Happy Autumn!

The calls received at the Department of Public Instruction represent the varying issues that affect school health services and school nurses: medication training, delegation of procedures to unlicensed staff, need for 1:1 nursing care, bloodborne pathogen training, immunization compliance, stocking of emergency medications, management of encopresis in the school setting, writing emergency action plans, the list goes on... Your practices are vibrant and varied!

Please reach out to Laura Marty and me here at the DPI, and to each other via the Wisconsin Association of School Nurses (WASN) and the National Association of School Nurses (NASN) discussion lists, for support, resources, and simply if you need to “bounce something off another school nurse.” NASN also has an “open forum” discussion list that non-NASN members can access. http://www.wischoolnurses.org/home and https://www.nasn.org/home

This update is full of professional learning and networking opportunities. I encourage every one of you to take advantage of at least one opportunity this year. Possibly that could be one of your professional practice goals as part of your Pupil Services Evaluation Plan this year. The dates for the WASN Spring Conference are listed in the Save the Date section.

We are looking forward to meeting many school nurses at the New School Nurse Orientation next week. This has become a very important professional learning experience for Wisconsin school nurses. I even had an inquiry from a new out-of-state school nurse who wanted to attend because “it has everything I need to know!”

This update’s PRACTICE POINTS answers some questions posed at the Summer Institute regarding immunization compliance. Further guidance from the Department of Health Services (DHS) on other questions is forthcoming. Remember, you can check your district’s compliance rate for the 2016/17 school year which will determine if your school district is required to exclude (this year’s) noncompliant K-5 students at the DHS websites; for public schools: https://www.dhs.wisconsin.gov/immunization/compliance-public-districts.pdf and for private schools at: https://www.dhs.wisconsin.gov/immunization/compliance-private-schools.pdf.


This final paragraph relates to the 45 Wisconsin school nurses who have the optional DPI 75-School Nurse Professional Educator License. Changes were enacted with the recent signing of the state budget. Anyone, who holds a current Professional or Master Educator License, will automatically have their license converted to a lifetime license. This will be done by DPI removing the expiration date from these licenses. There will be no fee charged to the license holder for the conversion to a lifetime license. As a result of this change, DPI licensed school nurses are no longer required to complete credits or a PDP as part of the state licensing renewal process. Requirements for local pupil service evaluations continues to be local decisions, which may include continuing professional development. A decision to obtain the optional DPI 75- School Nurse license is also a local and/or personal decision. This change does not affect the definition of a “School Nurse” in Wisconsin.

Louise Wilson, MS, BSN, RN, NCSN
Laura Marty, BSN, RN
Save the Date!

Among Wisconsin youth, suicide is the second leading cause of death and accounts for almost 1 in 5 of all deaths. State law requires school districts to provide specific classroom instruction in youth suicide prevention and to annually notify staff about the Department of Public Instruction’s resources. The workshop helps participants understand the scope of youth suicide and what schools can do to reduce suicidal acts and thoughts among students. Participants learn about the prevalence of youth suicide, risk and protective factors, comprehensive prevention programs, and crisis intervention.

SEE ATTACHED FLYER FOR DATES AND LOCATIONS.
Wisconsin Association of School Nurses Annual Spring Conference

**WASN District 1 Meeting**

Wednesday, November 15  4-6 p.m.
4333 S Sunny Slope Road
New Berlin, WI 53151

Please register with Pam Jesse, New Berlin School Nurse pam.jesse@nbexcellence.org

Louise Wilson School Nursing & Health Services Consultant for the Wisconsin Department of Public Instruction will be joining WASN members District 1 members.

**WASN District 3 Conference**

January 18, 2018.
CESA 3, Fennimore

Please contact Suzanne Brinkman, WASN District 3 Director, to RSVP @ nurse@boscobel.k12.wi.us. Valerie Schaefer of Gundersen Health Systems will be speaking to area school and public health nurses about care of Diabetic students in school.
Parent Poll on School Health Services Recognizes School Nurse’s Role

The C.S. Mott Children’s Hospital National Poll on Children’s Health releases monthly reports about a wide range of child health topics. Surveys include a nationally representative sample of parents, with questions targeted to the specific ages of children in the household.

