

Model Rubric for Specialized Instructional Support Personnel (SISP) Evaluation:

School Nurses

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SISP RUBRIC for EDUCATOR EVALUATION

The model rubrics for educator evaluation are grounded in DESE's Educational Vision for effective teaching and leadership, and reflect input from educators, students, and families across Massachusetts on antiracist, inclusive, and equitable practices that support *all students* to attain academic knowledge and skills, understand and value themselves and others, and engage with the world.¹

<u>Role-specific Model SISP Rubrics</u> were developed by representatives from state-level professional associations² in consultation with DESE and will be piloted during the 2025-26 school year. These role-specific Model SISP Rubrics support educators in the following roles:

- School Counselor
- School Librarian
- School Nurse
- School Psychologist
- School Social Worker/School Adjustment Counselor
- Speech and Language Pathologists

Each rubric includes evidence-based, culturally and linguistically sustaining practices across four Standards:

- Standard I: Curriculum, Planning, and Assessment
- Standard II: Teaching All Students
- Standard III: Family and Community Engagement
- Standard IV: Professional Culture

These four Standards guide the development of Massachusetts educators from preparation through employment, articulating the key knowledge, skills, and behaviors essential of all educators in public schools in Massachusetts to disrupt patterns of inequity and well serve richly diverse student bodies with varied educational needs.

NOTE: In this rubric, **"all students"** represents *each and every student,* with particular focus on students who have been historically marginalized or underserved by our education systems, including but not limited to those who identify as Black, Hispanic/Latino, Asian, Indigenous, and Multiracial students, students with disabilities, multilingual learners, LGBTQIA+ students, students experiencing homelessness and/or financial insecurity, and students who are undocumented.

Culturally and linguistically sustaining practices affirm and value students' cultures, prior experiences, and linguistic resources to make learning more relevant and effective, promote academic achievement, cultural competence, and sociopolitical awareness, and value multilingualism as an asset. These practices are essential for all students in the classroom, regardless of their background, culture, or identity. All students benefit from an approach that is intended to meet the needs of diverse learners; from expanded cultural competence and sociopolitical consciousness; and from explicit instruction in the functions of language.

¹ DESE's Educational Vision: <u>https://www.doe.mass.edu/commissioner/vision/</u>.

²Massachusetts School Counselors Association (MASCA), Massachusetts School Library Association (MSLA), Massachusetts School Nurse Organization (MSNO), Massachusetts School Psychologists Association (MSPA), Massachusetts Speech-Language Hearing Association (MSHA). For a list of educators who supported the development of this rubric, please see Acknowledgements.

Using the SISP Rubric in the Educator Evaluation Process

The Model SISP rubrics are designed to elevate and highlight effective practices in specific SISP roles in order to guide a meaningful and supportive evaluation process. Evaluators should identify and use the rubric most closely aligned with the role of the educator. As SISP educators work in different contexts and undertake different responsibilities (e.g., a school counselor in one school may be responsible for career counseling whereas another may focus on social-emotional support), districts may consider further customizing the rubric by emphasizing and prioritizing certain Indicators and elements.

Rubrics are designed to help educators and evaluators (1) develop a consistent, shared understanding of what Proficient performance looks like in practice, (2) develop a common terminology and structure to organize evidence, and (3) make informed professional judgments about Formative and Summative Performance Ratings on each Standard and overall. As a result, rubrics play a part in all five components of the evaluation cycle.

- 1. **Self-Assessment:** Educators use the rubric to examine their own practice and to identify areas of strength as well as areas for further growth and development.
- 2. Analysis, Goal Setting, and Plan Development: Educators and evaluators together review the rubric and agree on Indicators that will be the focus of their attention during the evaluation cycle. In addition, educators and their evaluators develop goals for improving professional practice and student learning. The rubric helps to paint a clear picture of what it will look like to demonstrate proficiency. This description is the starting point for conversations about specific, measurable, actionable, and equity-focused goals.
- 3. Implementation of the Educator Plan: Educators and evaluators use the rubric to ensure that they are gathering evidence from multiple sources that will support a fair and comprehensive assessment of the educator's practice on each Standard. The elements of effective practice defined in each Proficient descriptor can be used as a guide for feedback, professional learning, and the collection of evidence. Given the breadth and depth of practices represented, it is recommended that educators and evaluators prioritize certain Indicators aligned to educator, school, and district goals for professional learning, feedback, support, and evidence collection.

