

Accommodations & Adaptations for Diverse Learners Guidelines that inform the work of the School Nurses, 2009

Based on recommendations from School Nurses and School Nurse Educators, the following table has been developed as a guideline indicating ways that School Nurses may meet the intent of the Accommodations and Adaptations competencies required by Chapter 49. The left column indicates the language as written in Chapter 49. Boxed words on the left side are substituted in the right column with more job-specific language, in recognition of the role of school nurses in relation to these competencies.

Regulation Language	Activities that relate to the work of the School Nurse
<p>I. Types of Disabilities and Implications for Learning Candidates will be able to:</p>	<p>I. Types of Disabilities and Implications for Learning Candidates will be able to: Example: Create IEP for student with Cerebral Palsy, or a 504 plan for a student with Diabetes</p>
<p>A. Demonstrate an understanding of and ability to plan for: type, identification and characteristics of different types of disabilities, as well as effective, evidence-based instructional practices and adaptations.</p>	<p>A. Demonstrate an understanding of and ability to plan for: type, identification and characteristics of different types of disabilities, as well as effective, evidence-based nursing interventions. Examples: Adapting screening procedures; Tracking students with disabilities; Create IHP and IEP for students with disabilities, e.g., Diabetes management for a student with a learning disability; create a health lesson for a life skills class.</p>
<p>B. Demonstrate an understanding of the legal rights and responsibilities of the teacher related to special education referral and evaluation and the rights and procedural safeguards that students are guaranteed.</p>	<p>B. Demonstrate an understanding of the legal rights and responsibilities of the certified school nurses related to special education referral and evaluation and the rights and procedural safeguards that students are guaranteed. Examples: Knowledge of laws, federal and state mandates; HIPAA/FERPA requirements; Academic and community referrals for social and health services Knowledge of IEP timelines, 504 contracts, ADA and IDEA.</p>
<p>C. Demonstrate an understanding of possible causes and implications of overrepresentation of minorities in special education to avoid misinterpretation of behaviors that represent cultural, linguistic differences as indicative of learning problems.</p>	<p>C. Provide culturally sensitive care to students with special health needs. Examples: Utilize cultural knowledge in assessment of and plan of care for IHPs, 504 accommodation plans and IEP- health component; Accepting Muslim custom of wearing hijab (cultural dress); Adapting the menu in the cafeteria to students' cultural and religious practices.</p>
<p>II. Cognitive Skill Development to Ensure Achievement</p>	<p>II. Cognitive Skill Development to Ensure Achievement of Students</p>

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<p>of Students with Disabilities in Standards Aligned System to include All School Environments</p>	<p>with Disabilities in Standards Aligned System to include All School Environments</p>
<p>A. Cognitive – Delineate how individuals acquire and process information.</p> <p>1. <u>Design learning environments to facilitate encoding, storage and retrieval of knowledge and information for memory, attention, perception, action, and problem solving.</u></p>	<p>A. Cognitive – Delineate how individuals acquire and process information.</p> <p>1. <u>Understand the environments that facilitate optimal functioning.</u></p> <p>Examples: Designing health-related information for the school health office (bulletin boards, newsletters, etc); Teaching school nurse students conditions for optimal work environments based on accepted standards (Ex., room temperature between 72-77 °F.); Assist teachers to understand and recognize a crisis of special health needs of students so to optimize their learning, e.g., Asthma, diabetes, seizure disorder; Create web pages for the health room provide a confidential, safe school safe zone within the health room;</p>
<p>2. Describe the developmental patterns of change, physical, cognitive, and psychosocial areas that have been identified for each stage of development.</p>	<p>2. Examples: Approach each child with developmentally-appropriate assessment and interventions; Utilize developmental theorists such as Maslow, Piaget when developing nursing care plans.</p>
<p>3. Apply concepts of human development to education and learning regarding attention, memory, conceptual knowledge and its formation, reasoning, decision making, problem-solving, executive functioning, principles and mechanisms of development, intelligence, action, and motor control.</p>	<p>3. Examples: Design health-related information for the school health office (bulletin boards, newsletters, etc); Use developmental approach to teach students with special needs about their treatment regimen; Assess and utilize decision making ability, executive functioning and problem solving ability of student when designing the Individual Health Plan (IHP) intervention and IEP objectives.</p>
<p>4. <u>Specify</u> the experiences children need from birth to age eight to prepare them <u>to learn, read, and succeed</u> in school.</p>	<p>4. <u>Understand</u> the experiences children need from birth to age eight <u>for optimal health and</u> to prepare them <u>for success</u> in school.</p> <p>Examples: Provide parents with anticipatory guidance to help prepare younger siblings for school; Provide early interventions for health needs of students in schools that provide early intervention programs. (also screening) Immunization review and counseling</p>
<p>5. Identify early interactions with adults and peers, the early childhood <u>education teaching methods and curricula, and</u> <u>comprehensive early childhood interventions</u> that support learning and development, specifically in domains that prepare</p>	<p>5. Identify early interactions with adults and peers <u>and comprehensive</u> early childhood <u>healthcare interventions</u> that support learning and development.</p> <p>Examples: Communicate with parents and other stakeholders about the available resources</p>