September’s Mott Poll report asked parents of children 6-18 years old about health and safety situations at school. Parents had greater confidence in the school’s ability to handle basic first aid, compared to an urgent medical situation (asthma attack) or identify a mental health problem. Importantly, parents named school nurses as the staff person most likely to handle child health needs during the school day — but they may overestimate the amount of time a nurse is onsite at their child’s school.

The full report, detailing what parents had to say about how their child’s school handles health and safety situations is in the attachments. Please feel free to use this information in your newsletter or presentations; the creators just ask that you indicate the information comes from the C.S. Mott Children’s Hospital National Poll on Children’s Health, and give their web address, mottnpch.org.

If you’d like to sign up to receive our monthly reports by email, please visit mottnpch.org/mailing-list.

More than 7 million students chronically absent

"The causes of chronic absenteeism are multifold, but one stands out as especially significant: student health. Students with unmanaged chronic health conditions, such as asthma or diabetes, are more likely to miss class because of the symptoms of their illness or because they are receiving medical treatment during the school day. Students can also be chronically absent because of health issues such as fever, flu, dental pain, vision problems or mental health and anxiety issues." Read more...

Tobacco Cessation Toolkit is now live on TobWis
You can access the toolkit here.

The Cessation Toolkit includes information and fact sheets about quitting tobacco, Medicaid and Medicare cessation coverage, and the Wisconsin Tobacco Quit Line. There are two webinars from the University of Wisconsin Center for Tobacco Research and Intervention (WI-CTRI) about Medicaid cessation coverage and the Wisconsin Tobacco Quit Line. A third webinar will provide an overview of the Wisconsin Nicotine Treatment Integration Project (WiNTiP).

NASN's position brief- Emergency Use of Stock Albuterol in the School Setting
The National Association of School Nurses published a new position brief that outlines the school role and school nurse role in stocking and using albuterol in emergency situations. Learn more

The Whole School, Whole Community, Whole Child (WSCC) model uses an integrated, collaborative approach to address barriers and supports related to learning and health. This implementation guide is designed with a variety of readers in mind, including administrators, teachers, and other school-and district-level staff, community partners, public health professionals, parents and others interested in strengthening the learning and health of students. Part I provides an overview of the WSCC model and the Whole Child Tenets (ASCD), highlights opportunities for alignment with school, district, state and national policies and practices, and provides examples of integrating the model with goals in school and district-level improvement plans. Part II gives step-by-step guidance for districts and schools seeking to adopt and implement the WSCC model.

Stakeholder Forums to Support Students with IEPs

DPI is hosting a series of statewide conversations to discuss the needs of students with social-emotional, sensory, and self-regulation needs. This includes needs common among students with autism as well as students with emotional behavioral disabilities, or students with IEPs who may have trauma related, mental health, or other social-emotional needs. DPI is bringing together stakeholders to discuss common needs for these groups of students pertaining to belief systems of adult caretakers, skills and supports that benefit students, skills and interventions used by educators in school settings, and systems that promote collective responsibility and support for the student and family. These forums are open to any parents, family members, educators, administrators, higher education, or community members that support these groups of students.

DPI will use the information from stakeholders to develop a needs assessment related to beliefs, skills and systems supporting students. Additionally, a toolkit will be developed and linked to the needs assessment.

All stakeholder input forums will last from 10am to 2pm and have a maximum capacity of 50. The forums are free of charge and lunch is provided to participants. For anyone not able to attend a stakeholder forum, additional input will be collected virtually through an online survey to be sent out in October through the weekly update.