Note: The rubrics are written to support educators and evaluators in making judgments about evidence gathered across multiple measures, such as observations, artifacts of practice, student and family feedback, and evidence of student learning. The model rubrics were not designed to be observation tools and should not be used for that purpose.

In addition, in some cases, SISP educators' work activities are protected by privacy laws that prohibit an evaluator without the appropriate licensing from directly observing certain activities. For these educators, observations of practice can occur in settings such as classroom presentations, IEP/504 meetings, faculty or team meetings, and public settings. For further information, please consult the section on this <u>Commonwealth of Massachusetts webpage on</u> <u>"Heightened Duty of Confidentiality in Mental Health."</u>

4. Formative Assessment/Evaluation and Summative Evaluation: The rubric serves as the organizing framework for these conferences and reports as evaluators assess the educator's performance on the continuum of practice described by the rubric.



For each Standard, there are Indicators that describe specific knowledge, skills, and performance at four levels. Distinctions by performance level are determined based on variations in quality (the ability to perform the skill, action, or behavior), scope (the scale of impact), and consistency (the frequency that skill, action, or behavior is demonstrated with quality). Continued growth and reflection are expected across all levels of performance, as described below:

Proficient				
The educator's performance fully meets the requirements. This is the expected, rigorous yet attainable level of performance for most educators.				
Unsatisfactory Needs Improvement Exemplary				
The educator's performance is consistently below the requirements and has not shown improvement.	The educator's performance is below the requirements but not considered to be Unsatisfactory at this time. Improvement is necessary and expected.	The educator's performance exceeds requirements and consistently demonstrates high- quality practice with impact in the classroom, clinical setting, or beyond.		

Additional Guidance for the Evaluation of School Nurses

This rubric is informed by the following frameworks and standards:

• School Nursing Practice Framework

National Association of School Nurses. (2024). A contemporary *Framework* update for today's school nursing landscape: Introducing the *School Nursing Practice Framework* TM. *NASN School Nurse*, *0*(0). doi:10.1177/1942602X241241092

- School Nursing: Scope and Standards of Practice, 4th Edition National Association of School Nurses (NASN) (2022). School Nursing : Scope and Standards of Practice, 4th Edition. National Association of School Nurses.
- Laws and Regulations for the Board of Registration in Nursing Board of Registration in Nursing (2025). Laws and regulations for the Board of Registration in Nursing. Commonwealth of Massachusetts, Executive Office of Health and Human Services.
- <u>School Health Services Department of the Department of Public Health</u> Bureau of Community Health and Prevention (2025). *School Health Services*. Commonwealth of Massachusetts, Executive Office of Health and Human Services, Department of Public Health.

It is imperative that the evaluator possesses knowledge, understanding, and/or experience in school nursing, including familiarity with the legal and ethical responsibilities of school nurses. This includes, but is not limited to, requirements set forth by the Massachusetts Board of Registration in Nursing (MA BORN), which licenses registered nurses (RNs), and the Massachusetts Department of Public Health (DPH) laws and regulations as outlined in the attached document.



In districts with school nurse leaders or managers, the school nurse leader/manager should assume full or partial responsibility for evaluating school nurses, with a minimum responsibility of supporting evaluators who are not school nurses.

In districts without school nurse leaders or managers, guidance from individuals who possess expertise in school nursing practice and a thorough understanding of the laws and regulations that govern school nursing is recommended.



