**Form G: Vermilion Association for Special Education Framework for School Nurses**

**Domain I for School Nurse: Planning and Preparation**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Unsatisfactory** | **Needs Improvement** | **Proficient** | **Excellent** |
| **1a: Demonstrating understanding of medical knowledge and skill in nursing practice** | School nurse demonstrates limited understanding of medical knowledge and its application to nursing practice. | School nurse demonstrates basic understanding of medical knowledge and its application to nursing practice. | School nurse demonstrates solid understanding of medical knowledge and skill in nursing techniques and is able to apply it to nursing practice in a variety of settings. | School nurse demonstrates extensive understanding of medical knowledge, concepts, and nursing practice. School nurse uses a wide variety of knowledge and data to provide a variety of approaches in addressing student health issues. |
| **1a: Critical Attributes**  | * Assessments are inaccurate.
* Knowledge of nursing process is limited.
* Nurse does not communicate student needs to staff.
* Medical knowledge is not based on evidence based data.
 | * Assessments are basic or minimal.
* Knowledge of nursing process is basic.
* Nurse occasionally provides staff with information on student need.
* Medical knowledge is basic and may not be based on current practice.
 | * Assessments are accurate and thorough.
* Knowledge of nursing process is appropriate.
* Nurse consistently shares appropriate student information with teachers.
* Medical knowledge is current and consistently reflects best practice standards.
 | * Assessment are thorough, accurate, and utilize evidence-based assessment techniques, instruments, and tools.
* Knowledge of nursing process shows synthesis and evaluation of information based on evidence based data.
* Nurse seeks opportunities to demonstrate student’s health status’s impact on educational progress.
* Medical knowledge reflects current best practice standards and is shared with the educational team and community.
 |
| **Evidence:**  |
| **1b: Demonstrating knowledge of child and adolescent development** | Nurse displays little or no knowledge of child and adolescent development. | Nurse displays partial knowledge of child and adolescent development. | Nurse displays accurate understanding of the typical developmental characteristics of the age group, as well as exceptions to the general patterns.  | In addition to accurate knowledge of the typical developmental characteristics of the age group and exceptions to the general patterns, the nurse displays knowledge of the developmental patterns of individual students. |
| **1b: Critical Attributes** | * Displays minimum knowledge of child and adolescent development.
 | * Demonstrates basic knowledge of child and adolescent development.
 | * Demonstrates accurate knowledge of child and adolescent development.
 | * Demonstrates accurate understanding of the development characteristics of an age group, as well as exceptions to the general patterns in a given population.
 |
| **Evidence:** |
| **1c: Establishing goals for the nursing program appropriate to the setting and the students served**  | Nurse has no clear goals for the nursing program or assigned buildings, or they are inappropriate to either the situation or the age of the students. | Nurse’s goals for the nursing program or assigned building are rudimentary and are partially suitable to the situation and the age of the students. | Nurse’s goals for the nursing program or assigned building are clear and appropriate to the situation in the school and to the age of the students. | Nurse’s goals for the nursing program or assigned building are highly appropriate to the situation in the school and to the age of the students and have been developed following consultations with students, parents, teachers, and administers.  |
| **1c: Critical Attributes** | * Nurse is not familiar with the needs of the students, staff, and parents.
* Nurse does not integrate health goals to promote strategies for learning.
 | * Nurse has a basic understanding of the needs of the students, staff, and parents.
* Nurse occasionally anticipates the needs of the school population.
* Nurse inconsistently sets health goals to promote strategies for learning.
 | * Nurse has an accurate understanding of the needs of the students, staff, and community.
* Nurse collaborates with staff to determine needs for students at varies development levels.
* Nurse consistently sets health goals to reflect the needs of the school community.
 | * Nurse is able to anticipate the needs of the students, staff, and community based on input for others and health needs assessment.
* Nurse enhances school wellness through opportunities such as classes and health events to promote wellness in the school.