- October 12, 2017, UW-Waukesha, Commons C101
- October 13, 2017, UW-Oshkosh, Reeve Memorial Union 202
- October 27, 2017, UW-Eau Claire, Centennial Hall 2920
- (TBD), (location in Northern Wisconsin)

To register go to: https://goo.gl/forms/fkq4G7qUmndrzZIA3
For additional information about this event contact Jessica Nichols, (608) 266-1218, jessica.nichols@dpi.wi.gov
For registration related questions contact Augusta Crumble, (608) 267-9167, augusta.crumble@dpi.wi.gov
Let's Change the Way We Talk About HIV

The AIDS/HIV Program has developed an infographic to help reduce HIV-related stigma. The goal is help facilitate conversations among colleagues and with those you serve to ensure access to vital, accurate information and health care services. The AIDS/HIV Program is committed to implementing the use of person-centered language -- language that is compassionate, accurate, trauma-informed, and responsive to the unique needs of individuals and communities affected by the HIV epidemic. You are encouraged to place this infographic in your office, clinic, waiting rooms, etc. Together we can reduce HIV-related stigma and improve the lives of those at risk and living with HIV.

View and share the infographic.

Social Skills in School Pay Off Beyond the Classroom

Social emotional skills can help students set goals for themselves and build positive relationships with peers. They can also lead to long-term societal benefits that extend far beyond the individual child. LEARN MORE

PRACTICE POINTS

1. What is a school district’s obligation to provide educational services for a student who is excluded for 10 days due to immunization noncompliance? Is there a difference for Special Education students? Should an IEP meeting be held to do a change of placement?

School districts are not required to provide educational services while a student is excluded due to immunization noncompliance. There is no obligation for students with special education services and a “change of placement meeting” is not required.

2. If a student is missing doses for one (or more) vaccine(s) (so is “behind schedule”) but has waivers for other vaccines, are they “noncompliant” and at risk of exclusion?

Anytime a student is missing doses of required vaccines and they do not have a signed waiver for those missing vaccines they are considered “behind schedule” and may risk exclusion. The exception would be those new enterers who have at least one dose of each required vaccine. These students are considered “in process” until next school year when they must meet the full immunization compliance requirements

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School Nurse Webpage: https://dpi.wi.gov/sspw/pupil-services/school-nurse
To join the School Nurse Email List and receive school nursing updates click here.
October is ‘Keeping Kids Safe Online Month’ in Wisconsin to highlight the need of responsible internet practices for kids today. The Wisconsin Department of Public Instruction, in partnership with the Department of Justice, has released a new website about internet safety to kick off the month-long awareness campaign.

The Internet Safety website is targeted at all stakeholders (parents, educators, administrators, and students) and provides a list of resources and tools to help families and schools support the safe and responsible use and consumption of digital resources. DPI will continue to expand the website to include district exemplary programming, sample policies, and resources for 1:1 implementation. Below you will find the Lesson Planning Matrix which outlines the Internet Safety theme for each week of October as well as provides links to resources for teaching those topics.

DPI Internet Safety Site: dpi.wi.gov/internet-safety
Twitter: Follow @WisDPIDigCit and tweet using #WIdigcit

Stay connected and learn more about Digital Learning and Data Privacy
- DPI IMT Ed Tech Twitter https://twitter.com/WisDPITech
- DPI IMT Digital Citizenship and Data Privacy Twitter https://twitter.com/WisDPIDigCit
- Department of Justice (click ICAC at bottom of page) - https://www.doj.state.wi.us/
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<tr>
<th>Week</th>
<th>Theme</th>
<th>Resources</th>
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<td>September</td>
<td>Get to know the site</td>
<td><a href="https://dpi.wi.gov/internet-safety">dpi.wi.gov/internet-safety</a></td>
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<td>Oct. 2-6</td>
<td>Digital Life/Digital Footprint/Parent Involvement/Wis. ITL standards</td>
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<td><a href="https://common-sense-media.org">Common Sense Media - Digital Citizenship Week 2017</a></td>
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<td><a href="https://common-sense-media.org">Common Sense Media Video Library</a></td>
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Among Wisconsin youth, suicide is the second leading cause of death and accounts for almost 1 in 5 of all deaths. State law requires school districts to provide specific classroom instruction in youth suicide prevention and to annually notify staff about the Department of Public Instruction’s resources. The workshop helps participants understand the scope of youth suicide and what schools can do to reduce suicidal acts and thoughts among students. Participants learn about the prevalence of youth suicide, risk and protective factors, comprehensive prevention programs, and crisis intervention.