Si	andard I: Curriculum, Planning, and Assessment	Standard II: Teaching All Students		Standard III: Family and Community Engagement		Standard IV: Professional Culture
1. 2. 3. B. 1. 2.	Curriculum and Planning Professional Knowledge Knowledge of Students Health Literacy Assessment Purposeful Assessment	 A. Instruction 1. High Expectations and Support 2. Engaging Instruction 3. Inclusive Instruction B. Learning Environment 1. Positive Relationships 2. Safe Learning Environment 3. Collaborative Learning Environment 4. Student Ownership of Learning 5. Critical Thinking 	A. 1. B. 1. 2. C. 1.	Communication Communication with Families Engagement Family Engagement Community Engagement Collaboration Collaboration on Student Learning and Well-being	1. 2. 3. B. 1. 2. 3.	Reflective Practice and Professional Growth Reflective Practice Goal-Setting Professional Learning and Growth Shared Responsibility, Collaboration, and Decision- Making Shared Responsibility Professional Collaboration Decision-Making Professional Perofessional
	with coneagues				1. 2.	Responsibilities Judgment Professional Responsibilities

NOTE: Some Indicators (such as Reflective Practice and Professional Growth) are grouped together where and when they represent similar or complementary practices. Practices associated with the Cultural Proficiency Indicator are represented throughout the rubric as integral to performance across the Standards.



STANDARD I: Curriculum, Planning, and Assessment

The educator promotes the learning and growth of all students by providing high-quality and coherent instruction, designing and administering authentic and meaningful student assessments, analyzing student performance and growth data, using this data to improve instruction, providing students with constructive feedback on an ongoing basis, and continuously refining learning objectives.

objectives.						
	Proficient					
	 Professional Knowledge: Demonstrates sound knowledge and understanding of professional content and delivery through the use of evidence-based nursing practices that promote developmentally appropriate knowledge and skills to optimize health, wellness and access to the curriculum for all students. 					
	community, including identitie and languages, to provide rele	2. Knowledge of Students: Identifies and understands needs of individual students and the school community, including identities, skills, developmental levels, health conditions, abilities, cultures, and languages, to provide relevant nursing interventions and health education to optimize health and wellness allowing all students to access the curriculum.				
	3. Health Literacy: Skillfully uses	materials, when applicable, by:				
I-A: Curriculum & Planning	 Selecting and adapting appropriate tools and materials to plan evidence-based, inclusive, and culturally sustaining instruction (which may include individual or group activities or sessions), including identifying opportunities to facilitate the development of appropriate skills that promote care of self and optimal health. 					
		plemental resources and/or tiered s y appropriate instruction and interv				
	 Participating in professional development that reflects the health care needs of the population served. 					
	Unsatisfactory	Needs Improvement	Exemplary			
	Does not demonstrate adequate progress towards meeting <i>Proficient</i> expectations, or performance is consistently below the standard.	Demonstrates some progress towards meeting <i>Proficient</i> expectations, with areas for growth in quality, scope, or consistency.	Exceeds <i>Proficient</i> expectations through consistent high-quality practice with impact in the classroom or clinical setting or beyond.			



	Pro	ficient			
	1.	Purposeful Assessment: Uses for specific purposes, including	a variety of formal and informal as: g to:	sessments and/or collects data	
		• Understand each student's	s strengths and areas for growth.		
		• Optimize each student's h	ealth and their access to the curric	ulum.	
		ursing recommendations to meet			
		• Perform mandated screen	ings, review results, and refer base	d on screening results.	
		• Maintain health records for	or all students.		
		• Document visits and care p	provided appropriately and in a tim	ely fashion.	
			o class rate and reduce time in the h nters and minimize time out of the o	, , , , , , , , , , , , , , , , , , , ,	
 Measure and monitor all students' understanding of health teaching throughout i and their progress toward developmentally appropriate individual learning goals. 					
I-B: essment		• Actively inform clinical dec	cisions.		
	2.	Accessible Assessment: Imple by:	ments individualized assessments t	hat are accessible to all students	
	• Providing multiple ways and opportunities for students to demonstrate their learning.				
			Creating opportunities for students to be able to draw from their cultural and linguistic knowledge and personal experiences.		
		•	nt tasks, methods and instruments maintain the rigor and high n the professional school nursing standards and do not perpetuate stic bias.		
ľ	Uns	satisfactory	Needs Improvement	Exemplary	
	pro <i>Proj</i> per	es not demonstrate adequate gress towards meeting ficient expectations, or formance is consistently ow the standard.	Demonstrates some progress towards meeting <i>Proficient</i> expectations, with areas for growth in quality, scope, or consistency.	Exceeds <i>Proficient</i> expectations through consistent high-quality practice with impact in the classroom or clinical setting or beyond.	



