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| **Name: Date:**  Nursing Department Components of Professional Practice Rubric  Nursing Department Nurse Observation: Self-Assessment Form  **(To be completed by the nurse and sent to the administrator at least two days after observation.)** | | | | | |
| Nursing Department Components of Professional Practice Rubric | | | | |
| **Domain 6a Rubric: Planning and Preparation: Self-Assessment Form** | | | | |
| **Component** | **Unsatisfactory** | **Basic** | **Proficient** | **Distinguished** |
| **6a.1: Demonstrating medical knowledge and skill in nursing techniques** | Nurse demonstrates little understanding of medical knowledge and nursing techniques. | Nurse demonstrates basic understanding of medical knowledge and nursing techniques. | Nurse demonstrates understanding of medical knowledge and nursing techniques. | Nurse demonstrates deep and thorough understanding of medical knowledge and nursing techniques. |
| **6a.2: 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, nurse displays knowledge of the extent to which individual students follow the general patterns. |
| **6a.3: Establishing goals for the nursing program appropriate to the setting and the students served** | Nurse has no clear goals for the nursing program, or they are inappropriate to either the situation or the age of the students. | Nurse’s goals for the nursing program are rudimentary and are partially suitable to the situation and the age of the students. | Nurse’s goals for the nursing program are clear and appropriate to the situation in the school and to the age of the students. | Nurse’s goals for the nursing program 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, and colleagues. |
| **6a.4: Demonstrating knowledge of government, community, and district regulations and resources** | Nurse demonstrates little or no knowledge of governmental regulations and resources for students available through the school or district. | Nurse displays awareness of governmental regulations and resources for students available through the school or district, but no knowledge of resources available more broadly. | Nurse displays awareness of governmental regulations and resources for students available through the school or district 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 district and in the community. |
| **6a.5: Planning the nursing program for both individuals and groups of students, integrated with the regular school program** | Nursing program consists of a random collection of unrelated activities, lacking coherence or an overall structure. | Nurse’s plan has a guiding principle and includes a number of worthwhile activities, but some of them don’t fit with the broader goals. | Nurse has developed a plan that includes the important aspects of work in the setting. | Nurse’s plan is highly coherent and serves to support not only the students individually and in groups, but also the broader educational program. |
| **6a.6: Developing a plan to evaluate the nursing program** | Nurse has no plan to evaluate the program or resists suggestions that such an evaluation is important. | Nurse has a rudimentary plan to evaluate the nursing program. | Nurse’s plan to evaluate the program is organized around clear goals and the collection of evidence to indicate the degree to which the goals have been met. | Nurse’s evaluation plan is highly sophisticated, with imaginative sources of evidence and a clear path toward improving the program on an ongoing basis. |

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| **Name: Date:**  (Self-Assessment Form, page 2) | | | | | |
| Nursing Department Components of Professional Practice Rubric | | | | |
| **Domain 6b Rubric: The Environment: Self-Assessment Form** | | | | |
| **Component** | **Unsatisfactory** | **Basic** | **Proficient** | **Distinguished** |
| **6b.1:  Creating an environment of respect and rapport** | Nurse’s interactions with at least some students are negative or inappropriate. | Nurse’s interactions with students are a mix of positive and negative. | Nurse’s interactions with students are positive and respectful. | Students seek out the nurse, reflecting a high degree of comfort and trust in the relationship. |
| **6b.2: Establishing a culture for health and wellness** | Nurse makes no attempt to establish a culture for health and wellness in the school as a whole, or among students or among teachers. | Nurse’s attempts to promote a culture throughout the school for health and wellness are partially successful. | Nurse promotes a culture throughout the school for health and wellness. | The culture in the school for health and wellness, while guided by the nurse, is maintained by both teachers and students. |
| **6b.3: Following health protocols and procedures** | Nurse’s procedures for the nursing office are nonexistent or in disarray. | Nurse has rudimentary and partially successful procedures for the nursing office. | Nurse’s procedures for the nursing office work effectively. | Nurse’s procedures for the nursing office are seamless, anticipating unexpected situations. |
| **6b.4: Supervising health associates** | No guidelines for delegated duties have been established, or the guidelines are unclear. Nurse does not monitor associates’ activities. | Nurse’s efforts to establish guidelines for delegated duties are partially successful. Nurse monitors associates’ activities sporadically. | Nurse has established guidelines for delegated duties and monitors associates’ activities. | Associates work independently, indicating clear guidelines for their work. Nurse’s supervision is subtle and professional. |
| **6b.5 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 stored and well organized. | Nurse’s office is efficiently organized and is highly appropriate to the planned activities. Medications are properly stored and well organized. |