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children from diverse backgrounds for kindergarten and the early grades.	that support early childhood learning and development; Evaluate for the need for Occupational Therapy, Speech Therapy, Physical Therapy.
<p>B. Physical – Recognize patterns of typical physical developmental milestones and how patterns of students with disabilities may be different, and <u>plan effectively for possible accommodations and/or modifications which may be necessary to implement effective instructional practices.</u></p>	<p>B. Physical – Recognize patterns of typical physical developmental milestones and how patterns of students with disabilities may be different, and <u>make accommodations and/or modifications through effective nursing interventions.</u></p> <p>Examples: Adapt mandatory screening procedures; Adapting nursing assessments and interventions according to the child’s needs; Advocate for fully accessible environments and facilitating use thereof for students with special physical needs, e.g., “wheelchair pass” for elevator, or unlimited bathroom privileges for students with diabetes.</p>
<p>C. Social – <u>Initiate, maintain and manage positive social relationships with a range of people in a range of contexts.</u></p> <p>1. Recognize areas of development for students with disabilities and plan effectively for: interpersonal processes, forming and maintaining relationships (including parent-child, caregiver, peer, friend, sibling), <u>and attachment models and their effects on learning.</u></p>	<p>C. Social – <u>Facilitate relationships within and outside the school community.</u></p> <p>1. Recognize areas of development for students with disabilities and plan effectively for: interpersonal processes, forming and maintaining relationships (including parent-child, caregiver, other adults, peer, friend, and sibling).</p> <p>Examples: Communicate with parents, school professionals and community agencies; Arrange for student peers to assist students during lunch, etc.; Facilitate safe and developmentally-appropriate interactions between students.</p>
<p>2. Apply principles in social competence, social withdrawal, social role formation and maintenance, and prosocial behaviors, and aggression as they affect learning.</p>	<p>2. Examples: Utilize developmentally-appropriate psychiatric nursing assessments and interventions</p>
<p>D. Behavioral – Recognize patterns of typical behavioral milestones and how patterns of students with disabilities may be different, and plan effectively for positive <u>teaching</u> of appropriate behaviors that facilitate learning.</p>	<p>D. Behavioral – <u>Incorporate the nursing process* to recognize patterns of typical behavioral milestones and how patterns of students with disabilities may be different, and plan effective nursing interventions to facilitate learning.</u></p> <p>Examples: Adapt screening procedures; Adapt assessment and intervention techniques.</p> <p>* Nursing process definition: use problem-solving scientific method which requires critical thinking, sound reasoning and judgment to assist individuals/families to achieve or maintain optimal levels of functioning. The components include assessment (subjective/objective data), nursing diagnosis, plan, nursing interventions, and evaluation.</p>
<p>E. Language – <u>Apply reading predictors, analyzing the effect of individual differences in specific perceptual, linguistic, and cognitive skills and how they affect a child's ability to read.</u></p>	<p>E. Language <u>Identify sensory deficit and assess need to refer for diagnostic evaluation.</u> <u>Incorporate plan of care based on evaluation.</u></p>