	Pro	oficient			
	1.	Analysis and Conclusions: Util assessments to:	izes individual student assessment	data from a wide range of	
		student groups.	udents' health care needs, including d safety data and develop nursing p		
		identified concerns.			
			uation teams and make recommen alth and access to the curriculum.	dations to reduce disparate	
	2. Adjustments to Practice: Uses analysis and conclusions from a wide range of assessment da health care reports and feedback from colleagues, students, and families to adjust practice a implement differentiated and scaffolded health supports for improved and more equitable student outcomes.				
	3.	Sharing Progress with Student accessible format and languag	ts and Families: Collaborates with s e, to:	tudents and their families, in an	
I-C: Analysis	adjustments/accommedations as needed			culum, and recommend	
	4.	Sharing Progress with Colleag	ues: Collaborates with appropriate	school personnel to:	
		learning.	relevant health care needs and the		
			ent ability to safely access the curric ations needed to ensure that.	ulum and the	
		• Identify ways to build on s	tudents' strengths and support furt	-	
	 Seek feedback about clinical interventions and practices that will support and enhance student learning. 				
	Unsatisfactory Needs Improvement Exemplary				
		,	·····		
		es not demonstrate adequate	Demonstrates some progress	Exceeds Proficient expectations	
progress towards meetingtowards meeting ProficientProficient expectations, orexpectations, with areas for				through consistent high-quality practice with impact in the	
	classroom or clinical setting or				
	the standard. consistency. beyond.				
				l	



STANDARD II: Teaching All Students

The educator promotes the learning and growth of all students through instructional practices that establish high expectations, create a safe and effective classroom environment, and demonstrate cultural proficiency.

Proficient

- 1. **High Expectations and Support:** Supports all students to attain optimal health and wellness utilizing developmentally appropriate, standards-aligned, evidence-based practices by:
 - Appropriately assessing health and safety needs of individual students or populations using evidence-based nursing practice
 - Using evidence-based, culturally and linguistically sustaining instructional and clinical practices provides equitable opportunities for health promotion and disease specific learning by optimizing student health.
 - Developing and implementing individualized nursing plans of care for acute and chronic health conditions.
 - Evaluating effectiveness of nursing plans of care and modifies as appropriate to improve student outcomes and ability to access the curriculum.
- 2. **Engaging Instruction:** Engages all students as active participants in learning experiences that are relevant, real-world, and interactive by:
 - Providing developmentally appropriate individual and group health education.
 - Providing opportunities for students to make choices, explore topics and apply learning in culturally and linguistically sustaining ways, and through real-world, interactive contexts.

II-A: Instruction³

- Building on students' strengths, interests, cultural and linguistic backgrounds, and prior knowledge to support independent healthy decision making.
- Integrating digital tools and health technology that enhance learning experiences and promote the development of health management independence.
- 3. **Inclusive Instruction**: Adapts to and supports all students' learning needs, abilities, interests, and levels of readiness, including those of students with disabilities (in accordance with relevant IEPs or 504 plans), English learners and former English learners, academically advanced students, and students who have been historically marginalized, by:
 - Using evidence-based and inclusive nursing practices, allowing for tiered supports, educational and
 assistive technologies, and leveraging of students' native language and linguistic resources, to make
 developmentally appropriate content accessible and affirming for all students.
 - Providing students with multiple ways to learn content and demonstrate their understanding of health and wellness content, as appropriate.

