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<tr>
<td><strong>Domain 1: Planning and Preparation</strong></td>
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<tr>
<td><strong>1a: Demonstrating Knowledge of Content and Pedagogy/Demonstrating Knowledge of Nursing Process and Health</strong></td>
<td>Certified School Nurse (CSN) demonstrates limited understanding of the nursing process and health.</td>
<td>CSN demonstrates a basic understanding of the nursing process and health.</td>
<td>CSN demonstrates adequate understanding of the nursing process and health.</td>
<td>CSN demonstrates an extensive understanding of the nursing process and health.</td>
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<tr>
<td>Evidence/Examples</td>
<td>CSN does not assess student upon arrival to the health room.</td>
<td>CSN performs a limited, brief physical assessment of student upon arrival to the health room.</td>
<td>CSN performs a complete and appropriate physical assessment of student upon arrival to the health room.</td>
<td>CSN performs a complete, appropriate, and detailed assessment of student upon arrival to the health room, including questions as to past medical history and potential contributing factors.</td>
</tr>
<tr>
<td><strong>1b: Demonstrating Knowledge of Students/Demonstrating Knowledge of Individual Health Needs</strong></td>
<td>CSN demonstrates limited understanding of individual health needs.</td>
<td>CSN demonstrates basic understanding of individual health needs.</td>
<td>CSN demonstrates adequate understanding of individual health needs.</td>
<td>CSN demonstrates extensive understanding of individual health needs.</td>
</tr>
<tr>
<td>Evidence/Examples</td>
<td>CSN does not access student’s demographic data and health history to aid in physical assessment.</td>
<td>CSN utilizes available student data occasionally to aid in performing a physical assessment of the student.</td>
<td>CSN consistently utilizes available student information databases and health records to aid in performing a physical assessment.</td>
<td>CSN consistently utilizes available student information databases, health records, and seeks input from teachers and other relevant personnel to aid in completing a physical assessment.</td>
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<tr>
<td><strong>1c: Setting Service Delivery Outcomes/Identifying Appropriate Outcomes</strong></td>
<td>CSN is unable to identify appropriate outcomes.</td>
<td>CSN is able to identify appropriate outcomes some of the time.</td>
<td>CSN consistently identifies outcomes that are culturally appropriate and based upon both current and predicted needs.</td>
<td>CSN consistently identifies outcomes that are culturally appropriate and based upon both current and predicted needs. Following consultation with relevant parties (e.g., students, parents and educators/colleagues), measurable outcomes are systematically evaluated for the purpose of improving services.</td>
</tr>
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<td><strong>Evidence/Examples</strong></td>
<td></td>
<td></td>
<td>CSN provides consistent communication with parents and staff members following each student interaction, when appropriate, and initiates follow up communication to determine the student’s status and future needs upon return to the classroom.</td>
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<tr>
<td><strong>Id: Demonstrating Knowledge of Resources/Demonstrating Knowledge of Appropriate Laws, Regulations, and Resources</strong></td>
<td>CSN demonstrates limited knowledge of appropriate laws, regulations and resources.</td>
<td>CSN demonstrates some knowledge of appropriate laws, regulations, and resources.</td>
<td>CSN demonstrates adequate knowledge of appropriate laws, regulations, and resources.</td>
<td>CSN demonstrates extensive knowledge of appropriate laws, regulations, and resources and uses knowledge to regularly assess the impact on services.</td>
</tr>
<tr>
<td><strong>Evidence/Examples</strong></td>
<td>CSN does not complete the process for each mandated screening.</td>
<td>CSN partially completes the process for each mandated screening.</td>
<td>CSN completes the process for each mandated screening.</td>
<td>CSN completes the process for each mandated screening, communicates the results with teachers, as appropriate and follows-up with referrals as needed, utilizing existing resources.</td>
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<td>CSN does not review student immunization records for compliance with state mandates.</td>
<td>CSN reviews student immunization records but does not follow-up with students out of compliance.</td>
<td>CSN reviews student immunization records, and follows-up periodically throughout the school year according to state guidelines.</td>
<td>CSN reviews student immunization records, follows-up throughout the school year according to state guidelines and educates parents with community resources for immunization compliance.</td>
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<tr>
