Logging Service Records in PSSP – School Psychologist

All logged services are due the 15th of the following month (eg. September due October 15th).

CASELOAD: Even if only temporarily seeing students for evals and IEPs, your caseload should be current. Add and remove students as necessary. **NOTE:** If removing student(s), do this only after all services have been logged.

From **PSSP homepage**, scroll down to **"My Students",** click **Edit** link to the right. Click **Add Students to…** tab and type last name, first name and hit Search. Click box to left of ID, then click **Add Students to** … tab.

How do I know who is eligible?

PSSP homepage report titled **[WISD] My Medicaid Caseload** (right column), automatically lists who on your caseload is Medicaid eligible. ***These are the students for whom you log evaluations and IEP/IFSP participation. Also log therapy and counseling services, if applicable, including a monthly summary. (no summaries needed for evals and IEPs)

Logging Services:

- Scroll down to your caseload. Click **Service Calendar icon** to the left of student name.
- Select the Calendar Date of your service and right click on the date; then click **Record Past Service**.
- Fill in field titled **Service:** School Psychologist
- **For Service Type:** Think of the intent of your service. If it's initial cert. for sp.ed., re-cert., a change in cert., use **IDEA Evals**. If the intent is to de-certify or you're monitoring progress, use **Other Evals**, not related to IEP.
- **Time and Duration:** Enter the time of your service and how many minutes it lasted.
- **Progress Report**: Select from the dropdown the student's overall progress. If it is not applicable to the service you are logging, select NA for **Not Applicable**.
- Provider Notes: Include enough detail to allow reconstruction of what transpired for each service you log. (who was present (by title, not name), what was done, how did the student respond, if applicable, and next steps)
- **Areas Covered:** Select one area or select "Other". Please specify what "Other" is in the field to the right.
- Check the box titled: **Has this service been completed?** and click **Save**.

Which Date of Service do I Use?
IDEA Evals: *use the date of the IEP*. You'll have 2 service records on the same date, one for eval mtgs/testing/reports, and one for the IEP. Use the IEP time for the IEP, and choose a different time for the evaluation.
OTHER Evals: *use the date the eval is completed.*
REEDS: *use the date of the IEP*. You'll have 2 service records on same date, one for REED mtgs/reviews/testing, and one for the IEP. Use the IEP time for the IEP, and choose a different time for the REED.

When Logging Therapy or Counseling Services: Log a Monthly Progress Summary as well.
We recommend using the last school day of the month your services were provided.

- Repeat the first 3 steps from above. **NOTE:** For **Service Type**, you **must** select **Monthly Progress Summary**.
- **Time**. It should be a time when school is in session. **Duration** is not required.
- **Progress Report:** Select from the dropdown how the student did overall during the month.
- Provider Note: Summarize how the student did overall during the month. Include evaluation of progress, changes in medical and mental status, and any changes in treatment with rationale for change.
- **Areas Covered/Assessed:** Select "Other". In the 'Specify' field, write Monthly Summary.
- Check the box titled: **Has this service been completed?** and click **Save**.

Medicaid SSP Dept: Anisa Isap ◆ aisap@washtenawisd.org ◆ 734-994-8100, x1556

SCHOOL PSYCHOLOGIST TIP SHEET

Provider Notes must include enough detail to allow reconstruction of what transpired for each service.

All logged services are due the 15th of the following month (eg. September due October 15th)