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<p>1. Apply principles of early learning to language development in the following areas: language comprehension, language expression, language form and syntax, morphology and semantics.</p>	<p>Examples: Conduct hearing and vision screening and initiating referrals as needed; determine follow up to referral.</p>
<p>2. Apply and teach skills of spoken language as a precursor of reading and academic development.</p>	<p><i>2. Not part of school nursing services. The certified school nurse may offer information and insight on a student's medical status to contribute to the discussion of the most appropriate educational setting/placement for a student's educational and physical needs.</i></p>
<p>F. Positive Environments for Learning for Students with Disabilities 1. Define the scientific principles influencing academic and social behavior.</p>	<p>F. Positive Environments for Learning for Students with Disabilities 1. Define the science-based principles influencing academic and social behavior. Examples: Utilize appropriate principles when designing health education projects</p>
<p>2. Implement positive behavioral interventions based on a functional analysis of behavior.</p>	<p>2. Examples: Provide positive feedback to students and parents regarding children's health progress</p>
<p>3. Create an optimal learning environment by utilizing, evaluating, modifying and adapting the classroom setting, curricula, teaching strategies, materials, and equipment.</p>	<p>3. Create an environment that promotes an optimal level of functioning in support of learning. Examples: Collaborate with teachers: <ul style="list-style-type: none"> ▪ To design effective health education programs; ▪ By teaching them about student's signs of health crisis, i.e., emergency action plans (EAP) and means to prevent health crises. Consult with adaptive therapies to identify and provide adaptive measures in the classroom which could facilitate learning.</p>
<p>G. Collaboration and Communication 1. Identify effective co-planning and co-teaching strategies</p>	<p>G. Collaboration and Communication 1. Identify effective collaboration strategies. Examples: Meet with individual teachers, school teams, and parents; Meet with community agencies; Apply nursing process to problem solve with students, parents and teachers</p>
<p>2. Identify collaborative consultative skills and models (i.e., understanding role on the IEP team; teaming; parallel teaching).</p>	<p>2. Examples: Participate on school-based teams; Maintain continuing education on new educational practices and interventions.</p>

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	Participate in IST, RTI, SAP to provide health education, referral.
3. Identify <u>instructional levels</u> of students through collaboration with members of the IEP team.	3. Identify <u>health needs</u> of students through collaboration with members of the IEP team <u>or other educational teams</u> . Examples: Student Assistance teams Nurse's assessment of health status and needs Grade level teams Sport team
4. Understand the role of the <u>general educator</u> as part of the team for transition planning across transition points (i.e., preschool to school entry, grade level to grade level, school to school, to post school outcomes).	4. Understand the role of the <u>school nurse</u> as part of the team for transition planning across transition points (i.e., preschool to school entry, grade level to grade level, school to school, to post school outcomes). Examples: Meet with school nurses to report on students' progress; Attend transition meetings to plan for accommodations for a student with a specific medical issue, e.g., diabetes mellitus or autism.
5. Demonstrate an understanding of the meaningful roles that parents and students play in the development of the student's <u>education program</u> .	5. Demonstrate an understanding of the meaningful roles that parents and students play in the development of the student's <u>IHP (individualized health plan)</u> . Examples: Collaborate with school academic and health teams, including parents and students; Utilize health survey, i.e., diabetes, to gain parents' input for IHP and approval of plan.
6. Demonstrate sensitivity for multicultural and economic perspectives in order to encourage parent participation.	6. Examples: Utilize professional behaviors, knowledge, skills and abilities to promote family health
7. Demonstrate an understanding of how to support student and family communication and meaningful participation into the student's <u>educational program</u> .	7. Demonstrate an understanding of how to support student and family communication and meaningful participation into the student's <u>IHP</u> . Examples: Meet with parents and students;

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	Utilize the nursing process when administering nursing services; Schedule on-going communication (phone calls, emails, etc.) with parent/guardian to monitor whether the student's healthcare needs are being met by the current IHP, and plan for changes and modifications as indicated, using the Nursing Process as a framework.
8. Work collaboratively with all members of the student's instructional team including parents and non-educational agency personnel.	8. Examples: Participate on school teams and provide information to the appropriate school team members so they can recognize and act in a health needs crisis. i.e., EAP
III. Assessments	III. Assessments
Candidates will be able to: A. Identify, administer, interpret, and plan instruction based on each of the following assessment components in a standards aligned system.	A. School nurses will demonstrate an understanding of various educational assessment strategies, including, but not limited to health screening, diagnosis of health problems, formative, benchmark, and summative assessments, and how these impact student health and learning. Examples: School nurses administer and interpret various tools utilized for health assessment which include these differential strategies. E.g., BMI, vision, myopia, hyperopic, conductive or sensorineural hearing loss.
1. Authentic – A form of assessment in which, students are asked to perform real-world tasks that demonstrate meaningful application of essential knowledge and skills. The assessment usually includes a task for students to perform, and a rubric is used to evaluate their performance.	1. Authentic – This requirements is relevant to school nursing if the definition of Authentic Assessment is made relevant to health instead of academic performance, e.g., a form of health assessment to determine if student health status requires interventions or referral Examples: Nurses conduct assessments on students entering the health office throughout the school day.
2. Screening - Screening assessments are used to determine which students may be at risk. Poor performance on the screening assessment identifies those students needing additional, in-depth assessment of strengths and weaknesses. The primary purpose of screening assessments is to identify children early who need additional instructional (or behavioral) intervention. An essential element of using a screening assessment is implementing additional identified intervention(s) (instructional, behavioral, or medical).	2. Screening - This requirement is relevant to school nursing if the definition of Diagnostic Assessment is made relevant to students' health status Examples: Screen for vision, hearing and referral/follow-up as indicated.
3. Diagnostic – The purpose is to ascertain, prior to	3. Diagnostic – This requirement is relevant to school nursing if the definition of

