

Evaluation Standards for School Nurses per Massachusetts DESE Frameworks

1. Curriculum, Planning and Assessment

A. Curriculum and Planning

1A1 Professional Knowledge

(Please note that some of this evidence can also be listed under Section IV Professional Culture)

1. List of educational programs attended-certificates, PDP's, CEU's
2. American Sign Language
3. Retell Classes
4. Co-authored Field Trip Policy
5. Taught Flu Prevention Classes to grades 7 & 8

1A2 Child and Adolescent Development

(Pretty much anything and everything you do should be geared to the student's developmental level, so there should be a multitude of evidence in this category)

1. Developed "self help/serve" station in clinic
2. Set up relaxation room
3. Coordinated Teen D.R.I.V.E. Program at NHS

1A3 Plan Development

1. Devised Headache Assessment for all students in grades 9-12
2. Developed Evacuation Plan for a mobility impaired student with NFD

1A4 Well-Structured Lesson Plans

1. Taught third graders class on the importance of breakfast
2. Presented at PTO meeting- Lice Prevention and Interventions

B. Assessment

1B1 Variety of Assessment Methods

1. Set up relaxation room after noting an increase in student visits with anxiety
2. Developed assessment tool to be used for nonverbal students

1B2 Adjustment to Practice

1. Re-arranged when student came to test BG Level
2. Re-educated staff about not serving food in the classroom after student was exposed to an offending allergen. Worked with principal for stricter compliance.
3. Stealined Sam's placement of classes to conserve his strength as is health (and energy) is deteriorating

C. Analysis Indicator

1C1 Analysis and Conclusions

1. Noticed an increase in students who were forgetting "snack" obtained funding from PTO to purchase snacks, and instituted the "Three Strike Rule"
2. Monitor student attendance and followed up with the three students that had chronic absentee issues.

1C2 Sharing Conclusions with Colleagues

1. Developed letter - How to Stay Healthy and Avoid the "GI Bug"- sent home when two of more classes have a student/staff member out with those type of symptoms
2. Discuss with Teacher?team when students have failed vision/hearing screening to see if this has impacted their classroom performance

1C3 Sharing Conclusions with Students and Families

1. 100% compliance with vision/hearing screen rescreens, and referrals
2. Letter sent home about lice in the classroom and links to video

II. Teaching All Students

A. Instructional Practices

2A1-Quality and Effort of Work

1. Interviewed by students for video, "The Importance of Sleep"
2. Lunch Group- for students interested in nutrition classes

2A2 Student Engagement

1. Development of "IPHONE" bulletin board about headaches
2. Use of Glogerm in the Handwashing Class

2A3 Meeting Diverse Needs

1. Developed assessment tool for nonverbal students
2. Working on Resource Manual to support LGBTQ students

B. Learning Environment

2B1. Safe Learning Environment

1. Clinic is clean, neat, organized with privacy screens used prn
2. Safe Zone stickers and Diversity posters are on display in clinic

2B2 Collaborative Learning Environment

1. Lunch Bunch with students with LTFA
2. Recruited students to be on SHAC

2B3 Student Motivation

1. Developed Junior MRC with High School Students
2. Allow student "helper" to fill ice bags/supplies
3. Director of Special Olympics, recruited students for multiple roles

C. Cultural Proficiency

2C1 Respects Differences

1. Student is allowed private space to pray for symptom relief
2. Transgender students welcomed to change and use clinic bathroom

2C2 Maintains Respectful Environment

1. Phone calls and conversations are conducted in private
2. Developed signal/plan with student who is anxious and uses the clinic to manage their symptoms

D. Expectations

2D1 Clear Expectations

1. Clinic rules are posted and enforced
2. Handwashing Signs are strategically placed in bathroom

2D2 High Expectations

1. Have LTFA lunch group, models healthy food choices
2. Written instructions and pictorial instructions are at "self-serve" station

2D3 Access to Knowledge

1. Co-authored Field Trip Policy, so that all students can attend field trips
2. Developed teaching Modules for Staff on T1 Diabetes

III Family and Community Engagement

A. Engagement

3A1-Parent/Family Engagement

1. Developed brochure about health services at my school
2. Attended and Presented on Lice at the October PTO meeting

B. Collaboration

3B1- Learning Expectations

1. Post dates and procedure for vision, hearing and scoliosis screenings
2. Assist with “in school” flu clinics for better compliance of flu immunizations

3B2- Student Support

1. Attended ASL Classes to be able to communicate with a student
2. Advocate for LGBTQ students-chaperoned the annual dance

C. Communication

3C-1 Two-way Communication

1. Contact parent/guardian after the student “forgets” their snack three times, ask parent to call back so a plan can be developed
2. Send a letter home to families when their student has made 5 or more visits in a 4 week time frame, not related to a daily med or documented chronic illness, asking for parental input

3C-2 Culturally Proficient Communication

1. Developed vocabulary cards for ELL students for clinic use
2. Handouts and letter home is translated into Arabic

IV Professional Culture

A. Reflection

4A1. Reflective Practice

1. I write a reflection after every walkthrough
2. Organized a community group, Natick Runs on Insulin, and continue to build on these supports

4A2 Goal Setting

1. I have written two professional goals and two student learning goals by September 20th, which are in teachpoint
2. Set weekly goals to manage longterm projects- for example- load 3 students immunizations into SNAP/day

B. Professional Learning and Growth

4B-1 Professional Learning and Growth

1. Development of Bereavement Boxes for each clinic
2. Development of SBIRT Manual
3. See Educational Listing

C. Collaboration

4C-1 Professional Collaboration

1. CO-Chair of SHAC
2. Worked with NFD and PT to devise evacuation plan for mobility impaired student

4C-2 Consultation

1. Meet with hearing specialist to discuss classroom implications for student J.S.
2. Worked with Guidance Counselor on student with school avoidance issues

4. Decision Making

4D-1 Decision Making

1. Worked on Field Trip Policy to impart changes district wide
2. Co-Chair of SHAC

4E. Shared Responsibility

4E-1 Shared Responsibility

1. Developed Template "Bodily injury to others" to monitor students that cause injury to other students, and share that info with the building principal
2. Investigated playground structure after three K students fell and sustained fractures in a week. Recommended to Principal that structure is too high off the ground for the average K student

F. Judgment

4F-1 Judgment

1. My students have appropriate dispositions of all visits recorded in SNAP
2. I send letters home to parents to notify them of certain illnesses/conditions are present in the classroom, such as lice and GI viruses

4F-2 Reliability and Responsibility

1. My attendance record is perfect and I report to work on time
2. I complete assignments prior to deadlines, such as the monthly report(s)