals in planning my child's program.	0	0	0	0	0	0
<ol><li>In preparation for my child's transition planning meeting I was given information about options my child will have after high school.</li></ol>	0	0	0	0	0	0
<ol><li>At the IEP meeting, we discussed how my child would participate in statewide assessments.</li></ol>	0	0	0	0	0	0
<ol><li>At the IEP meeting, we discussed accommodations and modifications that my child would need.</li></ol>	0	0	0	0	0	0
5. All of my concerns and recommendations were documented on the IEP.	0	0	0	0	0	0
<ol><li>Written justification was given for the extent that my child would not receive services in the regular dassroom.</li></ol>	0	0	0	0	0	0
<ol><li>I was given information about organizations that offer support for parents of students with disabilities.</li></ol>	0	0	0	0	0	0
<ol> <li>I have been asked for my opinion about how well special education services are meeting my child's needs.</li> </ol>	0	0	0	0	0	0
9. My child's evaluation report is written in terms I understand.	0	0	0	0	0	0
0. Written information I receive is written in an understandable way.	0	0	0	0	0	0
1. Teachers are available to speak with me.	0	0	0	0	0	0
2. Teachers treat me as a team member.	0	0	0	0	0	0
Teachers and administrators:						
13 seek out parent input.	0	0	0	0	0	0
<ol><li>show sensitivity to the needs of students with disabilities and their families.</li></ol>	0	0	0	0	0	C
<ol><li>encourage me to participate in the decision-making process.</li></ol>	0	0	0	0	0	C
<ol><li>respect my cultural heritage.</li></ol>	0	0	0	0	0	C
<ol> <li>ensure that I have fully understood the Procedural Safeguards [the rules in federal law that protect the rights of parents].</li> </ol>	0	0	0	0	0	0
Please turn page over ⇔						

Schools' Efforts to Partner with Parents (cont.)	mill Dises	Olisaro	and and	Yers arough his	iongh Pro	ane
18 has a person on staff who is available to answer parents' questions.	0	0	0	0	0	0
19 communicates regularly with me regarding my child's progress on IEP goals.	0	0	0	0	0	0
20 gives me choices with regard to services that address my child's needs.	0	0	0	0	0	0
21 offers parents training about special education issues.	0	0	0	0	0	0
22 offers parents a variety of ways to communicate with teachers.	0	0	0	0	0	0
<ol> <li>gives parents the help they may need to play an active role in their child's education.</li> </ol>	0	0	0	0	0	0
<ol> <li>provides information on agencies that can assist my child in the transition from school.</li> </ol>	0	0	0	0	0	0
25 explains what options parents have if they disagree with a decision of the school.	0	0	0	0	0	0

26. Child's Grade	30. Complex (B	Subble one only)	
	O Farrington	O Walanae	O Honokaa
27. Child's Age in Years	O Kaiser	O Nanakuli	O Kealakehe
	O Kaimuki	O Pearl City	O Kohala
	O Kalani	O Waipahu	O Konawaena
28. Child's Race / Ethnicity (Bubble one only)	McKinley	O Castle	O Baldwin
O Two or more races O American Indian or Alaskan Native	ORoosevelt	O Kahuku	O Kekaulike
O Asian	O Alea	O Kailua	O Maui
O Black or African-American O Hispanic or Latino	O Moanalua	O Kalaheo	O Hana
O Native Hawaiian or Other Pacific Islander	O Radford	O Hilo	O Lahainaluna
O White	O Leilehua	O Laupahoehoe	O Lanai
29. Child's Primary Disability (Butble one only)	O Mililani	O Walakea	O Molokai
O Autism Spectrum Disorder	O Waialua	O Ka'u	<ul> <li>Караа</li> </ul>
O Deaf-Blindness	O Campbell	O Keaau	O Kauai
Deaf     Developmental Delay	Sector Sector		O Minimum
Emotional Disability	O Kapolei	O Pahoa	O Waimea
O Hard of Hearing			

Intellectual Disability
 Multiple Disabilities
 Orthopedic Disability
 Other Health Disability
 Specific Learning Disability
 Speech or Language Disability

O Traumatic Brain Injury

O Visual Disability including Blindness



#### **Recommendations from Team Members**

- Reduce the number of questions (max. of 12 questions)
- Group questions by topic (DC survey format: procedural safeguards, parent involvement and participation, training and information, communication, and satisfaction)
- Suggested questions from surveys from other states (DC, WI, AZ, AS, others)
- Consider using "school" rather than "teacher" or "administrator" in the statements
- Simplify the format
- Yes/No choices instead of gradients of agree and disagree



## Meetings (continued)

**Meeting 3 – July 28, 2023** – The Facilitator presented the survey that was drafted based on input from the team. The team provided further feedback.