<td>1e: Designing Coherent Instruction/Developing Plans to Attain Expected Outcomes, Including Services for Students with Diverse Medical Needs</td>
<td>CSN is unable to develop plans that result in expected outcomes for the individual.</td>
<td>CSN is able to develop plans to attain expected outcomes some of the time.</td>
<td>CSN consistently develops plans that result in expected outcomes for individuals, including individuals with diverse medical needs.</td>
<td>Through collaborative and evidence-based practice, the CSN develops exceptional plans that exceed the expected outcomes for a given individual.</td>
</tr>
<tr>
<td>Evidence/Examples</td>
<td>CSN does not create an emergency health care plan for a student with life-threatening food allergies.</td>
<td>CSN creates a basic emergency care plan for a student with life threatening food allergies, but does not communicate the plan to the student’s teacher.</td>
<td>CSN creates a complete emergency care plan for a student with life threatening food allergies and communicates the plan with the student’s teacher and appropriate staff members.</td>
<td>CSN creates a detailed emergency care plan for a student with life threatening food allergies, communicates the plan with the student’s teacher and appropriate staff members, and trains staff members in the use of an epinephrine auto-injector and how to recognize and respond to a life threatening reaction.</td>
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<tr>
<td>1f: Designing Student Assessments/Designing Outcome Evaluation</td>
<td>CSN is unable to design an outcome evaluation.</td>
<td>CSN demonstrates a basic understanding of how to design an outcome evaluation.</td>
<td>CSN is able to design an adequate outcome evaluation.</td>
<td>Through collaborative practice, CSN is able to adequately design an outcome evaluation and use the results to inform and improve services.</td>
</tr>
<tr>
<td>Evidence/Examples</td>
<td>CSN does not create an individual health plan for a student returning to school with special mobility needs.</td>
<td>CSN creates a mobility plan for a student returning to school, but does not communicate the plan with the student’s teacher.</td>
<td>CSN creates an individual health plan for mobility and communicates the plan with the student’s teacher and other staff members.</td>
<td>CSN creates an individual health plan for mobility, communicates the plan to the student’s teacher and appropriate staff members, and follows up with student, parent, and staff members to determine if the plan is functional.</td>
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<tr>
<td><strong>2a: Creating an Environment of Respect and Rapport</strong></td>
<td>CSN’s interactions with members of the school community are often negative or inappropriate.</td>
<td>CSN’s interactions with members of the school community are adequate.</td>
<td>CSN’s interactions with members of the school community are positive and respectful.</td>
<td>Members of the school community seek out the CSN based upon the establishment of respectful, collaborative and trusting relationships.</td>
</tr>
<tr>
<td>Evidence/Examples</td>
<td>Confidentiality is not maintained. CSN makes inappropriate remarks during meetings with school community.*</td>
<td>Confidentiality is compromised at times. CSN will occasionally cause conflict with school community members. Interactions with school community are most often appropriate. CSN is sensitive to cultural and socioeconomic characteristics of the school community.</td>
<td>CSN is professional and respectful when working with the school community. CSN rapport with school community is supportive and caring. CSN intervenes for those of the school community with cultural and socioeconomic challenges. CSN works effectively with her nursing peers. Correspondence (email, verbal) is consistently appropriate and positive.</td>
<td>CSN is sought out by school community because of trusting and caring relationship. Administration receives positive feedback from the school community acknowledging communication that is respectful, supportive and knowledgeable. CSN actively provides resources for those with cultural and socioeconomic challenges.</td>
</tr>
<tr>
<td><strong>2b: Establishing a Culture for Learning/Establishing a Culture for Health and Wellness</strong></td>
<td>CSN does not contribute to the establishment of a culture for health and wellness. The CSN is not sensitive to the developmental, cultural and socioeconomic characteristics of the school community</td>
<td>CSN has made some contributions toward the establishment of a culture for health and wellness. The CSN shows some sensitivity to the developmental, cultural and socioeconomic characteristics of the school community.</td>
<td>CSN has made meaningful contributions toward the establishment of a culture for health and wellness that demonstrate sensitivity to the developmental, cultural and socioeconomic needs of the school community.</td>
