



# Coronado Unified School District

## NURSE EVALUATION AND REFLECTION FORM - PROB/TEMP/IP

<b>Evaluatee Name:</b>		<b>School Year:</b>	<b>Educator Status:</b> (Mark all that apply)	
<b>Site/Assignment:</b>		<b>Course/Subject/Grade Level:</b>	<input type="checkbox"/> Temporary	<input type="checkbox"/> Improvement Plan
			<input type="checkbox"/> Probationary (Year 1)	
			<input type="checkbox"/> Probationary (Year 2)	

**Evaluator Name & Position:**

### PART 1: EVALUATION PLAN

#### Coronado Unified School District Governing Board Goals

<b>Learning:</b> Integrate personalized learning with assessment methods that will prepare all students for academic and vocational success.	<b>Communication:</b> Communicate openly, freely, and accurately to engage and involve all shareholders.	<b>Support:</b> Maintain safe and supportive schools where students and staff thrive.
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#### School Site(s)' Focus

<b>Domain:</b>	<b>Focus Statement:</b>
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#### Goals

- **Temporary/Probationary (Years 1-2 in the district)** develop three (3) goals – Written goals and conference due September 30th. Will be evaluated every year.
- **Improvement Plan** develop three (3) goals that pertain to areas of improvement needed - Written goals and conference due September 30th.

\* Please note that staff members who work at multiple sites will collaborate with department members to develop goals related to the site(s)' focus  
 \* For reference, SMART Goal(s) = **S**pecific, **M**easurable, **A**ttainable, **R**elevant and **T**ime-Bound; not necessarily based upon student achievement data

Goal 1 Related to Site Focus	Goal 2 Personal Learning Goal	Goal 3 15. Determines priorities and goals in collaboration with student, family, and school personnel (Prob/Temp)
<b>Domain:</b> <b>Sub-Area:</b>	<b>Domain:</b> <b>Sub-Area:</b>	<b>Sub Area(s):</b>
<b>SMART Goal:</b>	<b>SMART Goal:</b>	<b>SMART Goal:</b>
<b>Baseline:</b> <i>Where are you now?</i>	<b>Baseline:</b> <i>Where are you now?</i>	<b>Baseline:</b> <i>Where are you now?</i>

<b>Action Plan:</b> <i>What steps will you take to reach this goal?</i>	<b>Action Plan:</b> <i>What steps will you take to reach this goal?</i>	<b>Action Plan:</b> <i>What steps will you take to reach this goal?</i>
<b>Evidence:</b> <i>What evidence will you use to show growth?</i>	<b>Evidence:</b> <i>What evidence will you use to show growth?</i>	<b>Evidence:</b> <i>What evidence will you use to show growth?</i>

**Observation Cycle**

**Temporary/Probationary (Years 1-2):** 1<sup>st</sup> Observation due October 30<sup>th</sup>, 2<sup>nd</sup> Observation due 2<sup>nd</sup> Friday in December, 3<sup>rd</sup> Observation due April 15<sup>th</sup>, Final Evaluation Summary and Conference due March 1<sup>st</sup> (3<sup>rd</sup> Observation of evaluatee can be Formal or Informal).  
**Improvement Plan:** 1<sup>st</sup> Observation due October 30<sup>th</sup>, 2<sup>nd</sup> Observation due 2<sup>nd</sup> Friday in December, 3<sup>rd</sup> Observation due February 15<sup>th</sup>, Final Evaluation Summary and Conference due March 1<sup>st</sup>.

**Agreement**

Signatures below indicate evaluator and evaluatee have both agreed upon the goals

Evaluator's Signature:	Position:	Date:
Evaluatee's Signature:	Position:	Date:

## PART 2: PRE-OBSERVATION / OBSERVATION / POST-OBSERVATION FORM

### PRE-OBSERVATION

Evaluattee will complete at least 3 duty days prior to the scheduled observation for all formal observations

<b>Observation #1:</b> Goal Focus:	<b>Learning/Activity Objective:</b>  <b>Student Success Criteria:</b> <i>What am I learning?</i> <i>Why am I learning this?</i> <i>How will I know that I have learned it?</i>	<b>Do you have any special requests/look fors?</b>
<b>Observation #2:</b> Goal Focus:	<b>Learning/Activity Objective:</b>  <b>Student Success Criteria:</b> <i>What am I learning?</i> <i>Why am I learning this?</i> <i>How will I know that I have learned it?</i>	<b>Do you have any special requests/look fors?</b>
<b>Observation #3 (if formal):</b> Goal Focus:	<b>Learning/Activity Objective:</b>  <b>Student Success Criteria:</b> <i>What am I learning?</i> <i>Why am I learning this?</i> <i>How will I know that I have learned it?</i>	<b>Do you have any special requests/look fors?</b>

