



Texas School System Vaccination Progress Tracking Survey

March 26, 2021



(512) 463-9000

disasterinfo@tea.texas.gov

tea.texas.gov/coronavirus

This weekly survey will be emailed to school systems based upon their response to vaccine access for their school personnel. Once a school system indicates everyone in their school system who wants a vaccine has been provided the opportunity to be vaccinated and indicate they/their partner provider has received all the vaccines needed (if applicable), the school system will no longer receive this weekly progress tracking survey.

Background:

TEA is partnering with the Department of State Health Services (DSHS), the Texas Division of Emergency Management (TDEM), the Texas Health and Human Services Commission (HHSC), the Texas Workforce Commissioner (TWC), and the Texas Private School Association (TPSA) to ensure all school systems have the opportunity to access a COVID-19 vaccine.

The purpose of this survey is to track the weekly progress of school systems towards school personnel access to vaccinations. This survey is due by 5 p.m. every Monday.

Questions:

- For vaccine provider-related questions, email COVID19VacEnroll@dshs.texas.gov or call 877-835-7750.
For questions related to this survey, email disasterinfo@tea.texas.gov.
- Please include "Vaccine Survey" in the subject line.

Survey Components:

All survey fields are mandatory in order to move forward in the survey.

School System Identifying Information

SCHOOL SYSTEM TYPE

- ISD/Charter School System
- Private School

PLEASE SELECT YOUR REGION AND LEA FROM THE LIST BELOW

This only appears if you selected ISD/Charter School System from the School System Type.

- Once you select your assigned Education Service Center (ESC), the associated LEA list will populate.
- If your ISD/Charter school does not appear, please email disasterinfo@tea.texas.gov with the subject line "Vaccine Survey."

PRIVATE SCHOOL SYSTEM NAME

This only appears if you selected Private School from the School System Type.

- Include the full name of your private school (ex. Saint James Episcopal School).

TEXAS COUNTY

- Select the county where your school system resides.
- If your school system is in multiple counties or a multi-charter district, please enter the county of your central office.

SUBMITTER'S NAME

SUBMITTER'S ROLE/TITLE

SUBMITTER'S EMAIL ADDRESS

- This is the individual that will receive this survey going forward for your school system.

Progress Tracking Questions

OVERALL, APPROXIMATELY WHAT PORTION OF YOUR SCHOOL PERSONNEL HAVE BEEN VACCINATED OR HAD THE OPPORTUNITY TO BE VACCINATED AT THE TIME OF THIS SUBMISSION?

- You will be given a range of 5 options.
 - 0%
 - 25%
 - 50%
 - More than 75%
 - Everyone in our school system who want a vaccine has been provided the opportunity to be vaccinated
- This is an estimate based on the best of your abilities to determine a number.
- We are trying to capture a high-level overview of the progress of vaccination/access to vaccines of school personnel across the state, not necessarily due to your vaccination plan(s).

Note: If you select, "Everyone in our school system who want a vaccine has been provided the opportunity to be vaccinated" and you indicate you/your partner provider has received all the vaccines needed (if applicable), you will no longer receive this weekly progress tracking survey going forward.

WHAT PLAN(S) DID OR DO YOU HAVE IN PLACE TO VACCINATE TEACHERS WHO REMAIN UNVACCINATED?

- Select yes/no next to the strategies that your school system is using to ensure your school personnel has access to vaccinations.

- We are a COVID-19 Vaccine Provider who will be administering vaccines to our school personnel
- We have applied to be a COVID-19 Vaccine Provider to administer vaccines to our school personnel
- We have partnerships with health care providers and/or school system providers to administer vaccines to our school personnel
- We have asked our teachers to visit local pharmacies
- We do not have a plan in place

Note: If you select “we do not have a plan in place”, the survey will close and you will be contacted by your local ESC for support.

AS AN APPROVED COVID-19 VACCINE PROVIDER, I AM WILLING TO HELP LOCAL SCHOOL SYSTEMS AROUND ME WITH THEIR VACCINATION ADMINISTRATION NEEDS IF NECESSARY

This only appears if you selected your school system is a COVID-19 Vaccine Provider.

- If you are a school system that has is an approved COVID-19 Vaccine Provider and you are willing to help local school systems in your surrounding area with their vaccination efforts and want to offer your support, please check yes.
- TEA will review the data and make connections across school systems if necessary.

OUR SCHOOL SYSTEM AND/OR PARTNER PROVIDER(S) HAS RECEIVED ALL THE VACCINES WE NEED TO EXECUTE THIS PLAN AND NO ADDITIONAL REQUESTS FOR VACCINE ALLOCATION SHOULD BE SUBMITTED FROM OUR SCHOOL OR FROM OUR PARTNER PROVIDERS

This only appears if you selected your school system is a COVID-19 Vaccine Provider or you have partnered with a COVID-19 Vaccine Provider.

- TEA and DSHS will review this data, along with the data from the Vaccine Provider Allocation Request Form, to better understand where allocation needs are not being met.
- If you do not know the answer to this question, please select No.

HOW MANY VACCINE PROVIDERS IS YOUR SCHOOL SYSTEM PARTNERING WITH AT THIS TIME

This only appears if you selected you have partnered with a COVID-19 Vaccine Provider to administer vaccines to your school personnel.

- This drop down allows you to select up to 5 providers. Please include only current partnerships and not ones that you are considering or have not been finalized yet.
- If you have more than 5 providers, please email disasterinfo@tea.texas.gov with the subject line “Vaccine Survey” and list your additional providers.
- Based on the number you select; the appropriate number of additional boxes will appear to provide each provider's information.

VACCINE PROVIDER NAME:
VAOS PROVIDER ID:
ADDRESS:
CITY:
ZIP CODE:

Note: Provider information is now optional to provide. However, if you start to add provider information, you will be prompted to fill out all the fields associated with the provider (VAOS and address). If you do not know all of the information and want to move forward, you can select “move forward” and that will allow you to move forward with partial completion of this section.

If possible, we encourage you to provide this information if you did not previously provide it in a prior survey or if you have new providers you have partnered with the last week.

- The VAOS provider number field is set to be a numerical 6-digit entry. In order to obtain it, you will need to contact your partner provider(s) and obtain their 6-digit numerical pin number (example: 999988 or 301111) they use for the Vaccine Allocation & Ordering System (VAOS). This number is tied to a specific location since many major providers have numerous vaccine hubs.
- The Provider PIN number can be found on the provider registration website: enrolltexas1Z.dshs.texas.gov.

End of Survey

↳ *Review: Prior to hitting “Submit,” you have the option to “Go Back” and verify/edit your responses*
 ↳ *Submit: you will not receive an email copy of your submission, however you will have the option to print/download your submission. If you have made an error, please contact disasterinfo@tea.texas.gov.*