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<p>instruction, teach student's strengths, weaknesses, knowledge, and skills. Using diagnostic assessments enable the instructor to remediate students and adjust the curriculum to meet each pupil's unique needs. (Examples of diagnostic assessments are: DRA's; Running Records; GRADE; GMADE)</p>	<p>Diagnostic Assessment is made relevant to students' health status</p> <p>Examples: Temperature assessment if student presents with certain complaints; Direct care and/or referral as indicated by professional nursing knowledge; Assessment of student injuries, side effects of medications, reactions to medications or allergens, health problems and contagious symptomology to determine nursing interventions thru direct care or referral.</p>
<p>4. Formative- Pennsylvania defines formative assessments as classroom based assessments that allow teachers to monitor and adjust their instructional practice in order to meet the individual needs of their students. Formative assessments can consist of formal instruments or informal observations. The key is how the results are used. Results should be used to shape teaching and learning. Black and Wiliam (1998) define formative assessments broadly to include instructional formats that teachers utilize in order to get information that are used diagnostically to alter instructional practices and have a direct impact on student learning and achievement. Under this definition, formative assessment encompasses questioning strategies, active engagement check-ins (such as response cards, white boards, random selection, think-pair-share, popsicle sticks for open-ended questions, and numbered heads), and analysis of student work based on set rubrics and standards including homework and tests. Assessments are formative when the information is used to adapt instructional practices to meet individual student needs as well as to provide individual students corrective feedback that allows them to "reach" set goals and targets. Ongoing formative assessment is an integral part of effective instructional routines that provide teachers with the information they need to differentiate and make adjustments to instructional practice in order to meet the needs of individual students. When teachers know how students are progressing and where they are having trouble, they can use this information to make necessary instructional adjustments, such as re-teaching, trying alternative instructional approaches, or offering more opportunities for practice. The use of ongoing formative classroom assessment data is an imperative. Effective teachers seamlessly integrate formative assessment strategies into their daily instructional routines.</p>	<p>4. Formative –</p> <p>Examples: Evaluate the effects of medications, health care procedures and nursing interventions on the students' health.</p>

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<p>5. Benchmark – Assessments that are designed to provide feedback to both the teacher and the student about how the student is progressing towards demonstrating proficiency on grade level standards. Well-designed benchmark assessments and standards-based assessments: measure the degree to which students have mastered a given concept; measure concepts, skills, and/or applications; are reported by referencing the standards, not other students' performance; serve as a test to which teachers want to teach; measure performance regularly, not only at a single moment in time. (Examples of benchmark assessments are: 4Sight, Riverside 9-12, DIBELS)</p>	<p>5. Benchmark – Examples: Baseline and trajectory for health screenings (BMI, vision, hearing); Baseline and trajectory for health parameters (blood glucose, bladder catheterization, peak flow)</p>
<p>6. Summative —Summative Assessments seek to make an overall judgment of progress at the end of a defined period of instruction. Often the summative assessment occurs at the end of a school level, grade, or course, or is administered at certain grades for purposes of state or local accountability. Summative assessments are considered high-stakes assessments and the results are often used in conjunction with the No Child Left Behind Act (NCLB) and Adequate Yearly Progress (AYP). They are designed to produce clear data on the student's accomplishments at key points in his or her academic career. Performance on these assessments are often part of the student's permanent record and serve as an indication of overall performance on a set of standards. Results from summative assessments are of interest to parents, faculty, administration, the press, and the public. The data from summative assessments are the basis of accountability systems. (Examples of summative assessment: PSSA; Terra Nova)</p>	<p>6. Summative Examples: Trend student health parameters over time—BMI, vision, screening; Trend student health parameters over time for special needs—missed days of school for asthma, seizures, etc. Share data (aggregate) with appropriate personnel –administration-teachers and/or parents. Utilize data to define future performance and/or basis for program development to meet needs.</p>
<p>B. Demonstrate an understanding of the types of assessments used (e.g., screening, diagnostic, formative, summative) and the purpose of each assessment in a data-based decision making process.</p> <p>C. Demonstrate the use of formal and informal assessment data for instructional, behavioral, and possible eligibility for special</p>	<p>B. School nurses perform nursing assessments on an on-going basis as part of the Nursing process and apply findings to develop interventions that support student health, thereby optimizing educational outcomes.</p> <p>Example: Provide preventive, acute and emergent care; Health promotion</p> <p>C. Example: Complete a neurological assessment upon return to school after a traumatic brain injury which, taken together with medical reports and related</p>