Unsati	isfactory	Needs Improvement	Exemplary
progre <i>Proficie</i> perforr	not demonstrate adequate ess towards meeting <i>ient</i> expectations, or mance is consistently below andard.	Demonstrates some progress towards meeting <i>Proficient</i> expectations, with areas for growth in quality, scope, or consistency.	Exceeds <i>Proficient</i> expectations through consistent high-quality practice with impact in the classroom or clinical setting or beyond.

³ Note: In this rubric, instruction and instructional practices may refer to individual or group activities, sessions, interventions, or clinical practices.



Proficient Positive Relationships: Builds positive, caring relationships to help all students feel valued, respected, equitably supported, and have a sense of belonging. Safe Learning Environment: Creates and maintains a safe, supportive, and inclusive environment: Creates and maintains a safe, supportive, and inclusive environment: Creates and maintains a safe, supportive, and inclusive environment: Creates and maintains a safe, supportive, and inclusive environment: Creates and maintains a safe, supportive, and inclusive environment: Creates and maintains a safe, supportive, and inclusive environment: Creates and maintains a safe, supportive, and inclusive environment.

2. **Safe Learning Environment:** Creates and maintains a safe, supportive, and inclusive environment by:

- Establishing, with student input, routines and systems to support students in their learning environment.
- Modeling and reinforcing respect for and affirmation of differences related to background, identity, language, strengths, and challenges (self- and social awareness).
- Providing a clinic that is a welcoming, supportive environment where students/families feel safe and clinic expectations are clear, and privacy/confidentiality is maintained.
- Supporting student accountability for the impact of their actions.
- Supporting students to access the curriculum by assisting them to meet health care needs.
- Maintaining an orderly clinic space that allows safe access for physical accessibility and the developmental level for the students and staff.
- Adhering to up-to-date infection control standards.

II-B: Learning Environment

3. **Collaborative Learning Environment:** Develops students' relationship and communication skills by:

- Implementing strategies for self-care and to minimize student time out of the classroom.
- Supporting students to engage with differences and diverse perspectives.
- Encouraging students to engage in health discussions.
- Recognizing and encouraging opportunities for collaborative peer group learning experiences by creating awareness and developing empathy of others' needs.
- 4. **Student Ownership of Learning:** Guides students to self-assess, self-advocate, problem-solve, ask for support, access resources when needed, and demonstrate leadership and/or positively contribute within the clinical or school setting.
- 5. **Critical Thinking:** Promote students' ability to think critically, ask questions, and analyze sources, perspectives, and identify biases to optimize health and wellness choices.

Unsatisfactory	Needs Improvement	Exemplary
Does not demonstrate adequate	Demonstrates some progress	Exceeds <i>Proficient</i> expectations
progress towards meeting	towards meeting <i>Proficient</i>	through consistent high-quality
<i>Proficient</i> expectations, or	expectations, with areas for	practice with impact in the
performance is consistently below	growth in quality, scope, or	classroom or clinical setting or
the standard.	consistency.	beyond.



STANDARD III: Family and Community Engagement

The educator promotes the learning and growth of all students through effective partnerships with families, caregivers, community members, and organizations.

members, and organizations.					
	Proficient				
	1. Communication With Families and Caregivers: Establishes consistent, two-way communication with families and caregivers, as needed, that:				
	mily preferences, in language and formats.				
III-A: Communication	• Shares timely information about student health, wellness and safety.				
	Unsatisfactory	Needs Improvement	Exemplary		
	Does not demonstrate adequate progress towards meeting <i>Proficient</i> expectations, or performance is consistently below the standard.	Demonstrates some progress towards meeting <i>Proficient</i> expectations, with areas for growth in quality, scope, or consistency.	Exceeds <i>Proficient</i> expectations through consistent high-quality practice with impact in the classroom or clinical setting or beyond.		

