***Example. Place your day & date here: Tuesday, March 9, 2021***

***Example.* Place your school info here: Rabun County High School**

**230 Wildcat Hill Drive, Tiger, GA 30576**

**706-782-4526**

***Healthcare Science Education (HSE) Teacher(s):***

***Teachers(s) name(s), educational initials (Courses taught)***

***Administrators & Counselors:***

**Principal:**

**CTAE Director:**

**Assistant Principals:**

**Counselor(s):**

***Healthcare Science Education Industry Certification Leadership Team:***

**Sharon Norman, RN, MEd, EdS, Coordinator of the Healthcare Science Industry Certification Statewide Process, with HomeTown Health, LLC and HomeTown Health University.**

**Sandra Martin, RDH, EdS, CTAE Program Specialist, Healthcare Science, Government & Public Safety, and Personal Care Services, Georgia Department of Education**

**Lisa Carhuff, MSN, RN, Program Manager, HomeTown Health, LLC**

***Local Healthcare Team:* List name, educational initials, place of work, and city, such as**

***Examples:***

***Jennifer Jones, RN, MSN, Associate Professor of Nursing, College***

***Misty Smith, NREMT-P, County EMS, Clayton***

***Heather Buttons, RDH, BS, y Family Dentistry, Clayton***

***Rhonda Brown, RN, BSN, Medical Center, Clayton***

***Kimberly Campbell, RN, MSN, Chief Nursing Officer, Medical Center, Clayton***

**School**

***Day & Date***

**Agenda**

**8:00am- 12:00pm**

**Local Evaluation Team & Leadership Team meet in *(list place if On-Site Evaluation)***

**8:00am     Light/ Continental Breakfast (if On-Site Evaluation)**

**8:15am   Welcome to Team by *Teachers(s) name(s)***

* **Introductions of administrators and school team – *Teachers(s) name(s)***
* ***Self-Introductions of HSE IC On-Site Evaluation Team - leadership team and local health care professional team* *(sharing healthcare background)***
* **Administrators provides a brief presentation about the School’s programs/opportunities – *Administrator(s) name(s)***
* **Healthcare Science Education (HSE) Teacher provides presentation on their HSE Program – *Teachers(s) name(s)***

**8:35am    Overview of Evaluation Activities *by Sharon Norman and* *Teacher(s) name(s)***

**Agenda Review – Duties and Assignments of team - *Sharon Norman***

**Overview: Program Operational Standards (POS) I-VI,**

**Program Pathways & Courses / Curriculum Standards *- Sharon Norman & Teacher(s) name(s)***

**Overview by *[teacher’s name(s)]* of the set-up for POS and the Healthcare Science Pathway and Courses taught at RCHS: Introduction to Healthcare, Essentials of Healthcare and Allied Health & Medicine.**

* **The Process set up for the review of documents as evidence to meet standards.**

**8:45am**     ***Brief Tour of HSE classroom and lab area with teacher(s)***

**9:15am           Start evaluation activities by local evaluation team**

*Teacher provides* *Brief overview of electronic process, setting the healthcare professional up at computer or tablet to review supporting documents online. Teachers will stay with Reviewers to ensure finding of supporting documents.*

**Review the POS (Standards)**Two team members; one assigned to review Sections, I, II, V, & VI;   another assigned to review Sections III & IV, will go to classroom with assigned student to check Facilities and Equipment standards. The student will assist with identification of locations of equipment & supplies to ensure quick, smooth check of the classroom, supply room, office, etc  & Lab (facilities set up for Pathways taught), and the Equipment & Supplies. [Will use the checkoff forms for the Facilities (POS III) and for the Equipment & Supplies lists (POS IV), provided by the teacher.]

**Team member to review POS I, II, V, & VI:   \_\_\_\_\_\_\_\_\_ (list who assigned)**

**Team member to review POS III & IV: \_\_\_\_\_\_\_\_(list who assigned)**

* **Review the Courses - (3 Standards per Course to be showcased).** *Each**Team member assigned will review one or two courses’ supporting documentation.*
* **Team member to review *Introduction to Healthcare* and *Essentials of Healthcare* Courses*:*  \_\_\_\_\_\_\_\_\_\_\_(list who assigned)**
* **Team member to review (list *3rd level courses)* Course: \_\_\_\_\_\_\_\_\_\_\_(list who assigned)**

***(These local team members may join the student interviews after their assigned reviews are completed.)***

**9:15am:    In separate conference room, Begin Student Interviews of 9 students (total), 3 students at a time by Interviewer assigned.  *(A List of these students will be provided to the assigned team member by the HSE Teacher.)***

**Times:**

**9:15am-9:35am: 3 first course/ Introduction to HSE students, then**

**9:40a-10:00am:  3 second course/ Essentials students, then**

**10:05a-10:25am: 3 third course/ Allied Health and former students**

***Students will be brought down to the designated room by school staff, as coordinated by teacher or designated person.***

**Team member assigned for interview: \_\_\_\_\_\_\_\_\_(list who assigned)**

**9:15am    Counselors’ Interview by assigned team member *(This local team member will join the student interviews after the Counselor Interview is completed.)***

**Team member assigned for interview: \_\_\_\_\_\_\_\_\_\_(list who assigned)**

**9:15am        In the Principal’s Office (or other assigned area), Interview of Administrators/ CTAE Director by**  **\_\_\_\_\_\_\_\_\_\_(list who assigned, such as Sandra Martin)**

**10:30am    All reviews and interviews completed.  *(If On-Site Evaluation, All papers turned in to Sharon Norman for copying by teacher or assigned person.)***

**10:40am    Evaluation Team meets to discuss interviews and findings (without the teachers or administrators).**

**11:00am-11:30am    Final Report by local healthcare professionals team, Sharon Norman and Sandra Martin.**

***Joined by the Teachers and the Administrators*,** **the Evaluation Team provides oral reports on their findings. Written Final Report presented.**

***(Final Report: Review of findings, any recommendations or suggestions with all Standards documentation found in place, and if recommended for certification. Or, if all documentation is not found, identification of team members who will review documentation needed.)***

**11:30am               Lunch at High School *(if On-Site Evaluation)***

***Thanks to the Evaluation Team and School Team***