

 LETHBRIDGE SCHOOL DIVISION

 402.11.2.33 Family School Liaison Counsellor

# Section One Introduction

 Name

 Location

 Start Date for Current Position

 Evaluator

 Date

Reason for evaluation:

[ ]  Evaluation process for employees new to the Division or position (indicate period below)

 [ ]  4 Month Evaluation [ ]  7 Month Evaluation

[ ]  Employee request

[ ]  Employee has not developed and implemented a Growth Plan

[ ]  Employee may not be meeting the Support Staff Quality Standards

# Section Two Family School Liaison Counsellor

**Within the expectations of the Family School Liaison Counsellor position, the employee will be evaluated within the following areas:**

* All areas should be marked as meeting (M) the standard or not meeting (N/M) the standard. For the purposes of this form, “meeting” describes job performance that meets the standard of performance in each area. Where areas of “not meeting” standards are identified, a comment must be made.
* All marked deficiencies must be accompanied by supporting documentation.

**LEGEND:**

**M Meeting Standard**

**N/M Not Meeting Standard**

**1. KEY RESPONSIBILITIES**

Individuals in this position work as a member of the high school counselling team.

M N/M

[ ]  [ ]  Work in collaboration with other members of the counselling team.

[ ]  [ ]  Share in the responsibility for responsive services.

[ ]  [ ]  Observe, monitor and share information about student behaviors to

 contribute to the development of collective understanding and the

 equitable distribution of responsibility for supporting students who are

 experiencing challenges in the school environment.

[ ]  [ ]  Evaluate students experiencing difficulty and make recommendations for interventions to support skill development.

[ ]  [ ]  Develop and sustain a strong working alliance with children, youth and

 families on his or her agreed upon caseload.

[ ]  [ ]  Facilitate the implementation of intervention strategies for students on his or her

 agreed upon caseload.

[ ]  [ ]  Liaise with community partners such as physicians, psychiatrists, Alberta

 Health Services, Child and Family services and other appropriate agencies to assist in improving the well-being of the child, family school.

[ ]  [ ]  In collaboration with Administration and the other members of the counselling team, set up programs and develop materials to be used to support the curriculum in areas related to mental health.

[ ]  [ ]  In collaboration with Administration other members of the counselling team facilitate teacher training and staff capacity building initiatives in the area of mental health.

[ ]  [ ]  In collaboration with Administration and the school counselling team ensure that a continuum of supports (universal, targeted and intensive) are available to improve the mental health of all students.

[ ]  [ ]  Facilitate universal interventions for agreed upon needs.

[ ]  [ ]  Facilitate targeted interventions for agreed upon needs.

[ ]  [ ]  Develop collaborative partnerships between home and school to address Mental health and social/emotional needs of students.

[ ]  [ ]  Maintain agreed upon standard of ethical practice within the school environment.

[ ]  [ ]  Maintain appropriate data and documentation.

[ ]  [ ]  Makes home visits as required.

[ ]  [ ]  Meets and communicates with parents as required.

[ ]  [ ]  Attends training seminars and sessions as required.

**LEGEND:**

**M Meeting Standard**

**N/M Not Meeting Standard**

M N/M

[ ]  [ ]  Provides support and mentoring strategies to teachers and educational assistants serving as a positive role model for the community.

 [ ]  [ ]  Utilizes services of outside agencies as deemed appropriate through team consultation.

[ ]  [ ]  Participates in counselling team meetings.

[ ]  [ ]  Active participant on the staff to which assigned.

[ ]  [ ]  Performs other related duties as required.

COMMENTS:

|  |
| --- |
|  |

**2. PERSONAL/PROFESSIONAL QUALITIES**

M N/M

[ ]  [ ]  Builds positive interpersonal relationships (with other staff, student(s), public; includes dealing with conflict).

[ ]  [ ]  Exhibits behaviours of a team player through engagement and willingness to help others (with the counselling team, the school, the community, and the Division).

[ ]  [ ]  Resolves conflict effectively with adults. (Reference: Code of Conduct, Roles

 and Responsibilities.)

[ ]  [ ]  Demonstrates self-direction, takes initiative, and requires minimum supervision.

[ ]  [ ]  Maintains appropriate personal hygiene and appearance.

COMMENTS:

|  |
| --- |
|  |

**3. COMMUNICATION**

M N/M

[ ]  [ ]  Demonstrates excellent communication skills both in written and oral format.

[ ]  [ ]  Maintains confidentiality related to Division students and staff.

[ ]  [ ]  Has proven public relations skills and demonstrated ability in promoting and maintaining effective working relations with public, student(s), co-workers, school staff, administration and Division officials.

[ ]  [ ]  Contributes to discussion and strategic planning within team setting, around supporting specific needs.

COMMENTS:

|  |
| --- |
|  |

**LEGEND:**

**M Meeting Standard**

**N/M Not Meeting Standard**

# **TIME MANAGEMENT**

[ ]  Attendance report attached

M N/M

[ ]  [ ]  Attends regularly

[ ]  [ ]  Is on time, ready to work with students at the assigned times

[ ]  [ ]  Sets priorities in collaboration with wellness team and administration

[ ]  [ ]  Uses time effectively

[ ]  [ ]  Follows assigned schedule

COMMENTS:

|  |
| --- |
|  |

# **5. DECISION**

 [ ]  Recommend proceeding to 7 month probationary evaluation

 [ ]  Completes probationary process

 [ ]  Improvement plan implemented

 [ ]  Employee returns to Growth Plan process

 [ ]  Employee must submit a Growth Plan within one month

# **6. EVALUATOR’S COMMENTS**

COMMENTS:

|  |
| --- |
|  |

# **7. EMPLOYEE’S COMMENTS**

COMMENTS:

|  |
| --- |
|       |

*Steps for completion:*

1. Evaluation is jointly completed by supervisor and school administration.
2. School administration will provide written feedback to supervisor.
3. Supervisor and school administration meets with employee to review evaluation.
4. A copy of the evaluation is provided to the employee, school administrator(s), and supervisor. HR is given the original document.

***As Counselling Coordinator, I have read and approve this evaluation.***

|  |
| --- |
|       |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Counselling Coordinator Signature Date

***As Principal, I have provided feedback and approve this evaluation.***

|  |
| --- |
|       |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Principal/Vice Principal’s Signature Location Date

|  |
| --- |
|       |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Employee’s Signature Date

|  |
| --- |
|       |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Reviewed by Human Resources Date