	Proficient			
	1. Family Engagement: Engag	es with families in a way that is ec	quitable and collaborative by:	
		 Building positive relationships with families characterized by mutual trust and respect and recognizing the diversity of all families 		
	 Providing a variety of inclusive and culturally and linguistically responsive opportunities for all families to engage as partners in health, wellness and safety of the school community. 			
III-B:	• Providing multimodal, clear, and accessible communications when engaging families.			
Engagement		sters active community engageme mmunity members, healthcare pr		
	Unsatisfactory	Needs Improvement	Exemplary	
	Does not demonstrate adequate progress towards meeting <i>Proficient</i> expectations, or performance is consistently below the standard.	Demonstrates some progress towards meeting <i>Proficient</i> expectations, with areas for growth in quality, scope, or consistency.	Exceeds <i>Proficient</i> expectations through consistent high-quality practice with impact in the classroom or clinical setting or beyond.	



	Proficient			
	 Collaboration on Student Learning and Well-Being: Partners with families and caregivers to support students' health learning and well-being by: 			
	 Leveraging families' cult 	ural and linguistic knowledge and	expertise as assets.	
	 Engaging with families an expectations for student 	nd caregivers about student healt success.	h, wellness, safety and	
III-C: Collaboration	 Collaboratively identifying, and seeking family input on, strategies and resources for supporting student health, wellness and safety in and out of school. 			
	 Working with families, caregivers, staff and community partners to develop individualized plans that reflect cultural distinctiveness, individual skills, successes, and opportunities for growth within the context of their medical plan of care. 			
	Unsatisfactory	Needs Improvement	Exemplary	
	Does not demonstrate adequate progress towards meeting <i>Proficient</i> expectations, or performance is consistently below the standard.	Demonstrates some progress towards meeting <i>Proficient</i> expectations, with areas for growth in quality, scope, or consistency.	Exceeds <i>Proficient</i> expectations through consistent high-quality practice with impact in the classroom or clinical setting or beyond.	



STANDARD IV: Professional Culture

The educator promotes the learning and growth of all students through ethical, culturally proficient, skilled, and collaborative practice.

	Proficient				
	1. Reflective Practice:				
	 Reflects on the effectiveness of nursing interventions and how one's own identities, biases, and practices impact student health and well-being. 				
	 Works to improve practice and eliminate inequities across race, gender, ethnicity, language, disability and ability, and other aspects of student identities, such that all students can optimize their health, safety, and wellness. 				
	2. Goal-Setting: Sets professional practice and student health and wellness goals that:				
IV-A:	Align with professional nursing practice and are measurable.				
	 Are based on thorough self-assessment, analysis of relevant student data, and identified community needs. 				
Reflection & Professional	• Promote inclusive and equitable learning experiences and outcomes for all students.				
Growth	3. Professional Learning and Growth:				
	 Seeks out and engages in ongoing cycles of professional learning to strengthen equitable practice and improve student health, safety, and wellness. 				
	 Applies new knowledge and skills into practice, and monitors impact on student outcomes. 				
	Unsatisfactory N	leeds Improvement	Exemplary		
	meeting <i>Proficient</i> to expectations, or performance is consistently below the g	Demonstrates some progress owards meeting <i>Proficient</i> expectations, with areas for growth in quality, scope, or consistency.	Exceeds <i>Proficient</i> expectations through consistent high-quality practice with impact in the classroom or clinical setting or beyond.		

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	Proficient				
	1. Shared Responsibility: Shares responsibility for schoolwide culture and learning expectations that promote a safe and equitable school community.				
IV-B:	2. Professional Collaboration: Collaborates and communicates with colleagues to support individual student and community goals.				
Shared Responsibility, Collaboration, & Decision-	3. Decision-Making: Contributes ideas and expertise in school-wide planning and decision- making to advance student health, safety, and wellness.				
Making	Unsatisfactory	Needs Improvement	Exemplary		
	Does not demonstrate adequate progress towards meeting <i>Proficient</i> expectations, or performance is consistently below the standard.	Demonstrates some progress towards meeting <i>Proficient</i> expectations, with areas for growth in quality, scope, or consistency.	Exceeds <i>Proficient</i> expectations through consistent high-quality practice with impact in the classroom or clinical setting or beyond.		