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<p>education based on the type of assessment, level of the students being assessed, and the purpose of and the quality of instruction.</p> <p>D. Demonstrate an understanding of the multi-disciplinary evaluation process and an ability to articulate the findings presented in an evaluation report including grade-level equivalents, percentile rank, standard scores, and stanines.</p> <p>E. Demonstrate an understanding of the components of the Individualized Education Plan (IEP) process, with emphasis on understanding measurable goals based on present levels, specially designed instruction, adaptations, accommodations, supplementary aids and services, and supports for school personnel.</p>	<p>assessments, may indicate an alternate academic placement or strategy for optimal instruction.</p> <p>D. Examples: Nursing assessment of student with health needs, and the resulting development of IHP/EAP and IEP health component.</p> <p>E. Examples: Utilize the components of the IEP to develop a health plan specially designed to assist special needs student to maintain optimal level of functioning for success in learning. Plan consists of student based measurable goals, accommodations, adaptations and services of school personnel.</p>
<p>F. Articulate differences between achievement tests, aptitude tests, and observational data used in special education placement decisions.</p>	<p>F. <i>Not part of school nursing services. The certified school nurse may offer information and insight on a student's medical status to contribute to the discussion of the most appropriate educational setting/placement for a student's educational and physical needs.</i></p>
<p>G. Create an <u>instructional</u> plan using assessment information related to individual student</p>	<p>G. Create an <u>intervention</u> plan using assessment information related to individual student achievement.</p> <p>Example: Collaborate with the IEP team in creating instructional plans, offering perspective on health needs that require special interventions.</p>
<p>H. Analyze and interpret formative assessment (e.g., curriculum based assessment, CBA).</p> <p>I. Demonstrate an understanding of the purpose and intent of standardized assessments and progress monitoring as one of the multiple indicators used in overall student evaluation.</p> <p>J. Systematically monitor student performance to identify areas of need.</p>	<p>H. Examples: Modify a student health plan based on formative health assessment of nursing interventions.</p> <p>I. Example: Assist teachers to understand how "stress" of standardized testing impacts students with special health needs; provide appropriate nursing interventions.</p> <p>J. Example: Work collaboratively with allied health professionals, e.g., occupational therapy, speech, physical therapy; Monitor a student's progress in an on-going way and identify for the educational team the needed revisions to accommodations.</p>
<p>K. Use evaluative data on an individual, class and district level to identify and implement <u>instructional</u> and/or programmatic revisions for quality improvement.</p>	<p>K. Use evaluative data on an individual, class and district level to identify and implement <u>intervention</u> and/or programmatic revisions for quality improvement.</p> <p>Example: Health education intervention; One-on-one instruction for students newly diagnosed with a chronic disease;</p>

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	<p>Scenario example -- if an increase is noted in a specific area (ex., students with asthma), the school nurse may plan and present a program for staff/teachers/students about asthma prevention and management strategies. Or, if a trend of increasing numbers of students with high BMIs is noted, the school nurse develops a plan for nutritional content in classrooms, cafeteria choices and labels, and club period activity incorporating nutrition and exercise.</p>
<p>L. Demonstrate an understanding of legally acceptable modifications and accommodations for assessment for students with disabilities.</p> <p>M. Demonstrate an understanding of ethical practice for assessment.</p>	<p>L. Example: Management of student use of elevators and adaptive equipment; Disaster planning for special needs; Access and mobility issues for students</p> <p>M. Example: Apply the ANA/NASN code of ethics in everyday practice, as well as the professional code for educators</p>
<p>N. Recognized the need to consult with multi-disciplinary team when cultural, economic or linguistic differences are present in order to avoid biased assessment.</p>	<p>N. Examples: Utilize school, IU, and community resources when providing health care and referrals; Utilize community resources that are culturally appropriate.</p>