This workshop is not intended to train all school staff, but prepares teams of pupil services staff, health educators, and administrators to plan, prevent, and intervene at their schools. Action planning is integrated into all phases of the training program. A model workshop for all school staff is provided. **Attendees are encouraged to bring their suicide crisis response plans for discussion and revision.**

Participants will:
- Understand the prevalence of youth suicide
- Discuss legal requirements
- Gain knowledge and skills to improve classroom instruction at the middle and high school level
- Create a local action plan based on a 3-tiered prevention and intervention model to reduce suicide among youth

**Cost:** $50.00 per person—School teams are encouraged.
Includes Continental Breakfast, Lunch, and Snack

**Online Registration:**
- **Tomahawk:** [http://login.myquickreg.com/register/event/event.cfm?eventid=18791](http://login.myquickreg.com/register/event/event.cfm?eventid=18791)
- **Ashland:** [http://login.myquickreg.com/register/event/event.cfm?eventid=18792](http://login.myquickreg.com/register/event/event.cfm?eventid=18792)
- **Portage:** [http://login.myquickreg.com/register/event/event.cfm?eventid=18793](http://login.myquickreg.com/register/event/event.cfm?eventid=18793)
- **Gillett:** [http://login.myquickreg.com/register/event/event.cfm?eventid=18794](http://login.myquickreg.com/register/event/event.cfm?eventid=18794)
- **Green Bay:** [http://login.myquickreg.com/register/event/event.cfm?eventid=18795](http://login.myquickreg.com/register/event/event.cfm?eventid=18795)

**Link to the new, updated curriculum:**

**See the DPI website for more info:**
School SBIRT Training
(Screening, Brief Intervention, and Referral to Treatment)
A Training Opportunity for Middle and High School Student Services Staff

What is SBIRT?
SBIRT offers an efficient, evidence-based, and comprehensive service to address selected behavioral health concerns among adolescents. The service begins with administering a standardized Screening instrument. For students who show moderate or high risk results, a Brief Intervention (BI) is conducted. The BI is delivered with motivational interviewing and is protocol-guided. For those students who show high risk concerns and who do not respond to the BI, a Referral to Treatment may be initiated.

Why SBIRT in Schools?
- Evidence-based for addressing student alcohol/drug involvement and evidence-informed for addressing a range of other behavioral concerns, including attendance, classroom behavior, and mental health
- Student-centered and strength-based
- Teens rate the service with high levels of satisfaction
- Provides a Tier II and Tier III practice with PBIS
- Response-to-Intervention can be ascertained by using baseline and follow-up screening results

Training Description
- A requirement of registration is to complete:
  1. A Pre-training Reading Assignment, and 2. An initial Implementation Plan
  Both are available at: [www.wishschools.org/resources/schoolsbirt.cfm](http://www.wishschools.org/resources/schoolsbirt.cfm)
- The school implementation plan must be submitted one week prior to training to: Tracy Herlitzke, therlitzke@cesa4.org
- Initial Training (Day 1) — Overview of SBIRT, introduction to the requisite skills (Motivational Interviewing), and practice on delivering protocol-guided Brief Intervention services. Audio tape delivery of Brief Intervention.
- Adopt SBIRT Into Practice and Continue Implementation Planning — Staff deliver SBIRT services and track initial implementation. Staff meet with student services leadership to complete Implementation Plan.
- Follow-up Training (Day 2) — Staff receive individualized feedback from fidelity review of audiotape. Continue skill building, practice delivering SBIRT, and refining Implementation Plan.
- Implementation Coaching — Staff will participate in monthly implementation coaching calls.