### OBSERVATION

**Observation #1**

**Date:**

**Descriptive Evidence During Observation:**

**Observation #2**

**Date:**

**Descriptive Evidence During Observation:**

**Observation #3****Date:****Descriptive Evidence During Observation:****OBSERVATION EVALUATION OF SET GOALS**

U = Unsatisfactory, D = Developing, P = Proficient, E = Exemplary

(Indicate the date observed in the corresponding letter box)

<b>Standards Based Evidence of Practice</b>	<b>U</b>	<b>D</b>	<b>P</b>	<b>E</b>
1. Demonstrates evidence of use of theory by sharing information with peers, students, family, staff, other professionals, and the community to assist change.				
2. Demonstrates application of theory to practice by use of most recent techniques and information which govern actions.				
3. Consults with school administration to establish, review, and revise procedures for a comprehensive school health program.				
4. Assumes responsibility for in-service programs for school personnel regarding health-related issues.				
5. Assists in selection, training, supervision and evaluation of paraprofessionals.				
6. Establishes processes to identify students at-risk for physical and psychosocial problems.				
7. Communicates health needs of students to appropriate school personnel.				
8. Establishes a follow-up mechanism for referral of identified students.				
9. Completes written reports to provide continuity and accountability of the program.				
10. Assumes responsibility for initiation of the pupil health record upon enrollment.				
11. Records data on a cumulative health record.				
12. Identifies the relationship between health status and the student's ability to learn.				
13. Provides written nursing care plans for students with significant health problems.				
14. Informs school personnel about adaptations of the comprehensive school program, interventions, or environment required by students to meet their individual health needs.				
15. Determines priorities and goals in collaboration with student, family, and school personnel.				
16. Participates as an integral member of the interdisciplinary team(s).				
17. Assumes leadership in the individualized education plan (IEP) when the primary service for the student is health related.				

18. Identifies when supportive disciplines have similar skills and shares power and influence; understands and expresses appreciation of unique contributions of each discipline.				
19. Demonstrates use of principles of learning and appropriate teaching methods.				
20. Teaches the principles of health promotion and disease prevention to individuals and groups.				
21. Acts as a resource person in health education to school personnel, students, and families.				
22. Promotes preventive and other self-care strategies with school personnel.				
23. Initiates and participates in a written evaluation process for the school health program.				
24. Takes action regarding recommendations for change resulting from program evaluation and review.				
25. Participates in continuing education programs to increase knowledge, update skills, and maintain certification.				
26. Contributes to the professional growth of others by providing appropriate in-service or workshop.				
27. Interprets school health services needs and the role of the school nurse to the school and community.				
28. Collaborates with agencies within and outside of the community to assure continuity of service and care.				
29. Informally critiques current research in professional nursing articles and shares information with school personnel when appropriate.				
30. Obtains expert consultation as needed.				

**Evaluator Commendations and Recommendations:**

**Observation #1:**

**Observation #2:**

**Observation #3:**

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<b>Evaluatee Reflections:</b>  <b>Observation #1:</b>       <b>Observation #2:</b>       <b>Observation #3:</b>
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<b>POST-OBSERVATION CONFERENCE</b>
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<b>Evaluator and Evaluatee Collaborative Notes:</b>  <b>Observation #1:</b>	<b>Action Steps:</b>  <b>Observation #1 Steps:</b>
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Evaluator's Signature:	Position:	Date:
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Evaluatee's Signature:	Position:	Date:
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<b>Observation #2:</b>	<b>Observation #2 Steps:</b>
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Evaluator's Signature:	Position:	Date:
Evaluatee's Signature:	Position:	Date:
<b>Observation #3:</b>	<b>Observation #3 Steps:</b>	
Evaluator's Signature:	Position:	Date:
Evaluatee's Signature:	Position:	Date:
<p>All written summaries and observations shall be delivered to the evaluatee within three (3) duty days following the observation so that the evaluatee has time for self-reflection within (2) duty days. The post-observation conference will be held within six (6) duty days following the evaluatee's observation. The evaluatee has the right to respond to the post-observation conference in writing, and the response shall be attached to the Evaluation and Reflection Form.</p>		

## PART 3: FINAL EVALUATION SUMMARY AND CONFERENCE

**Evaluatee Reflection Completion Date** (3 duty days prior to meeting):

**Meeting Date:**

**Evaluatee:**

1. **Reflect on your progress from this school year toward implementing your action plans and meeting your goals. Include your evidence below.**

**Goal 1:**

**Goal 2:**

**Goal 3:**

2. **Using specific examples, reflect on two highlights from this school year. What are you looking forward to next year? What are a couple of next steps?**

**Evaluator Narrative Summary (Commendations & Recommendations):**

**Evaluator's Signature:**

**Date:**

**Evaluatee's Comments:** After the summary conference concludes, the evaluatee shall have a right to respond to the evaluation in writing. This response shall be attached to the evaluation prior to it being placed in the evaluatee's personnel file. The evaluatee has ten (10) duty days after the receipt of the evaluation to provide a written response.

I acknowledge being apprised of the above evaluation on a personal conference.

I have attached a statement:      Yes       No

**Evaluatee's Signature:**

**Date:**