* Nurse is aware of Illinois Learning Standards and seeks opportunities to incorporate information and activities to address learning standards.
 |
| **Evidence:**  |
| **1d: Developing knowledge of government, community, and cooperative regulations and resources** | Nurse demonstrates little or no knowledge of governmental regulations or resources for students available through the school or cooperative. | Nurse displays awareness of governmental regulations and resources for students available through the school or cooperative, but no knowledge of resources available more broadly. | Nurse displays awareness of governmental regulations and resources for students available through the school or cooperative and some familiarity with resources external to the school. | Nurse’s knowledge of governmental regulations and resources for students is extensive, including those available through the school or cooperative and in the community. |
| **1d: Critical Attributes** | * Nurse incorrectly identifies connections in cooperative policies, state regulations, and available resources and inconsistently applies this information to practice.
 | * Nurse inconsistently identifies connections in cooperative policies, state regulations, and available resources and inconsistently applies this information in practice.
 | * Nurse identifies connections in cooperative policies, state regulations, and available resources and consistently applies this information in practice.
 | * Nurse actively investigates connections in cooperative policies, state regulations, and available resources and consistently applies this information in practice.
 |
| **Evidence:**  |
| **1e: Planning health services for students** | Individual Health Plan consists of a random collection of unrelated activities, lacking coherence or overall structure. | Individual Health Plan including basic information. Plan is not accessible. | Individual Health Plan includes pertinent medical information, detailed interventions and or a plan of action. This plan is accessible. | Individual Health Plan including pertinent medical information, detailed interventions and or a plan of action. The plan is accessible. All appropriate staff members are educated on and can implement the plan. |
| **1e: Critical Attributes** | * Nurse fails to collect information for individual health plans.
 | * Nurse collections basic information or partial information for individual health plans.
* Basic plan is written.
* Plan is not accessible.
 | * Nurse collections most medical information for individual health plans.
* Detailed plan is written.
* Plan is accessible.
 | * Nurse collects all relevant medication information for individual health plans.
* Detailed plan is written.
* Plan is accessible.
* Nurse educates all staff on plan.
* Staff can implement the plan independently or with little support from nurse.
 |
| **Evidence:**  |

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**Domain 2 for School Nurse: The Environment**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Unsatisfactory** | **Needs Improvement** | **Proficient** | **Excellent** |
| **2a: Creating an Environment of Respect and Rapport with staff/families/staff/administration** | Nurse’s interactions with at least some students, families, staff, or administration are negative, inappropriate, or insensitive to age, cultural backgrounds, and developmental backgrounds. School nurse has little awareness of communication style and effective communication.  | Nurse’s interactions with students, families, staff, or administration reflect occasional inconsistencies with limited understanding of age, culture and developmental level. The school nurse has limited skills in using effective styles of communication for maintaining relationships. | Nurse’s interactions with students, families, staff, and administration are positive and respectful. The interactions are appropriate to the ages, cultures, and developmental levels of the students. The school nurse strives to build and maintain relationships by sharing information on health issues confidentially and privately. | Students, families, staff, and administration seek out the nurse, reflecting a high degree of comfort and trust in the relationship. The school nurse strives to protect privacy and confidentiality while promoting and modeling ethical practices for communication with staff, administration, and the community beyond the school setting. |
| **2a: Critical Attributes** | * Nurse rarely displays the ability to communicate effectively.
* Nurse communication does not reflect an understanding of FERPA.
* Communication shows that no prior information about the family/student was reviewed.
 | * Nurse consistently displays the ability to communicate effectively.
* Nurse has a basic understanding of FERPA, but inconsistently adheres to regulations.
* Communication shows that little prior information about the family/student was reviewed.
 | * Nurse effectively communicates with students, parents, administration, and staff.
* Nurse is sensitive to the individual differences of the population.
* Nurse consistently protects the privacy of the students in accordance with FERPA.
 | * Nurse has an understanding of the need for a variety of styles of communication (i.e. web page, newsletters, presentations, emails, phone calls)
* Nurse attends parent meetings to enhance communication.
* Nurse always protects the privacy of the students in accordance with FERPA.
 |
| **Evidence:**  |
| **2b: Establishing a culture for health and wellness** | School nurse makes few attempts to establish a culture for health and wellness in the school as a whole or among students or teachers. | School nurse’s attempts to promote a culture for health and wellness throughout the school are inconsistent. | School nurse promotes a culture throughout the school for health and wellness, and takes an active role to ensure that environmental health and safety concepts are a priority through the school community. | School nurse strives to promote a culture of wellness through support or environmentally sound practices. The culture of wellness and health are facilitated by the nurse’s knowledge of health and safety best practices in order to promote education for the entire school.  |
| **2b: Critical Attributes** | * Nurse does not develop a plan to promote positive growth and education for the students.