<td>CSN has made significant contributions toward the establishment of a culture for health and wellness via leadership and collaboration with members of the school community in ways that demonstrate sensitivity to the developmental, cultural, and socioeconomic needs of the community.</td>
</tr>
<tr>
<td>Evidence/Examples</td>
<td>CSN does not participate in health initiatives. CSN recognizes health care needs of students but does not intervene with possible solutions.</td>
<td>Occasionally participates in health initiatives. CSN provides resources to the school community regarding health and wellness issues. CSN is aware of specific health issues within the school community.</td>
<td>CSN consistently participates in health initiatives. CSN provides resources to the school community regarding health and wellness issues. CSN is aware of specific health issues within the school community.</td>
<td>CSN organizes programs such as Holiday Sharing, Immunization Clinics, Health Fairs, Blood Drive, etc. CSN aids in accessing health care, reduced, free breakfast, lunch and other resources for students, as needed.</td>
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<tr>
<td><strong>2c: Managing Classroom Procedures/Following Health Protocols and Procedures</strong></td>
<td>CSN does not follow health protocols and procedures.</td>
<td>CSN is inconsistent in following health protocols and procedures. The CSN usually keeps documentation of all interactions with students and other members of the community, but lacks consistency and clarity in her record-keeping.</td>
<td>CSN follows health protocols and procedures. The CSN consistently documents interactions with students and other member of the community and these records are usually complete and clear.</td>
<td>CSN follows health protocols and procedures and uses effective problem-solving skills in unique situations. All interactions with students and other members of the community are documented in a manner that is complete and clear in its meaning.</td>
</tr>
<tr>
<td>Evidence/Examples</td>
<td>CSN does not follow school district policy and procedure/department standing orders. CSN documentation is absent or not complete.</td>
<td>CSN is aware of and generally follows school district policy and procedure/department standing orders. CSN documentation is inconsistent.</td>
<td>CSN consistently follows school district policy and procedure/department standing orders. CSN documentation is consistent and adequate.</td>
<td>CSN contributes to the development of district policy and procedure/department standing orders related to health and wellness. CSN documentation is complete with follow-up as needed and shared with appropriate school staff as necessary for student success.</td>
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<tr>
<td><strong>2d: Managing Student Behavior/ Promoting a Safe and Healthy Environment</strong></td>
<td>CSN does not promote a safe and healthy environment.</td>
<td>CSN makes some attempts to promote a safe and healthy environment.</td>
<td>CSN consistently promotes a safe and healthy environment.</td>
<td>CSN consistently engages others in the effective promotion of a safe and healthy environment that is guided by the use of research-based strategies and recommendations.</td>
</tr>
<tr>
<td>Evidence/Examples</td>
<td>CSN does not contact Department of Health for suspected outbreak of chicken pox. CSN does not maintain medications in a locked location. Exception: emergency medications such as asthma inhalers and epinephrine auto-injectors.</td>
<td>CSN delays contacting Department of Health for suspected outbreak of chicken pox. CSN has a secure medication location but does not keep locked. Exception: emergency medications such as asthma inhalers and epinephrine auto-injectors.</td>
<td>CSN contacts Department of Health for suspected outbreak of chicken pox in a timely manner. CSN maintains medication in a secure, locked location. Exception: emergency medications such as asthma inhalers and epinephrine auto-injectors.</td>
<td>CSN contacts Department of Health for suspected outbreak of chicken pox. Provides education to school administration, staff and families on disease process, precautions, treatment and follow-up. CSN ensures that medication is in a secure, locked location. Maintain logs of inventory. Follows recommendations outlined in PA Department of Health medication guidelines.</td>
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<tr>
<td>2e: Organizing Physical Space</td>
<td>The physical environment is unsafe.</td>
<td>The physical environment is usually safe, organized, and accessible.</td>
<td>The physical environment is consistently safe, organized, and accessible.</td>
<td>The CSN continually monitors and assesses the safety of her surroundings and addresses the need to maintain a physical environment that is safe, organized and accessible.</td>
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<tr>
<td>Evidence/Examples</td>
<td>The Health Office is not safe/clean and supplies are not organized.</td>