**Meeting 4 – August 29, 2023** – The Facilitator presented the final iteration of the survey. Final adjustments were made.



### **Final Recommendations from Participants**

- Minor edits on wording of questions
- N/A, don't know, or unsure
- Back to SD, D, A, SA, and N/A
- Ensure race/ethnicity questions match questions parents use when enrolling their children in schools



### **Draft Survey Based on Recommendations**



#### Hawai`i State Department of Education Parent Involvement Survey – Special Education School Year 2024 - 2025

This is a survey for parents of a child aged 3 -21 years receiving special education services. Your responses will help guide efforts to improve services and results for children and families. Participating in this survey should take approximately 10 minutes. In responding to each statement, think about your experience and your child's experience with special education over the past year. Your responses are confidential and are not linked to you or your child. *If any statement does not apply to you or your or voir foild, indicate it as not applicable (N/A).* 

If you prefer to complete the survey online, please visit <u>https://www.hiparentsurvey.com</u> or you can scan the QR code to access the survey using a mobile device.

	11	Fill in circle completely:	•	
Use pencil only.	6	Incorrect:	ā	Ø

0

			Strongly Agree	Agree	Disagree	Strongly Disagree	N/A
PARENT RIGHTS/ PROCEDURAL SAFEGUARDS	1.	My child's school ensures that I understand special education procedural safeguards (the rules that protect the rights of parents).					
	2.	IEP meetings are held at a mutually agreeable time.					
	3.	I am treated as an equal partner by my child's teachers and other professionals in planning his/her special education program.					
PARENT INVOLVEMENT AND PARTICIPATION	4.	My child's teachers and other professionals encourage me to participate in developing my child's IEP.					
	5.	My ideas and suggestions are considered at my child's IEP meetings.					
	6.	My child's school asks for my opinion about how well my child is doing with their special education services.					
TRAINING AND	7.	My child's school offers information, support, training, and resources that will help me participate fully in my child's IEP meetings.					
	8.	School staff clearly explain when and where my child will receive special education services and support.					
COMMUNICATION	9.	School staff explain the options I have if I disagree with a decision of the IEP team (e.g. talk with the District Educational Specialist, request mediation).					
	10.	My child's school communicates regularly with me about my child's progress on their annual IEP goals.					
SATISFACTION	11.	Overall, my child is learning and progressing in their education during this past year.					

#### The following questions are regarding your child. The US Department of Education requires HIDOE to collect this data for reporting purposes.

12. Are you Hispanic (Ex. Cuban, Mexican, Puerto Rican, Spanish, Other Hispanic?

Yes	No No

#### 13. What is your child's primary race/ethnicity? (Choose one only)

🗌 A - American Indian or Alaska Native	B - Black	C - Chinese
D - Filipino	E - Native Hawaiian	🔲 G - Japanese
🗌 H - Korean	I - Portuguese	🔲 K - Samoan
L - White	<ul> <li>N – Indo-Chínese (Ex. Cambodian, Laotian, Vietnamese)</li> </ul>	<ul> <li>O – Micronesian (Ex. Chuukese, Marshallese, Pohnpeian)</li> </ul>
🗌 P - Tongan	Q – Guamanian/Chamorro	🔲 R – Other Asían
13. What is the student's primary race?	Select only ONE letter from the Race information section and fill in the blank.	
14. What is your child's disability?	(Choose one only)	

Autism	Emotional Disturbance	Orthopedic Impairment	Traumatic Brain Injury
Deaf-Blindness	Hearing Impairment	Other Health Impairment	Visual Impairment
Deafness	Intellectual Disability	Specific Learning Disability	
Developmental Delay	Multiple Disabilities	Speech/Language Impairment	

15. What is your child's grade?

16. What is your child's age?

17. What is the name of the school your child attends?

e.g. Paia Elem, Kalakaua Middle, Honokaa High

18	What district is the school loca	ated in? (If known)		
	□ Central	Hawaii	Honolulu	🗆 Kauai
	Leeward	Maui	Windward	

19. Do you speak English at home?

Yes No

20. If English is not your primary language, does the school provide a language interpreter for your child's IEP meeting, upon your request?

--Thank you for your participation.--



#### **Questions/Comments/Recommendations?**

https://jamboard.google.com/d/12dK9UemfX5LJeQvjoSIDEXDu KzLqWNTMgG9qc74aWHo/edit?usp=sharing



#### **Next Steps**

#### **Getting Ready for Meeting 5**

- Final draft of the survey
- Data use plan
- Strategies for improving survey response rate and representativeness of respondents
- Present the final draft to the Department