IV. Literacy Development and Instruction in Core and Intervention Areas	IV. Literacy Development and Instruction in Core and Intervention Areas
<p>Candidates will be able to:</p> <p>A. Demonstrate an ability to match instructional research-validated literacy interventions to identified student needs.</p>	<p>Candidates will be able to:</p> <p>A. Identify evidence-based practices to be used with students with disabilities in the area of health.</p> <p>Example: Consult with educational specialists when designing health-related teaching interventions.</p>
<p>B. Demonstrate a conceptual understanding of the components of reading and describe how these areas pose challenges for students with disabilities:</p> <ul style="list-style-type: none"> Phonological Awareness & Phonics Fluency Vocabulary Comprehension Language Word Study (investigate & understand patterns in words) 	<p>B. <i>Not part of school nursing services. The certified school nurse may offer information and insight on a student's medical status to contribute to the discussion of the most appropriate educational setting/placement for a student's educational and physical needs.</i></p>
<p>C. Demonstrate an ability to review and evaluate literacy programs for purpose, quality, effectiveness, and research-base and show knowledge of commonly available programs.</p>	<p>C. <i>Not part of school nursing services. The certified school nurse may offer information and insight on a student's medical status to contribute to the discussion of the most appropriate educational setting/placement for a student's educational and physical needs.</i></p>
<p>D. Identify evidence-based instructional practices to be used with students with disabilities in the area of literacy.</p>	<p>D. Identify evidence-based practices to be used with students with disabilities in the area of literacy.</p> <p>Examples: Consult with educational specialists when designing health-related teaching interventions Use computer assisted instruction for health teaching with certain students to facilitate learning when there are literacy deficits.</p>
<p>E. Demonstrate an understanding of the evidence-based connection between literacy and behavior.</p>	<p>E. Examples: Consult with educational specialists when designing health-related teaching interventions; Provide culturally appropriate health education that provides positive behavioral literacy.</p>

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<p>F. Demonstrate a conceptual understanding of the components of writing and describe how these areas pose challenges for students with disabilities:</p> <ul style="list-style-type: none"> Text production Spelling Composition for different types of writing <p>G. Clearly articulate and model the use of explicit and systematic instruction in the teaching of literacy (reading and writing) for students with disabilities across all reading levels.</p> <p>H. Clearly articulate and model the use of explicit and systematic instruction in the teaching of content area literacy for all students with disabilities across all reading levels.</p> <p>I. Demonstrate instructional strategies to enhance comprehension of material.</p> <p>J. Demonstrate an understanding of the challenges that students with specific disabilities face in content area literacy.</p> <p>K. Assess the readability of content area reading materials.</p> <p>L. Demonstrate the ability to adapt <u>content area material</u> to the student's instructional level.</p> <p>M. Utilize assessment tools with appropriate accommodations in the area of literacy to identify effectiveness of the standards based curriculum (core literacy program for students with disabilities).</p> <p>N. Establish and maintain progress monitoring practices aligned with the identified needs of each student to adjust instruction and provide rigor in the area of literacy for students with disabilities.</p> <p>O. Establish and maintain progress monitoring practices within the content area aligned with the identified needs of each student to adjust instruction and provide rigor in the area of literacy for all students with disabilities.</p>	<p>F. <i>Not part of school nursing services. The certified school nurse may offer information and insight on a student's medical status to contribute to the discussion of the most appropriate educational setting/placement for a student's educational and physical needs.</i></p> <p>G. <i>Not part of school nursing services. The certified school nurse may offer information and insight on a student's medical status to contribute to the discussion of the most appropriate educational setting/placement for a student's educational and physical needs.</i></p> <p>H. <i>Not part of school nursing services. The certified school nurse may offer information and insight on a student's medical status to contribute to the discussion of the most appropriate educational setting/placement for a student's educational and physical needs.</i></p> <p>I. Examples: Consult with educational specialists when designing health-related teaching interventions</p> <p>J. Examples: Consult with educational specialists when designing health-related teaching interventions</p> <p>K. Examples: Utilize assessment tests (e.g. SMOG formula)</p> <p>L. Demonstrate the ability to adapt <u>health information</u> to the student's instructional level. Examples: Consult with educational specialists when designing health-related teaching interventions; Provide educational specialists with health education materials. Field example -- - use pictures of food rather than words when teaching nutrition concepts to students with limited English proficiency.</p> <p>M. <i>Not part of school nursing services. The certified school nurse may offer information and insight on a student's medical status to contribute to the discussion of the most appropriate educational setting/placement for a student's educational and physical needs.</i></p> <p>N. <i>Not part of school nursing services. The certified school nurse may offer information and insight on a student's medical status to contribute to the discussion of the most appropriate educational setting/placement for a student's educational and physical needs.</i></p> <p>O. <i>Not part of school nursing services. The certified school nurse may offer information and insight on a student's medical status to contribute to the discussion of the most appropriate educational setting/placement for a student's educational and physical needs.</i></p>