* Nurse does not become involved in screening follow up.
* Nurse is unaware of health and safety in the school setting.
* Nurse does not know what resources to access.
 | * Nurse works inconsistently with parents and teachers to develop a plan that will promote positive growth and education for the student and school.
* Nurse is inconsistently providing follow-up on screenings.
* Nurse has limited awareness or competence in the role of health and safety and knowing what resources to access.
 | * Nurse consistently works with parents and teachers to develop a plan that will promote positive growth and education for the student and school.
* Nurse is actively involved in screening follow-ups and referrals.
* Nurse seeks resources to complete referrals when appropriate.
* Nurse consistently addresses health and safety needs of the school community.
 | * Nurse collects data and examines delivery of services to enhance the health and wellness of environment.
* Nurse develops teaching programs, small group programs to promote health and wellness or address areas of need.
* Nurse recruits resources to utilize for screening follow-up based on community needs.
* Nurse supports students and families to function independently in meeting their own health needs.
* Nurse does safety monitoring and provides suggestions for improvement based on obtained data.
 |
| **Evidence:**  |
| **2c: Establishing and following health protocols and procedures and implementing nursing practice**  | School nurse’s procedures for the nursing practice are nonexistent or in disarray. | Student nurse has rudimentary and limited procedures for nursing practice. | School nurse effectively establishes and follows protocols and procedures to maintain student health and safety. The school nurse demonstrates effective organization in nursing practice. | School nurse utilizes evidence based data and practice to effectively establish and follow protocols and procedures to maintain student health and safety. The school nurse’s organization reflects the anticipation of unexpected situations and the ability to address them. |
| **2c: Critical Attributes** | * Nurse is not familiar with health protocols, cooperative policies, and Child Health Examination Code.
* Nurse does not follow through with compliance requirements for families with complex needs and does not communicate effectively with families.
 | * Nurse has basic understanding of health protocols, cooperative policies, and Child Health Examination Code.
* Nurse inconsistently follows through with compliance requirements for families with complex needs and inconsistently communicates with families.
 | * Nurse has a thorough understanding of health protocols, cooperative policies, and Child Health Examination Code.
* Nurse consistently follows through with compliance requirements for families with complex needs and consistently communicates effectively with the families.
 | * Nurse regularly reviews and makes recommendations for updates of protocols and policies based on current best practices.
* Nurse actively recruits resources for families with complex needs and assists families in accessing them.
 |
| **Evidence:**  |
| **2d: Organizing physical space** | Nurse’s office is in disarray or is inappropriate to the planned activities. Medications are not properly stored. | Nurse’s attempts to create a well-organized physical environment are partially successful. Medications are stored properly but are difficult to find. | Nurse’s office is well organized and is appropriate to the planned activities. Medications are properly labeled, stored, and well organized. | Nurse’s office is efficiently organized and is highly appropriate to the planned activities. Medications are properly labeled, stored, and well organized. |
| **2d: Critical Attributes** | * There are physical hazards in the nurse’s office endangering student safety.
* Available technology is not being used even if it would streamline processes.
* Nurse is disorganized and the area designated for working with students is not situated to work well with students.
* Nurse is unable to find needed materials.
 | * The physical environment is safe.
* The physical environment is not an impediment to learning but does not enhance it.
* Nurse makes limited use of available technology and other resources.
* Nurse’s area is moderately organized.
 | * The physical environment is arranged to support the goals and learning activities.
* Nurse makes appropriate use of technology and other resources.
* Nurse is able to find needed materials.
* Nurse’s area is organized.
 | * Modifications are made to the physical environment to accommodate all students.
* There is total alignment between the learning activities and the physical environment.
* Nurse makes extensive use of technology and other resources.
* Materials are readily accessible.