Service Type	Service Type Description
Care Management Services Behavioral Health **[99484]**	Used for reporting work on Functional Behavior Assessments and Positive Behavior Support Plans; including time spent planning/development without the student, consulting with outside agencies or other team members, POC revisions
Crisis Intervention Service- per 15 minutes **[H2011]**	Crisis Intervention Mental Health Services, per 15 minutes, are unscheduled activities performed for resolving an immediate crisis. Activities include crisis response, assessment, referral, and direct therapy.
Family Psychotherapy (conjoint) w/o student present; must be in IEP/IFSP **[90846]**	Family psychotherapy (conjoint psychotherapy) <u>without student</u> present. **Limit one session per day**
Family Psychotherapy (conjoint) with student **[90847]**	Family psychotherapy (conjoint psychotherapy) <u>with student</u> present. **Limit one session per day**
Group Therapy, 2 - 8 students **[90853]**	Two to eight students present in therapy group. **Limit one session per day**
IDEA Evaluations (Initial, Recertification, or Change in Certification) Use date of IEP/IFSP for Date of Service	
IDEA Eval: Brief Emotional/Behavioral Assessment for IDEA **[96127 HT]**	Brief emotional/behavior assessment (e.g. depression inventory, attention-deficit/hyperactivity disorder (ADHD) scale, with scoring and documentation, per standardized instrument
IDEA Eval: Mental Health Assessment, Initial/Reeval **[H0031 HT]**	Evaluation of the student's overall mental health functioning; used for initial and recertification of special education eligibility
IDEA Eval: Developmental Testing, 31 to 76 minutes **[96112 HT]**	Developmental testing (including assessment of fine and/or gross motor, language, cognitive level, social, memory, and/or executive functions by standardized developmental instruments when performed) with interpretation and report.
IDEA Eval: Developmental Testing, 77+ minutes **[96112 HT : 96113 HT]**	Same as above with additional time. Select the above procedure until you reach 76 minutes. Select this procedure to record time of testing at 77 minutes and beyond. These are recorded on the same date of service – the date the student becomes certified for special education
IDEA Eval: Neuropsych Testing 31 to 91 minutes **[96132 HT]**	Neuropsychological testing evaluation services including integration of student data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report and interactive feedback to the student, family member(s) or caregiver(s) when performed.
IDEA Eval: Neuropsych Testing 92+ minutes **[96132 HT; 96133 HT]**	Same as above with additional time. Select the above procedure until you reach 91 minutes. Select this procedure to record time of testing at 92 minutes and beyond. These are recorded on the same date of service – the date the student becomes certified for special education
IDEA Eval: Psychological or neuropsychological test administration and scoring 16 to 46 minutes [**96136 HT**]	Psychological or neuropsychological test administration and scoring (two or more tests must be administered by any method – paper, verbal, or electronic)

IDEA Eval: Psychological or neuropsychological test administration and scoring 47+ minutes [**96136 HT: 96137 HT**]	Psychological or neuropsychological test administration and scoring (two or more tests must be administered by any method – paper, verbal, or electronic)
IDEA Eval: Psychological testing, 31 to 91 minutes [**96130 HT**]	Psychological testing evaluation including integration of student data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report and interactive feedback to the student, family member(s) or caregiver(s) when performed.
IDEA Eval: Psychological testing, 92+ minutes [**96130 HT: 96131 HT**]	Psychological testing evaluation including integration of student data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report and interactive feedback to the student, family member(s) or caregiver(s) when performed.
IEP/IFSP Participation	
IEP/IFSP Participation: Brief Emotional/Behavioral Assessment [**96127 TM**]	Development, review, and revision of IEP/IFSP treatment plan. This includes attendance at the IEP/IFSP meeting. Present results of Brief Emotional/Behavioral Assessment.
IEP/IFSP Participation: Developmental Screen w/score [**96110 TM**]	Development, review, and revision of IEP/IFSP treatment plan. This includes attendance at the IEP/IFSP meeting. Present results of Developmental Screen.
IEP/IFSP Participation: Mental Health Assessment [**H0031 TM**]	Development, review, and revision of IEP/IFSP treatment plan. This includes attendance at the IEP/IFSP meeting. Present results of Mental Health Assessment.
Service Type	**Service Type Description**
Individual Behavioral Health Counseling [**H0004**]	Behavioral counseling **per 15 minutes**; addresses mental health and substance use disorders
Monthly Progress Summary	Monthly Progress Summaries are REQUIRED for all months in which therapy services are reported and should include evaluation of progress, changes in medical and mental status, and any changes in treatment with rationale for change. Summaries must be dated in the month the services were provided. *Using the last school day of the month is recommended.*
Neurobehavioral Status Exam, IDEA [**96116 HT**]	Neurobehavioral status exam (clinical assessment of thinking, reasoning, and judgment, e.g. acquired knowledge, attention, language, memory, planning and problem solving, and visual spatial abilities) per hour of the psychologist's time both face-to face time with the student, and time interpreting test results and preparing the report.
Neurobehavioral Status Exam – Not related to MET or IEP/IFSP [**96116**]	Neurobehavioral status exam (clinical assessment of thinking, reasoning, and judgment, e.g. acquired knowledge, attention, language, memory, planning and problem solving, and visual spatial abilities) per hour of the psychologist's time both face-toface time with the student, and time interpreting test results and preparing the report. Use when testing for student status/progress, decertification, other.