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| **Name: Date:**  (Self-Assessment Form, page 3) | | | | | |
| Nursing Department Components of Professional Practice Rubric | | | | |
| **Domain 6c Rubric: Delivery of Service: Self-Assessment Form** | | | | |
| **Component** | **Unsatisfactory** | **Basic** | **Proficient** | **Distinguished** |
| **6c.1:  Assessing student needs** | Nurse does not assess student needs, or the assessments result in inaccurate conclusions. | Nurse’s assessments of student needs are perfunctory. | Nurse assesses student needs and knows the range of student needs in the school. | Nurse conducts detailed and individualized assessment of student needs to contribute to program planning. |
| **6c.2:  Administering medications  to students** | Medications are administered with no regard to state or district 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 designated individuals, and signed release forms are conveniently stored. Students take an active role in medication compliance. |
| **6c.3:  Promoting wellness through classes or classroom presentations** | Nurse’s work with students  in classes fails to promote wellness. | Nurse’s efforts to promote wellness through classroom presentations are partially effective. | Nurse’s classroom presentations result in students acquiring the knowledge and attitudes that help them adopt a healthy lifestyle. | Nurse’s classroom presentations for wellness are effective, and students assume an active role in the school in promoting a healthy lifestyle. |
| **6c.4:  Managing emergency situations** | Nurse has no contingency plans for emergency situations. | Nurse’s plans for emergency situations have been developed for the most frequently occurring situations but not others. | Nurse’s plans for emergency situations have been developed for many situations. | Nurse’s plans for emergency situations have been developed for many situations. Students and teachers have learned their responsibilities in case of emergencies. |
| **6c.5:  Demonstrating flexibility and  responsiveness** | Nurse adheres to the plan or program, in spite of evidence of its inadequacy. | Nurse makes modest changes in the nursing program when confronted with evidence of the need for change. | Nurse makes revisions in the nursing program when they are needed. | Nurse is continually seeking ways to improve the nursing program and makes changes as needed in response to student, parent, or teacher input. |
| **6c.6:  Collaborating with teachers to develop specialized educational programs and services for students with diverse medical needs** | Nurse declines to collaborate with classroom teachers to develop specialized educational programs. | Nurse collaborates with classroom teachers in developing instructional lessons and units when specifically asked to do so. | Nurse initiates collaboration with classroom teachers in developing instructional lessons and units. | Nurse initiates collaboration with classroom teachers in developing instructional lessons and units, locating additional resources from outside the school. |

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| **Name: Date:**  (Self-Assessment Form, page 4) | | | | | |
| Nursing Department Components of Professional Practice Rubric | | | | |
| **Domain 6d Rubric: Professional Responsibilities: Self-Assessment Form** | | | | |
| **Component** | **Unsatisfactory** | **Basic** | **Proficient** | **Distinguished** |
| **6d.1: Reflecting on practice** | Nurse does not reflect on practice, or the reflections are inaccurate or self-serving. | 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. | Nurse’s reflection provides an accurate and objective description of practice, citing specific positive and negative characteristics. Nurse makes some specific suggestions as to how the nursing program might be improved. | Nurse’s reflection is highly accurate and perceptive, citing specific examples. Nurse draws on an extensive repertoire to suggest alternative strategies. |
| **6d.2: Maintaining health records in accordance with policy and submitting reports in a timely fashion** | Nurse’s reports, records, and documentation are missing, late, or inaccurate, resulting in confusion. | Nurse’s reports, records, and documentation are generally accurate, but are occasionally late. | Nurse’s reports, records, and documentation are accurate and are submitted in a timely manner. | Nurse’s approach to record keeping is highly systematic and efficient and serves as a model for colleagues across the school. |
| **6d.3: Communicating with families** | Nurse provides no information to families, either about the nursing program as a whole or about individual ­students. | Nurse provides limited though accurate information to families about the nursing program as a whole and about individual students. | Nurse provides thorough and accurate information to families about the nursing program as a whole and about individual students. | Nurse is proactive in providing information to families about the nursing program and about individual students through a variety of means. |
| **6d.4: Participating in a  professional community** | Nurse’s relationships with colleagues are negative or self-serving, and nurse avoids being involved in school and district events and projects. | Nurse’s relationships with colleagues are cordial, and nurse participates in school and district events and projects when specifically requested  to do so. | Nurse participates actively in school and district events and projects and maintains positive and productive relationships with colleagues. | Nurse makes a substantial contribution to school and district events and projects and assumes leadership role with colleagues. |
| **6d.5: Engaging in professional  development** | Nurse does not participate in professional development activities, even when such activities are clearly needed for the development of nursing skills. | Nurse’s participation in professional development activities is limited to those that are convenient or are required. | Nurse seeks out opportunities for professional development based on an individual assessment of need. | Nurse actively pursues professional development opportunities and makes a substantial contribution to the profession through such activities as offering workshops to colleagues. |
| **6d.6: Showing professionalism** | Nurse displays dishonesty in interactions with colleagues, students, and the public; violates principles of confidentiality. | Nurse is honest in interactions with colleagues, students, and the public;  does not violate confidentiality. | Nurse displays high standards of honesty, integrity, and confidentiality in interactions with colleagues, students, and the public; advocates for students when needed. | Nurse can be counted on to hold the highest standards of honesty, integrity, and confidentiality and to advocate for students, taking a leadership role with colleagues. |