* Nurse’s area is very well organized.
 |
| **Evidence:**  |  |

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**Domain 3 for School Nurse: Delivery of Service**

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| --- | --- | --- | --- | --- |
|  | **Unsatisfactory** | **Needs Improvement** | **Proficient** | **Excellent** |
| **3a: Using knowledge of student educational programs and services**  | The school nurse has a limited knowledge of special education laws pertaining to IHP, EHPs, IEPs, and section 504, and of the process of creating a basic Individual Education Plan for an identified student with a medical need. | The school nurse has a basic knowledge of special education laws pertaining to IHP, EHPs, IEPs, and section 504, and of the process of creating a basic Individual Education Plan for an identified student with a medical need. | The school nurse has a thorough understanding of special education laws pertaining to IHP, EHPs, IEPs, and section 504 and participates in developing goals that are educationally relevant to individual medical needs. | The school nurse has thorough understanding of special education laws pertaining to IHP, EHPs, IEPs, and section 504. School nurse participates in developing goals that are educationally relevant to an individual’s medical needs. School nurse develops necessary accommodations in the education setting addressing specific health and wellness interests. |
| **3a: Critical Attributes** | * Nurse has a lack of understanding of the processes used to acquire the assistance needed for student’s academic success.
* Nurse rarely demonstrates use of these processes.
 | * Nurse has basic understanding of the processed used to acquire students the assistance needed for academic success.
* Nurse demonstrates use of these processes inconsistently.
 | * Nurse has a strong understanding of the processes used to acquire students the assistance needed for academic success.
* Nurse identifies students who should be evaluated by the school team.
* Nurse works collaboratively with the student support team.
* When appropriate, the nurse will write goals to improve student’s health and educational access.
 | * Nurse has a substantial understanding of the processes used to acquire students the assistance needed for academic success.
* Nurse demonstrates leadership on the student team.
* Nurse identifies students who should be evaluated by the school team.
* When appropriate, the nurse will write goals to improve student’s health and educational access, and tracks data to monitor progress.
 |
| **Evidence:**  |
| **3b: Using knowledge of educational impact of prescribed medication upon a student’s academic progress** | School nurse demonstrates a limited knowledge of medication and side effects. The connection to academic progress is usually missing. | School nurse demonstrates a basic knowledge of medication and side effects. School nurse inconsistently notes that impact on a child’s academic progress.  | School nurse demonstrates knowledge of medication, side effects, and their impact on a child’s academic progress. The educational impact is shared with the educational team. | School nurse demonstrates extensive knowledge of medications, side effects, and their impact on a child’s academic progress which is documented with student data. The educational impact is shared with the educational team and the nurse collaborates with the team to adjust the educational program secondary to medication impact. School nurse demonstrates the application to best practice with regard to medication practice. |
| **3b: Critical Attributes** | * Nurse cannot identify the relationship between medication effect and/or side effect as it impacts academic performance.
 | * Nurse has inconsistent understanding of the relationship between medication effect and/or side effects as it impacts academic performance.
 | * Nurse has thorough understanding of the relationship between medication effect and/or side effects as it impacts academic performance.
 | * Nurse reflects on the relationship between medication use and its impact on academic performance, and makes appropriate accommodations based on individual needs.
 |
| **Evidence:**  |
| **3c: Administering medications to students**  | Medications are administered with no regard to state or cooperative policies. | Medications are administered by designated individuals, but signed release forms are not conveniently stored. | Medications are administered by designated individuals, and signed release forms are conveniently stored and available when needed. | Medications are administered by designed individuals, and signed release forms are conveniently stored. Medications are correctly labeled and safely stored/contained. Students take an active role in medication compliance. |
| **3c: Critical Attributes** | * Nurse does not have understanding of best practice for medication administration and safety.
* Medications are not organized and not locked.
* No medication administration logs are kept.
 | * Nurse has inconsistent understanding of best practice for medication administration and safety.
* Medications are inconsistently organized and locked.
* Medication administration logs are inconsistently kept.
 | * Nurse has thorough understanding of best practice for medication administration and safety.
* Medications are consistently organized and locked.
* Medication administration logs are readily available and consistently used.
 | * Nurse reviews cooperative procedures related to medication administration and safety. Recommendations are made based on best practice trends and patterns reflected in data.
* Medications are always organized and locked.