Register Online:
- Chippewa Falls: [http://login.myquickreg.com/register/event/event.cfm?eventid=18903](http://login.myquickreg.com/register/event/event.cfm?eventid=18903)
- West Salem: [http://login.myquickreg.com/register/event/event.cfm?eventid=18904](http://login.myquickreg.com/register/event/event.cfm?eventid=18904)
- Turtle Lake: [http://login.myquickreg.com/register/event/event.cfm?eventid=18905](http://login.myquickreg.com/register/event/event.cfm?eventid=18905)
- Oshkosh: [http://login.myquickreg.com/register/event/event.cfm?eventid=18906](http://login.myquickreg.com/register/event/event.cfm?eventid=18906)
- Gillett: [http://login.myquickreg.com/register/event/event.cfm?eventid=18907](http://login.myquickreg.com/register/event/event.cfm?eventid=18907)

Cost: $100/per person (Lunch and snacks provided) Payable to: CESA #4
Send Payment to: CESA #4 ATTN: Mary Devine, 923 East Garland Street, West Salem, WI 54669—PLEASE include and clearly define: Participant name, exact name of workshop, and date, with all checks or purchase orders. Thank you!
Beyond Access!
Meaningful Inclusion

in partnership with the WI Department of Public Instruction

Tue. 10/24—UW Oshkosh
Wed. 10/25—UW La Crosse

8:30am--3:30pm (Reg. at 8:00am)

www.waisman.wisc.edu/connections
Parents rely on school personnel to keep their children safe and healthy during the school day. This can range from applying basic first aid, to dealing with common child health conditions such as asthma, to identifying and addressing mental health issues. The C.S. Mott Children’s Hospital National Poll on Children’s Health asked a national sample of parents of children 6-18 years about how their child’s school handles health and safety situations.

Overall, 77% of parents are very confident that their child’s school would be able to give basic first aid to a student bleeding from a cut. Parents are less confident about schools’ ability to respond to a student having an asthma attack (58%). Only 38% are very confident in schools’ ability to assist a student suspected of having a mental health problem. Consistently, parents of elementary students express higher levels of confidence compared to parents of middle/high school students (Figure).

Parents believe school nurses deal with most health problems at their child’s school. The majority of parents (63% elementary; 70% middle/high school) say the school nurse would be most likely to provide first aid to a student bleeding from a cut. Similarly, 60% of elementary parents and 63% of middle/high school parents say the school nurse would be most likely to respond to a student having an asthma attack. Classroom teachers and school secretaries are mentioned less often as being likely to handle these situations.

Parents are less clear about who would assist a student suspected of having a mental health problem. Parents of elementary students cite the school nurse (38%), the classroom teacher (13%) and other staff (21%); however, 28% don’t know which staff members would handle this situation. Parents of middle/high school students name school counselors (49%) as the staff most likely to assist a student suspected of having a mental health problem, followed by the school nurse (24%) and classroom teacher (8%); 16% don’t know who would handle this situation. Only 15% of elementary parents and 14% of middle/high school parents say their child’s school screens students for mental health problems.

Roughly 3 in 5 parents believe a school nurse is onsite at their child’s school 5 days a week (61% of elementary parents, 57% of middle/high school parents). Parents who believe a school nurse is onsite 5 days a week report higher levels of confidence in the school’s ability to handle health and safety situations.

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**Report Highlights**

*Among parents of children age 6-18:*

Parents are more confident that their child’s school can provide first aid (77%) than assist a student having an asthma attack (58%) or a mental health problem (38%).

Parents view school nurses as most likely to provide first aid or handle an asthma attack, but are less sure about which staff would assist with mental health issues.

Parents may overestimate the amount of time a school nurse is onsite at their child’s school.
This report presents findings from a nationally representative household survey conducted exclusively by GfK Custom Research, LLC (GfK), for C.S. Mott Children’s Hospital. The survey was administered in May 2017 to a randomly selected, stratified group of parents age 18 and older (n=2,051). Adults were selected from GfK’s web-enabled KnowledgePanel® that closely resembles the U.S. population. The sample was subsequently weighted to reflect population figures from the Census Bureau. The survey completion rate was 61% among panel members contacted to participate. This report is based on responses from 1,195 parents who had at least one child age 6-18 years. The margin of error is ±3 to 5 percentage points.

