*To ensure accessibility in accordance with the Americans with Disabilities Act (ADA),   
please use the down arrow key to navigate this tool.*

Educator Name: Click to enter text. Proposed Observation Date: Click to enter a date.

Evaluator Name: Click to enter text. Observation Time/Duration: Click to enter text.

School Name: Click to enter text. Date of Pre/Post Conference: Click to enter text.

This tool is for the educator and evaluator to discuss an upcoming scheduled observation or to discuss recent scheduled and/or unscheduled observations. It is intended to guide thinking and conversation. **The questions on this form serve as a guide to start conversation and are not required**. Every question may not be answered or be relevant to every observation.

**Professional Practice Standards**

| **Questions to Guide Discussions:** | **Notes/Evidence Reviewed:** |
| --- | --- |
| * How will/did you collect comprehensive data pertinent to the healthcare consumer? * How will/did you analyze assessment data to determine diagnoses? * How will/did you identify a plan that prescribes strategies and alternatives for the healthcare consumer? * How will/did you implement the individualized plan and provide consultation to effect change? * How will/did you evaluate progress towards attainment of outcomes? * How will/did you communicate and collaborate in all areas of nursing practice? * How will/did you attain knowledge and evaluate one’s own nursing practice in relation to professional practice standards and guidelines? * How will/did you manage school health services? * How will/did you integrate evidence and research to contribute to quality nursing practices? * How will/did you demonstrate leadership in a professional setting? | Click here to enter text. |

| Progress Toward Professional Practice Goal |
| --- |
| Discuss progress made toward the PPG and log evidence of discussion here:  Click here to enter text. |