* Medication administration logs are readily available, consistently used, and parents are contacted when more medication is needed.
 |
| **Evidence:**  |
| **3d: Managing emergent and non-emergent situations** | Nurse has no contingency plans for emergent situation and is not aware of building crisis plans. | Nurse’s plans for emergent situations have been developed for the most frequently occurring situations but not others. School nurse is aware of building crisis plan. | Nurse’s plans for emergent situations have been developed for many situations. School nurse follows building crisis plan. | Nurse’s plans for emergent situations have been developed for many situations. Students and teachers have learned their responsibilities in case of emergent situation. Nurse follows building crisis plan and if asked, assists in development of building crisis plan. |
| **3d: Critical Attributes** | * Nurse does not participate in medically involved crisis situations.
* Documentation is not kept.
* Nurse is not knowledgeable about the building crisis plan.
 | * Nurse inconsistently participates in medically involved crisis situations.
* Document is inconsistently kept.
* Nurse is knowledgeable of building crisis plan but does not implement it.
 | * Nurse consistently participate in medically involved crisis situations.
* Documentation is consistently kept.
* Nurse consistently follows the building crisis plan.
 | * Nurse takes the lead in a medically involved crisis situation.
* Documentation is consistently kept and shared during debriefing meetings.
* Nurse consistently follows the building crisis plan and provides suggestions to the plan for improvement.
 |
| **Evidence:** |
| **3e: Demonstrating Flexibility and Responsiveness** | School nurse adheres to the plan or program in spite of evidence of its inadequacy. | School nurse’s makes modest changes in the nursing program when confronted with evidence of the need for change. | School nurse makes revisions in the nursing program when they are needed. | School nurse is continually seeking ways to improve the nursing program and makes changes as needed in response to student, parent, teacher, or administrative input. |
| **3e: Critical Attributes** | * Nurse demonstrates resistance to change in programming or scheduling based on building, department, or cooperative needs.
 | * Nurse demonstrates an inconsistent response to requests for change in programming or scheduling based on building, department, or cooperative needs.
 | * Nurse is consistently flexible to requests for change in programming or scheduling based on an assignment.
 | * Nurse demonstrates flexibility and leadership when addressing the need for change within and outside or an assignment.
 |
| **Evidence:**  |
| **3f: Assessing Student Needs** | School nurse does a minimal assessment of student needs, or the assessments result in inaccurate conclusions. | Student nurse does a basic assessment of student needs. | School nurse assesses student needs using the nursing process and individualizing a plan of action when necessary. The school nurse will also communicate with teachers and staff to put individualized interventions into action. | School nurse conducts detailed and individualized assessment of student needs to contribute to program planning. Individualized planning is based on available data and best practice. School nurse understands the roles and responsibilities as a health resource professional by advocating for students, staff, families, and communities. |
| **3f: Critical Attributes** | * Nurse is unable to identify student needs or inaccurately identifies student needs.
* Nurse does not pursue opportunities to improve assessment skill.
 | * Nurse inconsistently identifies student needs.
* Nurse inconsistently pursues opportunities to improve assessment skills.
 | * Nurse consistently and accurately identifies student needs.
* Nurse creates individual plan based on student need and shares with staff as appropriate, based on FERPA regulations.
* Nurse seeks opportunities for professional education and assessment skills.
 | * Nurse assessments are based on age-appropriate norms and individual student needs.
* Nurse plans are individualized based on best practice standards.
* Nurse presents or recruits presenters to improve assessment skills.
 |
| **Evidence:**  |
| **3g: Collaborating with teacher to develop specialized educational programs and services for students with diverse medical needs** | School nurse declines to collaborate with classroom teachers to develop specialized educational programs. | School nurse collaborates with classroom teachers in developing instructional lessons and units when specifically asked to do so. | School nurse initiates collaboration with classroom teachers in developing instructional lessons and units. | School nurse initiates collaboration with classroom teachers in developing instructional lessons and units, locating additional resources from outside the school. |
| **3g: Critical Attributes** | * Nurse fails to collaborate with teacher and other staff.
* Specialized educational programs are poorly written.
 | * Nurse inconsistently collaborates with teacher and other staff.
* Specialized educational programs are sometimes well written and sometimes lacking.
 | * Nurse consistently collaborates with teachers, parents, administration, and the student.