Proficient

- 1. Judgment: Adheres to the school district's code of ethics and Massachusetts standards of conduct for nurses.
- 2. Professional Responsibilities: Fulfills all routine professional responsibilities, including:
 - Performing nursing care in accordance with school, district, and professional practice guidelines.
 - Connecting students to needed health care and social-emotional supports as available.
 - Engaging with all colleagues with respect and civility.

• Adhering to district attendance policies.

• Advocating for the health, safety, and wellness of the school community.

Unsatisfactory	Needs Improvement	Exemplary
Does not demonstrate adequate	Demonstrates some progress	Exceeds <i>Proficient</i> expectations
progress towards meeting	towards meeting <i>Proficient</i>	through consistent high-quality
<i>Proficient</i> expectations, or	expectations, with areas for	practice with impact in the
performance is consistently	growth in quality, scope, or	classroom or clinical setting or
below the standard.	consistency.	beyond.



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Glossary of Terms

Academic Achievement: Attainment of academic skills and knowledge to meet or exceed grade-level standards in a comprehensive and diverse range of subjects with ability to apply competencies in relevant, real world contexts.

All Students: This rubric frequently references "all students," which represents *each and every student*, with particular focus on students who have been historically marginalized or underserved by our education systems, including but not limited to, those who identify as Black, Hispanic/Latino, Asian, Indigenous, and Multiracial students, students with disabilities, English learners, LGBTQIA+ students, students experiencing homelessness and/or financial insecurity, and students who are undocumented.

Anti-racist Teacher and Leader: Believes racial groups are equals in all their differences and continually engages in self-reflective work that leads to educational policies, practices, conditions, and cultures that resist and dismantle inequities due to individual and systemic racism to advance racial equity. (Guidelines for the Preparation of Administrative Leaders)

Asset-Based: Asset-based approaches intentionally build on the strengths and capacities that learners bring to school, including their languages, cultures and experiences versus deficit-based thinking that views differences as weaknesses.

Bias: A disproportionate weight that may be created intentionally or unintentionally in favor of or against an idea, thing, individual, or group. (<u>Guidelines for the Preparation of Administrative Leaders</u>)

Cultural Broker: Individuals who act as bridges between schools and diverse families and collaborate with families to support the school's goals to improve student achievement (<u>Massachusetts Family, School, and Community Partnership</u> <u>Fundamentals 2.0</u>).

Cultural Competence: Individuals' affirmation in their own culture and identity and respect and understanding for different cultures and identities.

Culturally Responsive Practice: Cultural responsiveness is an approach to viewing students' culture and identity (including race, ethnicity, multilingualism, and other characteristics) as assets, and creating learning experiences and environments that value and empower them. (<u>Supporting Culturally and Linguistically Sustaining Practices</u>)

Culturally Relevant: Aligned with and affirming to students' cultures, backgrounds, and identities. Culturally relevant pedagogy promotes students' academic achievement, cultural competence, and sociopolitical awareness. (<u>Supporting</u> <u>Culturally and Linguistically Sustaining Practices</u>)

Culturally and Linguistically Sustaining: Affirming and valuing students' prior experiences and supporting them to sustain their cultures and linguistic resources to make learning more relevant and effective, promote academic achievement, cultural competence, and sociopolitical awareness; valuing multilingualism as an asset. (Supporting Culturally and Linguistically Sustaining Practices)

Curricular materials are resources teachers use to facilitate sequences of learning experiences (e.g., lesson and unit plans, texts); also called adopted or written curriculum, or instructional materials. (<u>Curriculum Matters</u>)

Curriculum: a sequence of student learning experiences teachers facilitate, may use curricular materials as a foundation; also called enacted or taught curriculum. (<u>Curriculum Matters</u>)

Digital Literacy: The ability to use digital technology, communication tools or networks to locate, evaluate, use, and create information; the ability to understand and use information in multiple formats from a wide range of sources



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when it is presented via computers; and the ability to perform tasks effectively in a digital environment. Literacy includes the ability to read and interpret media, reproduce data and images through digital manipulation, and evaluate and apply new knowledge gained from digital environments (<u>Digital Literacy and Computer Science Framework</u>).