<td>The Health Office is cluttered but accessible. Supplies are somewhat organized.</td>
<td>The Health Office is clean, uncluttered and easily accessible. Supplies are well organized</td>
<td>The Health Office is consistently clean, and organized. Supplies are well organized and the CSN monitors for expiration dates.</td>
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### Domain 3: Service Delivery

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<tbody>
<tr>
<td><strong>3a: Communicating with Students/Communicating Clearly and Accurately</strong></td>
<td>Oral and written communication skills are ineffective.</td>
<td>Oral and written communication skills are adequately developed.</td>
<td>Effective oral and written communication skills result in purposeful and consistently positive outcomes.</td>
<td>Effective oral and written communication skills result in community-building, enhancement and trust in school nursing services.</td>
</tr>
<tr>
<td>Evidence/Examples</td>
<td>The CSN does not proofread communications prior to dissemination.</td>
<td>The CSN inconsistently proofreads prior to dissemination.</td>
<td>The CSN consistently proofreads prior to dissemination.</td>
<td>The CSN consistently proofreads communications prior to dissemination.</td>
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<td>The CSN does not use language which is appropriate and professional.</td>
<td>The CSN inconsistently uses language which is appropriate and professional.</td>
<td>The CSN consistently uses language which is appropriate and professional.</td>
<td>The CSN adapts communications to the specific needs of the recipient(s).</td>
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<td>Evidence/Examples</td>
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<td></td>
<td>The CSN does not proofread communications prior to dissemination.</td>
<td>The CSN inconsistently proofreads prior to dissemination.</td>
<td>The CSN consistently proofreads prior to dissemination.</td>
<td>The CSN consistently proofreads communications prior to dissemination.</td>
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<td>The CSN does not use language which is appropriate and professional.</td>
<td>The CSN inconsistently uses language which is appropriate and professional.</td>
<td>The CSN consistently uses language which is appropriate and professional.</td>
<td>The CSN adapts communications to the specific needs of the recipient(s).</td>
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<tr>
<td><strong>3b: Using Questioning and Discussion Techniques/Gathering Information</strong></td>
<td>CSN does not use appropriate information gathering techniques.</td>
<td>CSN uses appropriate information gathering techniques most of the time.</td>
<td>CSN consistently uses appropriate information gathering techniques.</td>
<td>CSN consistently uses appropriate information gathering techniques and provides comprehensive assessments that inform treatment for the individual, the system and the practice at large.</td>
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<tr>
<td>Evidence/Examples</td>
<td>The CSN does not use appropriate information gathering techniques.</td>
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<td>The CSN does not access student’s health history or demographic data.</td>
<td>The CSN inconsistently accesses student’s health history or demographic data.</td>
<td>The CSN consistently utilizes available student health history or demographic data.</td>
<td>The CSN consistently utilizes available student health history, demographic data and evidence-based resources.</td>
</tr>
<tr>
<td><strong>3c: Engaging Students in Learning/Engaging the School Community in Health Education and Wellness Promotion</strong></td>
<td>CSN does not engage the school community in health education and wellness promotion.</td>
<td>CSN engages the school community in health education and wellness promotion on an inconsistent basis.</td>
<td>CSN engages the school community in health education and wellness promotion on a consistent basis.</td>
<td>CSN consistently engages and empowers the school community to learn about health and take individual and collective responsibility for promoting wellness.</td>
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<tr>
<td>Evidence/Examples</td>
<td>The CSN does not share trusted sources or links of health information and wellness promotion.</td>
<td>The CSN inconsistently provides sources of health information and wellness promotion.</td>
<td>THE CSN consistently engages the school community in health and wellness promotion through school permitted methods such as school newsletters, bulletin board displays, automated call notifications, wellness announcements or class presentations. Trusted sources of health information and wellness promotion are consistently communicated.</td>