<p>V. Effective Instructional Strategies for Students with Disabilities in Inclusive Settings</p>	<p>V. Effective Instructional Strategies for Students with Disabilities in Inclusive Settings</p>
<p>Candidates will be able to:</p> <p>A. Identify effective instructional strategies to address areas of need.</p> <p>B. Scaffold instruction to maximize instructional access to all students.</p> <p>C. Monitor student progress to provide mediated scaffolding and increase academic rigor when appropriate.</p> <p>D. Provide feedback to students at all levels to increase awareness in areas of strength, as well as areas of concern.</p> <p>E. Strategically align standard based curriculum with effective instructional practices.</p> <p>F. Identify and implement instructional adaptations based on evidence-based practices (demonstrated to be effective with students with disabilities) to provide curriculum content using a variety of methods without compromising curriculum intent.</p> <p>G. Analyze performance of all learners and make appropriate modifications.</p> <p>H. Design and implement programs that reflect knowledge, awareness and responsiveness to diverse needs of students with disabilities.</p> <p>I. Use research supported methods for academic and non-academic instruction for students with disabilities.</p> <p>J. Develop and implement universally designed instruction.</p>	<p>Candidates will be able to:</p> <p>A. Identify effective intervention strategies to address areas of need.</p> <p>B. Adapt instruction to maximize learning based on identified student needs. Examples: Provide one-on-one health instruction as needed for students who may experience difficulty comprehending English usage in a group setting.</p> <p>C. Monitor student progress to optimize health outcomes. Example: Help newly diagnosed student manage healthcare routines in school; Help student maintain food diary to monitor compliance with a new diet</p> <p>D. <i>Not part of school nursing services.</i></p> <p>E. <i>Not part of school nursing services.</i></p> <p>F. Identify and implement health instruction adaptations based on evidence-based practices (demonstrated to be effective with students with disabilities) to provide curriculum content using a variety of methods without compromising curriculum intent. Examples: Consult with educational specialists when designing health-related teaching interventions</p> <p>G. Examples: Consult with educational specialists when designing health-related teaching interventions; Use alternate health screening tools as indicated (e.g., picture chart rather than Snellen chart for vision screening)</p> <p>H. Examples: Consult with educational specialists when designing health teaching interventions; Consult with school team, counselor/social worker when developing a support group for students with special needs to promote positive self esteem, coping and problem solving.</p> <p>I. Examples: Consult with educational specialists when designing health-related teaching interventions</p> <p>J. Collaborate with instructional personnel to develop and implement</p>

<p>V. Effective Instructional Strategies for Students with Disabilities in Inclusive Settings</p>	<p>V. Effective Instructional Strategies for Students with Disabilities in Inclusive Settings</p>
<p>K. Demonstrate an understanding of the range and the appropriate use of assistive technology (i.e., no tech, low tech, high tech).</p> <p>L. Demonstrate efficient differentiated instruction and an understanding of efficient planning, coordination and delivery for effective instruction required for inclusive settings.</p>	<p>universally designed instruction.</p> <p>Examples: Consult with educational specialists when designing health-related teaching interventions</p> <p>K. Examples: Consult with educational specialists when designing health-related teaching interventions; Maintain awareness of developments in technology for special health needs, i.e., insulin pump, PICC lines; develop procedures and policy for use in school setting.</p> <p>L. <i>Not part of school nursing services. The certified school nurse may offer information and insight on a student's medical status to contribute to the discussion of the most appropriate educational setting/placement for a student's educational and physical needs.</i></p>

MEETING THE INSTRUCTIONAL NEEDS OF ENGLISH LANGUAGE LEARNERS (ELL)