Other Evaluations – Not for Certification. Date of service is date the evaluation is completed.	
Other Eval: Brief Emotional/Behavioral Assessment, Not for IDEA **[96127]**	Brief emotional/behavior assessment (e.g. depression inventory, attention-deficit/hyperactivity disorder (ADHD) scale, with scoring and documentation, per standardized instrument; not used for special education certification
Other Eval: Mental Health Assessment, Not for IDEA **[H0031]**	Mental health assessment which is not used for special education certification
Other Eval: Developmental Testing, 31 to 76 minutes – Not for IDEA **[96112]**	Developmental testing (including assessment of fine and/or gross motor, language, cognitive level, social, memory, and/or executive functions by standardized developmental instruments when performed); not used for special education certification
Other Eval: Developmental Testing, 77+ minutes – Not for IDEA **[96112 : 96113]**	Same as above with additional time. Select the above procedure until you reach 76 minutes. Select this procedure to record time of testing at 77 minutes and beyond. These are recorded on the same date of service – the date you complete the evaluation
Other Eval: Neuropsych Testing 31 to 91 minutes, Not for IDEA **[96132]**	Neuropsychological testing evaluation services including integration of student data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report and interactive feedback to the student, family member(s) or caregiver(s) when performed. Use when testing for student status/progress, decertification, other.
Other Eval: Neuropsych Testing 92+ minutes, Not for IDEA **[96132: 96133]**	Neuropsychological testing evaluation services including integration of student data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report and interactive feedback to the student, family member(s) or caregiver(s) when performed. Use when testing for student status/progress, decertification, other.
Other Eval: Psychological or neuropsychological test administration and scoring 16 to 46 minutes, Not for IDEA **[96136]**	Psychological or neuropsychological test administration and scoring (two or more tests must be administered by any method – paper, verbal, or electronic). Use when testing for student status/progress, decertification, other.
Other Eval: Psychological or neuropsychological test administration and scoring 47+ minutes, Not for IDEA **[96136: 96137]**	Psychological or neuropsychological test administration and scoring (two or more tests must be administered by any method – paper, verbal, or electronic). Use when testing for student status/progress, decertification, other.
Other Eval: Psychological testing evaluation 31 to 91 minutes, Not for IDEA [**96130**]	Psychological testing evaluation including integration of student data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report and interactive feedback to the student, family member(s) or caregiver(s) when performed. Use when testing for student status/progress, decertification, other.
Other Eval: Psychological testing evaluation 92+ minutes, Not for IDEA **[96130; 96131]**	Psychological testing evaluation including integration of student data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report and interactive feedback to the student, family member(s) or caregiver(s) when performed. Use when testing for student status/progress, decertification, other.

Psychotherapy	
Psychotherapy, 16 to 37 minutes with student and/or family member **[90832]**	Treatment of a mental or emotional disorder with student and/or family (as long as student is present for part of the session)
Psychotherapy, 38 to 52 minutes with student and/or family member **[90834]**	Treatment of a mental or emotional disorder with student and/or family (as long as student is present for part of the session)
Psychotherapy, Interactive Complexity, 16 to 37 minutes w/student and/or family **[90785: 90832]**	Interactive complexity is used in conjunction with psychotherapy when factors complicate the delivery of service. Common issues that exist: 1. Maladaptive Communication (i.e., high anxiety, reactivity or disagreement) 2. Emotional or behavioral conditions inhibiting implementation of treatment plan 3. Mandated reporting, such as in situations of abuse or neglect 4. Use of play equipment devices or an interpreter due to lack of fluency or undeveloped verbal skills
Psychotherapy, Interactive Complexity, 38 to 52 minutes w/student and/or family **[90785: 90834]**	Interactive complexity is used in conjunction with psychotherapy when factors complicate the delivery of service. Same as above with a longer session.
REED	
REED – Neurobehavioral Status Exam **[96116 TL]**	Participation in the Review of Existing Evaluation Data (REED). Use the date of the IEP as your service date. Attendance is not necessary. Your written report is considered participation.
REED – Psych/SW Mental Health Assessment **[H0031 TL]**	Participation in the Review of Existing Evaluation Data (REED). Use the date of the IEP as your service date. Attendance is not necessary. Your written report is considered participation.
REED – Developmental Testing, 31 to 76 minutes **[96112 TL]**	Participation in the Review of Existing Evaluation Data (REED). Use the date of the IEP as your service date. Attendance is not necessary. Your written report is considered participation.
REED – Developmental Testing, 77+ minutes **[96112 TL; 96113 TL]**	Participation in the Review of Existing Evaluation Data (REED). Use the date of the IEP as your service date. Attendance is not necessary. Your written report is considered participation.
REED: Psychological or neuropsychological test administration and scoring 16 to 46 minutes **[96136 TL]**	Participation in the Review of Existing Evaluation Data (REED). Use the date of the IEP as your service date. Attendance is not necessary. Your written report is considered participation.
REED: Psychological or neuropsychological test administration and scoring 47+ minutes **[96136 TL:96137 TL]**	Participation in the Review of Existing Evaluation Data (REED). Use the date of the IEP as your service date. Attendance is not necessary. Your written report is considered participation.
REED: Psychological testing evaluation 31 to 91 minutes **[96130 TL]**	Participation in the Review of Existing Evaluation Data (REED). Use the date of the IEP as your service date. Attendance is not necessary. Your written report is considered participation.
REED: Psychological testing evaluation 92+ minutes **[96130 TL: 96131 TL]**	Participation in the Review of Existing Evaluation Data (REED). Use the date of the IEP as your service date. Attendance is not necessary. Your written report is considered participation.