A publication from C.S. Mott Children’s Hospital, the University of Michigan Department of Pediatrics and Communicable Diseases, and the University of Michigan Child Health Evaluation and Research (CHEAR) Center.

Findings from the C.S. Mott Children’s Hospital National Poll on Children’s Health do not represent the opinions of the University of Michigan. The University of Michigan reserves all rights over this material.

C.S. Mott Children’s Hospital National Poll on Children’s Health

Co-Director: Sarah J. Clark, MPH
Co-Director: Gary L. Freed, MD, MPH
Poll Manager: Dianne C. Singer, MPH
Data Analyst: Acham Gebremariam, MS
Web Editor: Anna Daly Kauffman, MS
Research Associate: Sara L. Schultz, BA

Implications

Although some parents may assume that children’s health and safety needs will be managed during the hours they spend at school, this Mott Poll indicates that many are not fully confident in the capabilities of their children’s schools to address a range of health issues that may arise.

Most parents were very confident that basic first aid, such as putting a bandage on a student bleeding from a cut, would be handled well by their child’s school. Yet for some parents, their confidence was linked to the presence of a school nurse: those who reported that a school nurse is onsite at their child’s school 5 days/week, nearly all were very confident that basic first aid would be handled well, compared to only three quarters of parents who reported less consistent availability of the school nurse.

However, parents may be overestimating the amount of time the nurse spends at their child’s school. Three in five parents in this Mott Poll, consistent at both the elementary and secondary levels, assume their child’s school had a nurse onsite 5 days per week. However, recent data from the National Association of School Nurses indicates that fewer than half of US schools have full-time nurses, with substantial variation by region.

When the school nurse is not available every day, parents recognize that classroom teachers or the school secretary are often called on to handle everyday health situations. While staff with no medical training may be sufficient for basic first aid needs, they are likely to be less capable in handling health situations related to a student’s chronic disease, such as an asthma attack, epileptic seizure, or serious allergic reaction. Results of this Mott Poll indicate that parents recognize the difference between handling an urgent medical situation and providing basic first aid, reporting substantially lower confidence in the ability of their child’s school to respond to a student having an asthma attack. With estimates that 1 in 4 of US children has a chronic condition, it’s a given that every school will have at least a few students with special health-related needs. Parents of these children will want to work directly with school personnel to understand the onsite availability of school nurses, and to ensure non-medical staff are prepared to handle health-related situations that may arise.

Parents have the least confidence in schools’ ability to help a student who may have mental health problems, and are unclear about which school staff might handle that responsibility. About half of parents with children in middle or high school say the school counselor would be most likely to handle mental health issues. Yet school counselors have many competing demands and large student caseloads, making it difficult to establish personal connections with every student. School counselors also have varying levels of training in how to identify potential mental health problems. Only 15% of parents say their child’s school has any type of screening for mental health problems. Parents may want to learn more about how their child’s school works to identify and support students struggling with mental health issues, and advocate for increased funding and training if the current resources are insufficient.
Project ADAM & Frain Family Celebrate Life Foundation invite you to become a HEART SAFE SCHOOL

Wednesday, November 15
8:30 – 11:00 a.m.
Location: CESA 7
595 Baeten Road,
Green Bay

Does your school have an AED/CPR program?
Do you have a written plan and practice that plan in the form of a drill?

To learn more about becoming a Project ADAM Heart Safe School, please join us for a morning of learning and networking. We will provide you with the resources you need to achieve this designation.

PLUS ... your registration and attendance enters you into a drawing for a FREE manikin AND an AED training unit.

Breakfast is included - please register by November 1st at www.projectadam.com/gbworkshop

This event is sponsored by the Frain Family Celebrate Life Foundation.

For more information on Project ADAM please visit:
www.projectadamwi.com
www.projectadam.com