<td>The CSN consistently engages the school community in health and wellness promotion through school permitted techniques such as school newsletters, bulletin board displays, automated phone call notifications, wellness announcements, or class presentations. The CSN assists in promotes and/or provides their school community with programs such as flu shot programs, immunization catch up programs, health and wellness fairs, or blood drives.</td>
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<tr>
<td><strong>3d: Using Assessment in Service Delivery/Utilizing Assessment Data and Resources to Deliver Appropriate Care</strong></td>
<td>CSN does not utilize assessment data and resources to inform/deliver appropriate care.</td>
<td>CSN inconsistently utilizes assessment data and resources to inform/deliver appropriate care.</td>
<td>CSN consistently and effectively utilizes assessment data and resources to deliver appropriate care.</td>
<td>CSN consistently and effectively utilizes assessment data and resources to deliver exceptional care and outcomes.</td>
</tr>
<tr>
<td>Evidence/Examples</td>
<td>The CSN fails to utilize physical and written assessment resources or other credible health information sources to inform/deliver appropriate care to a student presenting with a complex health problem such as a concussion.</td>
<td>The CSN inconsistently utilizes physical and written information or other credible health information sources (healthcare provider orders, standardized, trusted assessment tools such as those provided by Brainsteps program) to inform/deliver appropriate care for a student presenting with a complex health problem, such as a concussion.</td>
<td>The CSN consistently utilizes physical and written information or other credible health information sources (healthcare provider orders, standardized, trusted assessment tools such as those provided by Brainsteps program) to inform/deliver appropriate care for a student presenting with a complex health problem such as a concussion.</td>
<td>The CSN consistently utilizes physical and written information or other credible health information sources (healthcare provider orders, standardized, trusted assessment tools such as those provided by Brainsteps program) to inform/deliver appropriate care for a student presenting with complex health problem such as a concussion.</td>
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<td><strong>3e: Demonstrating Flexibility and Responsiveness</strong></td>
<td>CSN does not demonstrate flexibility and responsiveness to making changes to a plan or program.</td>
<td>CSN is willing to make some changes to a plan or program when the results suggest that there is a need for change but does not consistently evaluate whether the changes were helpful.</td>
<td>CSN is willing to make some changes to a plan or program when the results suggest that there is need for change and consistently evaluates whether the changes were helpful.</td>
<td>CSN consistently seeks input from all stakeholders to guide decision-making. Ongoing flexibility and responsiveness within the context of collaboration and systematic evaluation of changes results in meaningful improvements and improved outcomes.</td>
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<tr>
<td>Evidence/Examples</td>
<td>The CSN fails to adapt the plan of care and respond effectively to scheduled and unscheduled changes throughout the school day for a student with a chronic condition, i.e. Type 1 Diabetes.</td>
<td>The CSN inconsistently adapts the plan of care and responds effectively to scheduled and unscheduled changes throughout the school day for a student with a chronic condition, i.e. Type 1 Diabetes.</td>
<td>The CSN consistently adapts the plan of care and responds effectively to scheduled and unscheduled changes throughout the school day for a student with a chronic condition, i.e. Type 1 Diabetes.</td>
<td>The CSN consistently adapts the plan of care and responds effectively to scheduled and unscheduled changes throughout the school day for a student with a chronic condition, i.e. Type 1 Diabetes and communicates these changes to the appropriate school community.</td>
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## Domain 4: Professional Development/Professional Responsibilities

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<tr>
<td><strong>4a: Reflecting on Teaching/Reflecting on Professional Practice</strong></td>
<td>CSN does not demonstrate reflection to improve practice.</td>
<td>CSN inconsistently demonstrates reflection to improve practice.</td>
<td>CSN consistently demonstrates reflection to improve practice.</td>
<td>CSN consistently demonstrates reflection and incorporates evidence-based strategies to improve practice.</td>
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<tr>
<td><strong>Evidence/Examples</strong></td>
<td>Following a student emergency, the CSN does not perform an After Action Review.</td>
<td>Following a student emergency, the CSN performs an After Action Review but makes no changes in school protocol.</td>
<td>Following a student emergency, the CSN performs an After Action Review and implements changes to improve future responses.</td>