I. Foundations for Preservice Candidates	I. Foundations for Preservice Candidates
<p>A. Language</p> <p>1. Demonstrate knowledge of language systems, structures, functions, and variation.</p> <p>2. Identify the process of acquiring multiple languages and literacy skills, including the general stages of language development.</p>	<p>A. Language</p> <p>1. <i>Not part of school nursing services. The certified school nurse may offer information and insight on a student's medical status to contribute to the discussion of the most appropriate educational setting/placement for a student's educational and physical needs.</i></p> <p>Examples: Consult ELL specialist when needed</p> <p>2. Refer or provide resources related to the process of acquiring multiple languages and literacy skills, including the general stages of language development.</p> <p>Examples: Consult ELL specialist when needed</p>
<p>3. Identify the differences between academic language and social language.</p>	<p>3. <i>Not part of school nursing services. The certified school nurse may offer information and insight on a student's medical status to contribute to the discussion of the most appropriate educational setting/placement for a student's educational and physical needs.</i></p> <p>Examples: Utilize the type and level of language the student is best equipped to understand when teaching about treatment regimen</p>
<p>B. Culture</p> <p>1. Identify sociocultural characteristics of ELLs including educational background and demographics.</p> <p>2. Describe how ELLs' cultural communication styles and learning styles affect the learning process.</p> <p>3. Describe how ELLs' cultural values affect their academic achievement and language development.</p> <p>4. Identify bias in instruction, materials and assessments.</p>	<p>B. Culture</p> <p>1. Examples: Utilize cultural sensitivity and competence when assessing ELLs</p> <p>2. Examples: Some cultures may not want to maintain eye contact with adults out of respect for authority/elders</p> <p>3. Examples: Students from some indigenous tribes are taught to work for the group benefit, not for their individual benefit.</p> <p>4. Identify and avoid bias in health-related materials.</p> <p>Examples: Select health-related educational materials which include pictures of students from diverse groups.</p>
<p>5. Demonstrate cross-cultural competence in interactions with interactions with colleagues, administrators, school and</p>	<p>5. Demonstrate cultural competence in interactions with interactions with colleagues, administrators, school and community specialists, students and</p>

I. Foundations for Preservice Candidates	I. Foundations for Preservice Candidates
community specialists, students and their families.	their families. Examples: Complete a cultural assessment as part of a comprehensive evaluation prior to determining (based on assumption) a student’s culture
6. Observe culturally and/or linguistically diverse <u>instructional</u> settings.	6. Observe culturally and/or linguistically diverse <u>school</u> settings. Examples: School nurses may visit culturally/linguistically diverse schools/sites and compare and contrast the school populations.

II. Applications for Preservice Candidates	II. Applications for Preservice Candidates
A. Standards-based Instruction 1. Apply <u>research</u> concepts and theories of language acquisition to instruction.	A. Standards-based Instruction 1. Apply concepts and theories of language acquisition to <u>presentation/one-on-one</u> instruction. Examples: Consult ELL specialist when needed.
2. Implement appropriate research-based instructional strategies to make content comprehensible for all ELLs.	2. <i>Not part of school nursing services. The certified school nurse may offer information and insight on a student’s medical status to contribute to the discussion of the most appropriate educational setting/placement for a student’s educational and physical needs.</i>
3. Demonstrate <u>effective instructional planning and assessment</u> <u>integrating</u> the PA Language Proficiency Standards for English Language Learners PreK-12 (ELPS) and PA academic standards.	3. Demonstrate <u>awareness</u> of the PA Language Proficiency Standards for English Language Learners PreK-12 (ELPS) and PA academic standards. Examples: Consult ELL specialist when needed.
B. Assessment specific to ELL 1. Use PA ELPS to design content assessment. 2. Identify issues related to standards-based formative and summative assessment for <i>all</i> ELLs. 3. Use assessment data to differentiate and modify instruction for optimal student learning.	B. Assessment specific to ELL <i>Not part of school nursing services. The certified school nurse may offer information and insight on a student’s medical status to contribute to the discussion of the most appropriate educational setting/placement for a student’s educational and physical needs.</i>
C. Professionalism 1. Describe the legal responsibilities related to serving ELLs.	1. Examples: Consult ELL specialist when needed. Utilize ELL resources when needed for assessment or interventions of student/family.

II. Applications for Preservice Candidates	II. Applications for Preservice Candidates
<p>A. Standards-based Instruction</p> <p>1. Apply research, concepts and theories of language acquisition to instruction.</p>	<p>A. Standards-based Instruction</p> <p>1. Apply concepts and theories of language acquisition to presentation/one-on-one instruction.</p> <p>Examples: Consult ELL specialist when needed.</p>
<p>2. Demonstrate collaborative, co-teaching models for serving ELLs.</p> <p>3. Define common terms associated with English Language Learners.</p> <p>4. Identify professional resources and organizations related to serving ELLs.</p>	<p>2. Examples: Consult ELL specialist when needed</p> <p>3. Examples: Consult ELL specialist when needed</p> <p>4. Examples: Consult ELL specialist when needed; use TranSACT when appropriate.</p>