Non-Billable Service Types – Use for record keeping purposes only	
Consultation - *Consult services are not separately reimbursable. If you are providing consult services, use the service type Consultation to document the service.*	
Communication	Provider Absent
No School Day	Provider Not Available
Other	Student Absent
	Student not Available

Telepractice	
Ten (10) telepractice codes available for virtual (visual/audio) services.	

General Service Information
Developmental testing is medically related testing (not performed for educational purposes) provided to determine if motor, speech, language and/or psychological problems exist, or to detect the presence of any developmental delays. Testing is accomplished by the combination of several testing procedures and includes the evaluation of the student's history and observation.

- Whenever possible, and when age-appropriate, standardized objective measurements are to be used (e.g. Denver II) for students under the age of six. Administering the tests must generate material that is formulated into a report.
- Developmental testing done for educational purposes cannot be billed to Medicaid.

Group therapy must be provided in groups of 2-8 students.
If the group is larger than 8, select **"Other"** to document the service.

Therapy in the classroom is a billable service …

- when there is separation from an on-going classroom lesson; e.g., you take a student or a small group of students to the back of the classroom or out into the hall, etc.
- when the student's focus is on therapist, not the classroom teacher.

It is not a billable service if therapy is provided as part of a regular classroom activity
or if you are assisting student(s) with a lesson in session.

If you have any questions, please contact the Medicaid SSP Department
Anisa Isap - aisap@washtenawisd.org - 734-994-8100, x1556

School Psychologist: Service Record Examples			
Service Type	**Service Date**	**Duration**	**Provider Notes**
IEP/IFSP Participation: Mental Health Assessment [H0031 TM]	10/17/2022	60	Attended eligibility recommendation and IFSP meeting in the home via zoom, both parents present, and WISD OT and SSW. Presented evaluation results. Provided internet resources related to ASD for families via email.
IDEA Eval: Mental Health Assessment, Initial/Reeval [H0031 HT]	10/17/2022 *(use date of IFSP meeting)*	180	9/12/2022 Home visit play observation with mother and child present. Communicates using single words mostly labels, ABC's, shapes, colors, counts. Seems to be a quick learner. PICA reported (paper), limited understanding of everyday dangers. Bites objects & people, flaps hands, focused on parts of objects, difficulty with transitions. Parent concerns align with observation. 9/22/2022 Completed the Autism Diagnostic Observation Schedule (ADOS-2), Toddler Module with parents present at WISD playroom at Chapelle School. Scoring/range of concern and behavior observations documented in eligibility recommendation and IFSP.
IEP/IFSP Participation: Mental Health Assessment [H0031 TM]	10/11/2022	60	Attended special education eligibility and IFSP meeting via zoom. Father present as well as WISD staff. Provided description of evaluation results, discussed eligibility criteria, and contributed to development of IFSP goals.
IDEA Eval: Mental Health Assessment, Initial/Reeval [H0031 HT]	10/11/2022 *(use date of IFSP meeting)*	150	9/29/2022 Home visit for behavior observation, child and parents present. WISD social worker completed developmental history interview. 10/4/2022 Administered Autism Diagnostic Observation Schedule (ADOS-2) with mother, father, and WISD social worker present. Completed at WISD playroom at Westerman Preschool Ann Arbor. Scoring and report write-up.

