

Safe and Civil Schools Related Services and Staff Support Survey

The Association of Washington School Principals and the Washington State Institute for Public Policy, a research branch of the Washington Legislature, are conducting this survey for the OSPI Foundations for Learning: Safe and Civil Schools Project. The purpose of this study is to gather information on the effects of disruptive behavior on student learning. To do this, we request that you complete the following survey. We will provide your school with a summary of the survey results and a literature review of any programs shown to be effective in managing school and classroom disruptions. We appreciate your time and effort in completing this survey. Your responses will be kept anonymous.

Directions

- Use a #2 pencil to completely fill in the appropriate circle O. Do not use checkmarks.
- Please select the yes or no choice that is closest to your point of view for each question.
- For the questions about behaviors during the previous five school days, choose the response that most accurately answers what happened only during those days.
- When you have completed the survey, please return it to the person responsible for its administration.

During the *previous five school days*, have any of the following student behaviors occurred in school locations under your supervision:

1. <i>Disruption</i> : Loud talking, yelling, or inappropriate noises.	<input type="radio"/> No	<input type="radio"/> Yes
2. <i>Verbal intimidation</i> : Teasing, ridiculing, or name-calling.	<input type="radio"/> No	<input type="radio"/> Yes
3. <i>Aggressive verbal intimidation</i> : Threatening or bullying.	<input type="radio"/> No	<input type="radio"/> Yes
4. <i>Passive aggressive behavior</i> : Refusing to cooperate or follow your instructions.	<input type="radio"/> No	<input type="radio"/> Yes
<i>Aggressive physical behavior</i> :		
5. Taking or damaging personal property.	<input type="radio"/> No	<input type="radio"/> Yes
6. Pushing, grabbing, hitting, or kicking someone.	<input type="radio"/> No	<input type="radio"/> Yes
7. Threatening you or someone in your school with a weapon.	<input type="radio"/> No	<input type="radio"/> Yes
8. Sexual harassment of you or someone under your supervision.	<input type="radio"/> No	<input type="radio"/> Yes

9. During the *previous five school days*, how much of your time was spent dealing with disruptive behaviors instead of performing your assigned responsibilities? (*Mark the most appropriate*)

<input type="radio"/> No disruptions occurred	<input type="radio"/> Less than 10%	<input type="radio"/> Between 10% and 25%
<input type="radio"/> Between 25% and 50%	<input type="radio"/> Between 50% and 75%	<input type="radio"/> More than 75%

During the *previous five school days*, how did disruptive behavior affect you personally?

10. Made it hard for me to achieve my objectives.	<input type="radio"/> No	<input type="radio"/> Yes
11. Decreased my desire to continue working in schools.	<input type="radio"/> No	<input type="radio"/> Yes
12. Made me feel I did not have control in my area of responsibility.	<input type="radio"/> No	<input type="radio"/> Yes
13. Made me afraid to come to work.	<input type="radio"/> No	<input type="radio"/> Yes
14. Adversely affected my health.	<input type="radio"/> No	<input type="radio"/> Yes

(Over)

During the *previous five school days*, did you avoid any of the following areas in your school because threatening behaviors happen there?

15. Empty classrooms	<input type="radio"/> No	<input type="radio"/> Yes
16. Library	<input type="radio"/> No	<input type="radio"/> Yes
17. Cafeteria	<input type="radio"/> No	<input type="radio"/> Yes
18. Halls/common areas	<input type="radio"/> No	<input type="radio"/> Yes
19. Playground/sports field	<input type="radio"/> No	<input type="radio"/> Yes
20. Restrooms	<input type="radio"/> No	<input type="radio"/> Yes
21. Gym (PE), locker room	<input type="radio"/> No	<input type="radio"/> Yes
22. Bus, bus area, parking area	<input type="radio"/> No	<input type="radio"/> Yes
23. After school/evening activity area	<input type="radio"/> No	<input type="radio"/> Yes

Please tell us about the discipline practices and training in your school:

24. Do you have a school-wide staff training program on discipline practices?	<input type="radio"/> No	<input type="radio"/> Yes
25. Is there a consistent approach to discipline in your school?	<input type="radio"/> No	<input type="radio"/> Yes
26. Could the effectiveness of your school's discipline practices be improved?	<input type="radio"/> No	<input type="radio"/> Yes
27. Could your school benefit from training on effective discipline practices?	<input type="radio"/> No	<input type="radio"/> Yes
28. Are you responsible for teaching proper school behaviors?	<input type="radio"/> No	<input type="radio"/> Yes
29. Do you discipline students outside your area of responsibility as you see them misbehaving?	<input type="radio"/> No	<input type="radio"/> Yes
30. Do you collaborate with other staff to solve discipline problems?	<input type="radio"/> No	<input type="radio"/> Yes
31. Do you collaborate with a student's teacher to solve discipline problems?	<input type="radio"/> No	<input type="radio"/> Yes
32. Do you collaborate with your administration to solve discipline problems?	<input type="radio"/> No	<input type="radio"/> Yes
33. Are effective school-based resources available to help troubled students?	<input type="radio"/> No	<input type="radio"/> Yes
34. Is disruptive student behavior one of the top three problems in your school?	<input type="radio"/> No	<input type="radio"/> Yes

Please tell us what you know about your school's guidelines and rules for student behavior:

35. Are rules posted in your assigned area?	<input type="radio"/> No	<input type="radio"/> Yes
36. Do you believe your rules could be improved?	<input type="radio"/> No	<input type="radio"/> Yes
37. Are rules reviewed at the start of each term?	<input type="radio"/> No	<input type="radio"/> Yes
38. Are students taught how to follow the rules and behave properly?	<input type="radio"/> No	<input type="radio"/> Yes
39. Are the rules referenced as good or bad behaviors arise?	<input type="radio"/> No	<input type="radio"/> Yes
40. Do you tell students the consequences for following or breaking the rules?	<input type="radio"/> No	<input type="radio"/> Yes
41. Do students tell you the rules are not fair?	<input type="radio"/> No	<input type="radio"/> Yes
42. Do students tell you the consequences are not fair?	<input type="radio"/> No	<input type="radio"/> Yes

Please tell us about yourself and your responsibilities at school:

<i>Please mark the descriptions that best describe your positions or job responsibilities (mark all that apply):</i>					
<input type="radio"/> Playground supervisor	<input type="radio"/> Common area supervisor	<input type="radio"/> School secretary/office personnel	<input type="radio"/> Food service personnel	<input type="radio"/> Classroom teaching assistant	<input type="radio"/> Special program teaching assistant:
<input type="radio"/> Special Ed., Title I, ESL, LAP	<input type="radio"/> Bus driver	<input type="radio"/> Security	<input type="radio"/> Psychologist	<input type="radio"/> Librarian	<input type="radio"/> Therapist (occupational, physical, or speech)
			<input type="radio"/> Custodian/maintenance	<input type="radio"/> Nurse	<input type="radio"/> Counselor, social worker, or prevention intervention specialist
			<input type="radio"/> Other		
<i>Please mark the number of years you have worked in this school:</i>					
<input type="radio"/> 1 year	<input type="radio"/> 2 to 3 years	<input type="radio"/> 4 to 5 years	<input type="radio"/> 6 to 10 years	<input type="radio"/> 11 to 20 years	<input type="radio"/> over 20 years
<i>Please mark your gender:</i> <input type="radio"/> Male <input type="radio"/> Female					

Thank you for completing the survey.