<td>Following a student emergency, the CSN performs an After Action Review, implements changes to improve future response, and educates school community to facilitate appropriate change in policy and procedures.</td>
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<tr>
<td><strong>4b: Maintaining Accurate Records</strong></td>
<td>CSN does not maintain accurate records.</td>
<td>CSN inconsistently maintains accurate records.</td>
<td>CSN consistently maintains accurate records.</td>
<td>CSN is exceptional at maintaining accurate records and serves as a role model for colleagues.</td>
</tr>
<tr>
<td><strong>Evidence/Examples</strong></td>
<td>The CSN does not document the mandated School Health program screening data on student health records.</td>
<td>The CSN sometimes documents the mandated School Health program screening data on student health records.</td>
<td>The CSN accurately documents the mandated School Health program screening data on student health records.</td>
<td>The CSN consistently documents the mandated School Health program screening data on student health records and serves as a mentor to colleagues.</td>
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<td>The CSN does not collect data throughout the school year to be included in the SHARRS (School Health Annual Request for Reimbursement System) report.</td>
<td>The CSN collects some of the data throughout the school year to be included in the SHARRS (School Health Annual Request for Reimbursement System) report.</td>
<td>The CSN collects data throughout the school year to be included in the SHARRS (School Health Annual Request for Reimbursement System) report.</td>
<td>The CSN collects data throughout the school year to be included in the SHARRS (School Health Annual Request for Reimbursement System) report and works with district staff to ensure the accuracy of data submitted.</td>
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<td>The CSN does not report objective data in school accident/incident reports on students and staff.</td>
<td>The CSN reports minimal objective data in school accident/incident reports on students and staff.</td>
<td>The CSN reports objective data in school accident/incident reports on students and staff.</td>
<td>The CSN reports detailed objective data in school accident/incident reports on students and staff.</td>
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<tr>
<td><strong>4c: Communicating with Families/Communicating with Members of the School Community</strong></td>
<td>CSN provides little or no information to members of the school community.</td>
<td>CSN provides accurate information to members of the school community when necessary.</td>
<td>CSN provides accessible and accurate information to members of the school community on a consistent basis.</td>
<td>CSN engages others in determining the information that would be of value to the larger school community and provides it in an accessible, effective and accurate manner.</td>
</tr>
<tr>
<td><strong>Evidence/Examples</strong></td>
<td>The CSN provides no information to the Concussion Management Team. The CSN refuses to provide data to the School Health Advisory Committee for their use in developing student wellness programs.</td>
<td>The CSN provides limited information to the Concussion Management Team. The CSN provides minimal data to the School Health Advisory Committee for their use in developing student wellness programs.</td>
<td>The CSN provides information to the Concussion Management Team. The CSN provides data to the School Health Advisory Committee for their use in developing student wellness programs.</td>
<td>The CSN is an active participant in the Concussion Management Team, assisting with the development of individual student plans. The CSN is an active member of the School Health Advisory Committee and routinely provides data for their use in developing student wellness programs.</td>
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<td><strong>Needs Improvement</strong></td>
<td><strong>Proficient</strong></td>
<td><strong>Distinguished</strong></td>
</tr>
<tr>
<td><strong>4d: Participating in a Professional Community</strong></td>
<td>CSN is not a participating member of a professional community.</td>
<td>CSN is a participating member of a professional community when requested to do so.</td>
<td>CSN is an active participant among the professional community and actively maintains positive and productive relationships.</td>
<td>CSN makes a substantial contribution to the professional community and assumes a leadership role.</td>
</tr>
<tr>
<td><strong>Evidence/Examples</strong></td>
<td>The CSN does not work with community agencies in planning activities and workshops that pertain to health, wellness and safety in the school environment.</td>
<td>The CSN does not independently seek out opportunities to work with community agencies in planning activities and workshops that pertain to health, wellness and safety in the school environment.</td>