Logging a Direct Service

Service Record

Student   Sample, A

Staff   Sample, B

Service Date Time   11/15/2022 📅   11:30 🕐

Duration Minutes   20

Progress Report   Slight Progress ▾

In your professional opinion, select the progress that fits the service you are providing. If it is "not applicable," choose it from the drop down.

Provider Notes   This serves as your service note for logging direct services (individual and group therapy).

Provider notes must contain enough detail to be able to reconstruct what transpired during your service, e.g. who was present, what was done, next steps. A couple sentences with good details is all you need.

Service   School Psychologist ▾

Service Type   Individual Behavioral Health Cou

Select the service type that best fits what you are seeing the student for.

Group Size   1

Areas Covered/Assessed:

Counseling ▾   (If Other Specify): _____

(none) ▾   (If Other Specify): _____

(none) ▾   (If Other Specify): _____

Areas covered: select one item from the drop down. If nothing fits what you did, selecting "Other" is fine. However, be sure to fill in the field to the right: (If Other Specify)... as in what does "other" mean to you.

Has this service been completed? ☑   Check this box when you are done.

Lastly, click save.

[Save]   [Cancel]

A warning will pop up. It means you can edit any service records you have created if it has not been submitted for billing. If it has already been submitted, and you need to change/correct something, reach out to the ISD Medicaid Department for assistance.

Logging Evaluations

Service Record

Student   Sample, A

Staff   Sample, B

Service Date Time   10/26/2022   📅   11:30   🕐   **Date of service is the date of the IEP for IDEA Evals**

Duration Minutes   60

Service   School Psychologist

Service Type   IDEA Eval: Mental Health Assess

Group Size   1

Progress Report   Not applicable ⌄

In your professional opinion, select the progress that fits the service you are providing. If it is "not applicable," choose it from the drop down.

Provider Notes

9/12/2022 -Home visit play observation w/ mother and child present. Communicates using single words mostly labels, ABC's, shapes, colors, counts. PICA reported (paper), limited understanding of everyday dangers. Bites objects & people, flaps hands, focused on parts of objects, difficulty with transitions.
9/22/2022- Completed the Autism Diagnostic Observation Schedule (ADOS-2), Toddler Module with parents present. Scoring/range of concern and behavior observations documented in eligibility recommendation and IFSP.

State which evaluation(s) you performed and how the student responded. A sentence or two with details is sufficient.

Areas Covered/Assessed:

Testing/Evaluation ⌄   (If Other Specify): [   ]   Areas covered: select Testing/Evaluation

(none) ⌄   (If Other Specify): [   ]

(none) ⌄   (If Other Specify): [   ]

Has this service been completed? ☑   Check this box when you are done.

[Save]   [Cancel]

Lastly, click save.

A warning will pop up. It means you can edit any service records you have created if it has not been submitted for billing. If it has already been submitted, and you need to change/correct something, reach out to the ISD Medicaid Department for assistance.

Logging IEP Meetings

Service Record

Student	Sample, A	**Service**	School Psychologist
Staff	Sample, B	**Service Type**	IEP/IFSP Participation: Mental H
Service Date Time	10/26/2022 📅 11:30 🕐	**Group Size**	1

Date of service is the date of the IFSP/IEP.

Duration Minutes 60

Progress Report Not applicable ⌄

In your professional opinion, select the progress that fits the service you are providing. If it is "not applicable," choose it from the drop down.

Provider Notes

Mom, SLP, SW, and Psychologist attended IFSP and eligibility report meeting via Zoom. The team went over the results and talked about the different eligibilities. At this time, the student meets criteria for ECDD but the team would like to consider re-evaluating him in the future due to the soft red flags that were identified but could not be definitively be attributed to ASD. Next steps include Mom and PSP setting up a time to start meeting regularly.

State what your particular role and/or tasks were for this IFSP/IEP, What did you discuss/advise at this meeting? Plan going forward? Does not need to be lengthy, 2-3 sentences with detail.
Writing "IEP Meeting" is insufficient and an audit risk.

Areas Covered/Assessed:

IEP Development/Review ⌄   (If Other Specify): [   ]   Areas covered: select IEP Development/Review

(none) ⌄   (If Other Specify): [   ]

(none) ⌄   (If Other Specify): [   ]

Has this service been completed? ☑   Check this box when you are done.

Lastly, click save.

[Save] [Cancel]

A warning will pop up. It means you can edit any service records you have created if it has not been submitted for billing. If it has already been submitted, and you need to change/correct something, reach out to the ISD Medicaid Department for assistance.