* Specialized educational programs are consistently well written and relevant to students.
 | * Nurse initiates collaboration and bring resources from multiple sources.
* Specialized educational programs are always well written and relevant to students.
 |
| **Evidence:** |

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**Domain 4 for School Nurse: Professional Responsibilities**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Unsatisfactory** | **Needs Improvement** | **Proficient** | **Excellent** |
| **4a: Reflecting on practice** | School nurse minimally reflects on practice, and the reflections are often inaccurate or self-serving. | School nurse’s reflection on practice is moderately accurate and objective without citing specific examples and with only global suggestions as to how it might be improved. | School nurse’s reflection provides an accurate and objective description of practice, citing specific positive and negative characteristics. School nurse makes some specific suggestions as to how the nursing program might be improved. | School nurse’s reflection is highly accurate and perceptive, citing specific examples and evidence based practice. School nurse utilizes an extensive understanding of best practices to suggest alternative strategies. |
| **4a: Critical Attributes** | * Does not assess the effectiveness of professional practice
* Unable to communicate personal strengths and weaknesses or ways that professional practice can be improved
 | * Inconsistently assesses the effectiveness of professional practice
* Ineffectively communicates personal strengths and weaknesses or ways that professional practice can be improved
 | * Accurately assesses the effectiveness of professional practice
* Able to effectively communicate personal strengths and weaknesses, as well as ways that professional practice can be improved
 | * Regularly and accurately assesses the effectiveness of professional practice
* Engages in dialogue with administration and/or colleagues about personal strengths and weaknesses, as well as ways that professional practice can be improved
 |
| **Evidence:**  |
| **4b: Maintaining health records in accordance with policy and submitting reports in a timely fashion** | School nurse’s medical reviews, records, and documentation are missing, late, or inaccurate, resulting in confusion. | School nurse’s medical reviews, records, and documentation reflect basic information, are inconsistent, and/or are occasionally late. | School nurse’s medical reviews, records, and documentation are accurate, thorough, and are submitted in a timely manner. | School nurse’s medical reviews, records, and documentation are accurate, comprehensive, and are submitted in a timely manner. School nurse synthesizes the information gathered and utilizes it to appropriately collaborate with related service providers to main accuracy in programming. |
| **4b: Critical Attributes** | * Nurse lacks a comprehensive understanding of requirements for a complete medical review.
* Nurse reports are frequently inaccurate, late, or missing.
 | * Nurse has an inconsistent understanding of requirements for a complete medical review.
* Nurse reports are inconsistently accurate or late, or are missing with appropriate notice given.
 | * Nurse consistently demonstrates understanding of requirements for a complete medical review.
* Nurse reports are consistently accurate and submitted on time.
 | * Nurse produces comprehensive medical reviews that reflect student need and educational impact.
* Nurse interprets medical information for significance in educational setting and works collaboratively with related service providers to program for individual student need.
 |
| **Evidence:**  |
| **4c: Communicating with Stakeholders**  | Nurse provides no information to stakeholders, either about the nursing program as a whole or about individual students. | Nurse provides limited though accurate information to stakeholders about the nursing program as a whole and about individual students. | Nurse provides thorough and accurate information to stakeholders about the nursing program as a whole and about individual students. | Nurse is proactive in providing information to stakeholders about the nursing program and about individual students through a variety of means.  |
| **4c: Critical Attributes** | * Nurse rarely provides information to families and other relevant stakeholders.
* Nurse fails to provide resources when needed.
 | * Nurse inconsistently provides information to families and other relevant stakeholders.
* Nurse is developing her knowledge of available resources to use with families.
 | * Nurse provides evidence based information.
* Nurse helps families access their needed information.
* Nurse connects families with community resources.
 | * Nurse seeks resources for the school community based on needs assessments.
* Nurse documents resources provided to families or other staff.