<td>The CSN works with community agencies in planning activities and workshops that pertain to health, wellness and safety in the school environment.</td>
<td>The CSN bring together community agencies to planning activities and workshops that pertain to health, wellness and safety in the school environment.</td>
</tr>
<tr>
<td>Component</td>
<td>Failing</td>
<td>Needs Improvement</td>
<td>Proficient</td>
<td>Distinguished</td>
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<tr>
<td><strong>4e: Growing and Developing Professionally</strong></td>
<td>CSN is not engaged in professional learning.</td>
<td>CSN participates in required professional learning activities.</td>
<td>CSN participates in both required and self-initiated professional development based upon strengths and needs.</td>
<td>CSN actively pursues and develops professional development opportunities and makes a substantial contribution to the profession.</td>
</tr>
<tr>
<td>Evidence/Examples</td>
<td>The CSN does not belong to local, state and national professional organizations. The CSN does not enhance professional nursing practice or role performance by networking and interacting with peers and colleagues. The CSN does not attend continuing education programs offered by professional organizations to keep current on emerging health issues affecting his/her student population and school community.</td>
<td>The CSN belongs to local, state and national professional organizations, but does not participate in their activities. The CSN minimally enhances professional nursing practice or role performance by networking and interacting with peers and colleagues. The CSN does not attend continuing education programs offered by professional organizations, on a regular basis, to keep current on emerging health issues affecting his/her student population and school community.</td>
<td>The CSN maintains active member status in local, state and national professional organizations. The CSN enhances professional nursing practice or role performance by networking and interacting with peers and colleagues. The CSN regularly attends continuing education programs offered by professional organizations to keep current on emerging health issues affecting his/her student population and school community.</td>
<td>The CSN belongs to and is seen as a leader in local, state and national professional organizations. The CSN enhances professional nursing practice or role performance by networking and interacting with peers and colleagues and serves as a mentor for new CSNs. The CSN regularly attends continuing education programs offered by professional organizations to keep current on emerging health issues affecting his/her student population and school community and shares information gained with colleagues. The CSN seeks opportunities to develop and/or present evidence-based content to colleagues.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Component</th>
<th>Failing</th>
<th>Needs Improvement</th>
<th>Proficient</th>
<th>Distinguished</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>4f: Showing Professionalism/Demonstrating Professionalism</strong></td>
<td>CSN displays inappropriate interactions with members of the school community and violates principles of confidentiality.</td>
<td>CSN is appropriate in interactions with members of the school community and protects confidentiality.</td>
<td>CSN displays high standards of honesty, integrity, and confidentiality when interacting with members of the school community.</td>
<td>CSN holds the highest ethical standards when interacting and advocating for members of the school community.</td>
</tr>
<tr>
<td>Evidence/Examples</td>
<td>The CSN does not educate members of the school community about therapeutic and professional student-nurse relationships and role boundaries. The CSN is unaware of, nor adheres to educational laws, health care laws, nursing ethics, federal or state regulations and district policies relating to privacy and confidentiality.</td>
<td>The CSN provides minimal education to members of the school community about therapeutic and professional student-nurse relationships and role boundaries. The CSN is aware of educational laws, health care laws, nursing ethics, federal or state regulations and district policies relating to privacy and confidentiality.</td>
<td>The CSN educates members of the school community about therapeutic and professional student-nurse relationships and role boundaries. The CSN adheres to educational laws, health care laws, nursing ethics, federal or state regulations and district policies relating to privacy and confidentiality.</td>
<td>The CSN educates members of the school community and serves as a role model about therapeutic and professional student-nurse relationships and role boundaries. The CSN adheres to educational laws, health care laws, nursing ethics, federal or state regulations and district policies relating to privacy and confidentiality and educates administrators and colleagues.</td>
</tr>
</tbody>
</table>

*School community- students, staff, parents, colleagues*