Random Moment Time Studies - a Guideline for Direct Service Providers

When chosen, you will receive an email from miaop@pcgus.com that you have been randomly selected to complete a web-based random moment time study. The time study gathers information on the activities that school staff are performing and classifies these activities based on whether they are educational or related to the delivery of designated health services that could be federally matched by Medicaid.

It is important that the person who reviews and assigns a code to your answers understands your activity. Please follow these guidelines: Use medical terms, when applicable, to describe activities which are health related in nature.
  Using detail and providing thorough responses will help to avoid follow-up questions.
Best Practice: Respond the same day, or w/in 24 hrs, while information for that moment in time is fresh in your mind.

Question 1- Who was with you?

Too Vague	Detailed Response
A student	A student who is severely, multiply impaired
A parent	A parent of a student with autism
A teacher	The SXI classroom teacher
A principal and staff	The principal of our center program for special ed. students, along with the OT and PT and Social Worker

Question 2 – What were you doing?

Too Vague	Detailed Response
Seeing a student	Providing individual therapy to a student. We worked on her goal of answering simple WH questions with decreasing cues.
Compiling Data	Compiling medical evaluations and assessments for an upcoming IEP
Looking at records … or Paperwork	Reviewing a student's history and medical records to prepare for an IEP… or … Documenting a student's progress on IEP goals

Question 3- Why were you doing this activity

Too Vague	Detailed Response
Planning	We are holding an IEP. Our team is recommending a change in certification from speech impairment to autism spectrum disorder. I will be presenting evaluation results.
Per IEP goals	The student is non-verbal and needs support for effective communication during her activities of daily living due to multiple impairments
Student needed assistance	Student was having difficulty breathing, probably due to seasonal allergies … or … Student needs help with actuation due to limited hand strength

Question 4 - Is the service you provided part of the child's medical plan of care or for which medical necessity has been determined? Options: Pick One

- Yes – IEP/IFSP
- Yes – Medical Plan of Care other than an IEP/IFSP (i.e. 504 plan, student health plan, nursing plan, physician's order, crisis intervention services)
- Medical necessity established in other method
- No, or N/A

Random Moment Time Study AT • A • GLANCE

Frequently Asked Questions: RMTS

What is the Random Moment Time Study (RMTS)?
The RMTS is the federally accepted method of documenting the amount of staff time spent on direct service and administrative outreach activities.

What is the purpose of the RMTS?
The RMTS is a program requirement that helps schools receive federal reimbursement for time spent on allowable related activities.

What is my role in the RMTS?
Your role is to respond to all moments you have been selected for in a timely manner.

How did I get selected to complete an RMTS survey?
Your district's RMTS coordinator identified you as a person who performs activities related to Medicaid and health-related services as part of your job.

How many RMTS surveys will I get?
It varies, but people typically receive 0-5 surveys per quarter.

How long does it take to complete an RMTS survey?
The survey is five questions and can usually be completed in less than five minutes.

How should I respond to the RMTS survey questions?

- **Provide truthful and thorough responses. There are no wrong answers, but remember to answer completely and accurately. Do not include student names.**

- **The survey is asking about <u>one minute in time</u>. When answering your RMTS survey, provide specific information about that sixty second period.**

Tips for specific situations:

IF YOU WERE...	TELL US...
In an IEP meeting	What was the single topic of discussion at your assigned RMTS time?
Conducting an assessment	What type of assessment were you conducting?
Discussing a student	What was the single topic of discussion at your assigned RMTS time?
On a prep period	What were you preparing at the time of your moment?
Completing an IEP	What specific part of the IEP was being worked on at the time of your moment?
Working on an IEP goal	What specific goal was being worked on at the time of your moment?
Working on email	What was the content of the specific email you were reading or writing?
Driving to next location	What was the first task completed upon arriving at your next location?
Completing multiple tasks	What one specific task was being completed at the exact time of your moment?
At a conference/training/PD	What was the topic of discussion at the time of your moment?

Final Tips:

- When responding to the "why" question, think about the intended outcome of the activity you were doing.
- You should not drop everything to complete your RMTS survey. However, you should complete it as soon as possible after the moment passes. Ideally, complete the RMTS survey before leaving work for the day.
- If you are absent, not scheduled, or leaving work before your moment occurs, complete it the next day.
- If you are not working with a student at the time of your moment, that is fine. You should still complete the moment and respond with the activity you were doing at that date and time.