* Nurse actively seeks to identify families in need an actively works to provide and connect them with resources and information.
 |
| **Evidence:** |
| **4d: Participating in a professional community** | School nurse’s relationships with colleagues are negative and self-serving, and nurse avoids being involved in school and district events and projects. | School nurse’s relationships with colleagues are cordial, and nurse participates in school and district events and projects when specifically requested to do so. | School nurse participates actively in school and district event and projects and maintains positive and productive relationships with colleagues. | School nurse makes a substantial contribution to school and district events and projects and assumes leadership role with colleagues. |
| **4d: Critical Attributes** | * Aversive to feedback from colleagues and administration
* Does not participate in professional collaboration
* Does not attend department meetings
 | * Inconsistently accepts feedback from colleagues and administration
* Participates in professional collaboration, but does not contribute
* Inconsistently attends and rarely participates in department meetings
 | * Accepts feedback from colleagues and administration in order to improve practice
* Regularly participates in professional collaboration and makes contributions
* Consistently attends and participates in department meetings
* Participates on and contributes to building-level committees as requested
 | * Solicits feedback from colleagues and administration in order to improve practice
* Assumes a leadership role in professional collaboration
* Consistently attends and provides expertise to department meetings
* Provides in-services or presentations
* Participates on and contributes to district-, cooperative-, and/or school-level committees
 |
| **Evidence:**  |
| **4e: Engaging in professional development** | School nurse does not participate in professional development opportunities, even when such activities are clearly needed for the development of nursing skills. | School nurse’s participation in professional development opportunities is limited to those that are convenient or are required. | School nurse seeks out opportunities for professional development based on individual assessment of need. | School nurse actively pursues professional development opportunities and makes a substantial contribution to the profession through such activities as offering workshops to colleagues.  |
| **4e: Critical Attributes:** | * Does not seek opportunities for continued professional development
* Does not participate in any activity that might enhance knowledge or skill.
* Purposefully resists discussing performance with supervisors or colleagues.
* Makes no effort to participate in professional organizations.
 | * Rarely seeks opportunities for continued professional development
* Participates in professional development when they are required.
* Reluctantly accepts feedback from supervisors and colleagues.
* Rarely participates in professional organizations.
 | * Seeks opportunities for continued professional development
* Seeks regular opportunities for professional development.
* Welcomes colleagues and supervisors into the classroom for the purposes of gaining insight from their feedback.
* Actively participates in organizations designed to contribute to the profession.
 | * Seeks opportunities for continued professional development
* Seeks regular opportunities for professional development, including initiating action research.
* Actively seeks feedback from supervisors and colleagues.
* Takes an active leadership role in professional organizations in order to contribute to the profession.
 |
| **Evidence:**  |
| **4f: Showing professionalism** | School nurse displays dishonestly in interactions with colleagues, students, and the public; violates principles of confidentiality. School nurse does not comply with school, cooperative, or professional regulations even when directed. | School nurse interacts honestly however shows inconsistencies in maintaining confidentiality with colleagues, students, and the public and in advocacy of students. School nurse minimally complies or requires prompting to comply with school, cooperative, and professional regulations. | School nurse displays high standards of honesty, integrity, and confidentiality in interactions with colleagues, students, and the public; advocates for students when needed. School nurse complies fully with school, cooperative, and professional regulations. | School nurse can be counted on to hold the highest standards of honesty, integrity, and confidentiality based on the professional code of ethics. School nurse takes a leadership role in advocating for students with colleagues. School nurse complies fully with school and cooperative regulations, taking a leadership role with colleagues. |
| **4f: Critical Attributes** | * Dishonest
* Does not notice the needs of students
* Engages in practices that are self-serving
* Willfully rejects district and cooperative regulations
* Is not aware of National Code of Ethics
 | * Inconsistently honest
* Notices the needs of students, but is inconsistent in addressing them
* Does not notice that practices are ineffective or that they result in poor outcomes for students
* Complies with district and cooperative regulations
* Inconsistently adheres to National Code of Ethics
 | * Consistently honest and known for having high standards of integrity
* Addresses student needs
* Works to provide opportunities for student success within the social work practice
* Complies with district and cooperative regulations
* Adheres to National Code of Ethics
 | * Considered a leader in terms of honesty, integrity, and confidentiality
* Proactively addresses student needs
* Makes a concerted effort to ensure opportunities are available for student success within the social work practice
* Takes a leadership role regarding district and cooperative regulations
* Adheres to National Code of Ethics and works to educate others on its importance
 |
| **Evidence:**  |