Equity: Placing a heightened focus on groups, particularly racial groups, experiencing disproportionate impact through the development of systems to remediate disparities in their experiences and outcomes.

Evidence-based: Practices or programs that have evidence to show that they are effective at producing results and improving outcomes when implemented as supported by valid and reliable research. (<u>US Department of Education</u>, <u>Every Student Succeeds Act</u>)

Historically Marginalized Groups: Groups and communities that systematically experience discrimination and exclusion (social, political, economic and financial) because of unequal power relationships across economic, political, social, and cultural dimensions. These groups include but are not limited to race, culture, language, LGBTQ+, gender, and ability. Significant disparities exist for marginalized people.

High-quality Instructional Materials: High-quality materials exhibit a coherent sequence of target skills and knowledge, empirical evidence of efficacy, and other characteristics such as engaging content and inclusive design. Some factors in quality are nonnegotiable, while others vary by context: for example, compatibility with a school's technology infrastructure or cultural relevance to its student population. (<u>Curriculum Matters</u>)

Inclusive Practices: Pursuing deliberate actions to create welcoming environments and ensure differences are actively sought and heard, and that every individual feels a sense of belonging and a role in impacting decision-making, practices, and policies.

Linguistically Responsive: Aligned with and affirming to students' and families' linguistic backgrounds and skills. This includes use of high-quality translation and interpretation, as well as translanguaging (see below). (<u>The Massachusetts</u> <u>Blueprint for English Learner Success</u>)

Massachusetts Standards of Conduct for Nurses: 244 CMR 9.00 sets forth the standards of conduct applicable to licensed nurses, and additional standards applicable to registered nurses with advance practice authorization. Failure to comply with these standards constitutes grounds for disciplinary action by the Board of Registration in Nursing.

Non-Academic Student Outcomes: Outcomes associated with students' capacity to understand and value self (know their own strengths, interests, and areas of growth, be self-aware, be a self-advocate, and make responsible decisions), understand and value others (understand differences and multiple perspectives, empathize with others, and build connections with peers and adults), and engage with the world (understand and think critically about local, national, and world events and societal systems; and create positive change through civic action).

Restorative Practice: A framework of processes that schools can use to prevent and address conflict and poor behavior, including, but not limited to, restorative circles, family group conferences, social and emotional learning, and informal practices such as affective questioning. Rather than implementing a program, restorative practices focus on building and maintaining healthy relationships among individuals and maintaining a sense of community. In the case of a disciplinary infraction, restorative practices allow individuals to take full responsibility for their behavior by addressing the individual(s) affected by the behavior. Through these practices, individuals come to understand how their behavior affected others, recognize that their behavior was harmful to others, move toward repairing the harm, and work on not repeating that behavior again. (National Center on Safe and Supportive Learning Environments)

Sociopolitical Awareness: The ability to identify, analyze, and work to solve real-world problems by thinking critically and drawing conclusions about complex issues related to equity, identity, power, or bias.



Translanguaging: The process whereby multilingual speakers utilize all of their languages as an integrated communication system to learn. (<u>The Massachusetts Blueprint for English Learner Success</u>)

Universal Design for Learning (UDL) is intended to increase access and engagement in learning by reducing physical, cognitive, intellectual, and organizational barriers, and other obstacles. It includes providing learners with multiple means of engagement, representation, action and expression. (<u>Multi-Tiered System of Support</u>)