



School Nurse Update

#5 10/23/18

LOUISE WILSON, MS, BSN, RN, NCSN

IN THIS ISSUE

Greetings!

It seems to me that I just sent out the last DPI School Nurse Update. The past two weeks have passed quickly with travel, conferences, meetings, and presentations occupying my time. I am just returning from the **New School Nurse Orientation** where **56 new school nurses, six experienced school nurses, the coordinator for Wisconsin Children and Youth with Special Health Care Needs, and three DPI consultants spent two days in intense and meaningful professional development.** It was truly a pleasure to see the networking and sharing of information that occurred both between and among the new and experienced school nurses!

One of the new school nurses in attendance was the school nurse from Baron, Wisconsin. I had the opportunity to talk with Doug regarding the effect the disappearance of the Baron teenager and the circumstances surrounding her disappearance has had on his community and particularly the schoolchildren. He spoke of schoolchildren afraid to go out for recess and the difficult conversations parents are having with their children. All too common are **events that create crisis and trauma for our youth. Here are a few DPI resources** that may be good to save in the unfortunate and unforeseen event your district may need such information.

<https://dpi.wi.gov/sspw/mental-health/universal-practices/crisis-prevention-planning>

<https://dpi.wi.gov/sites/default/files/imce/sspw/pdf/sswpgcrisisparent.pdf>

<https://dpi.wi.gov/sites/default/files/imce/sspw/pdf/sswpgcrisisteacher.pdf>

My thoughts are with you school nurses and the schoolchildren in your communities!

Bully Prevention Month

Teenage Brain

Public Health Report- Kindergarteners

Seizure Guidelines

Prescription Take Back Day

Adolescent Anxiety

Healthy Nurse, Healthy Nation™ Grand Challenge

School Health Data Collection Points 2018/19

PRACTICE POINTS- Evidenced-Based Practice

SAVE THE DATE

Wisconsin Association of School Nurses Annual Conference –

April 8-10, 2019 Wisconsin Dells
–Room block now open!



DPI News

October is National Bullying Prevention Month

Families, school nurses, and other adults in the community can help children prevent bullying by talking about it, building a safe school environment, and creating a community-wide bullying prevention strategy. Learn what schools and students can do to help prevent bullying at stopbullying.gov.

The Wisconsin Department of Public Instruction has an entire webpage devoted to bullying prevention. Click on this link to [A Comprehensive Approach to Bullying Prevention](#).

The Teen Brain: How Schools Can Help Students Manage Emotions and Make Better Decisions

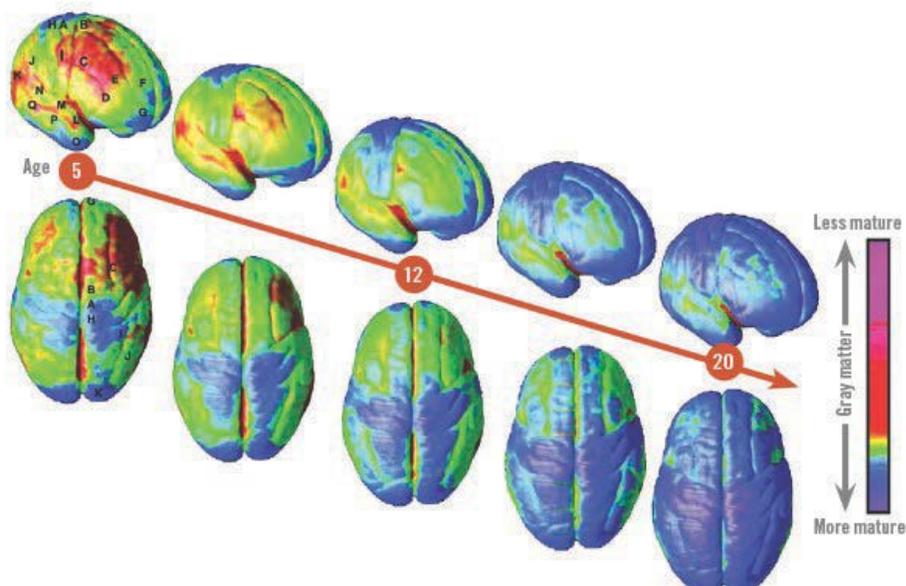
Adolescence tends to be seen by parents—and many teachers—with dread. Teenagers are more likely to engage in risky behaviors and disengage from school. But emerging cognitive and neuroscience research suggests ways schools can help leverage teens' strengths in this unique developmental period. [Read more...](#)

School nurses are reminded when completing the immunization *School Report to Local Health Department* (F-04002) form that is due on the 40th school day, that **children five years of age and older who are attending a Pre-K class** should be assessed using the requirements for kindergarten through grade 5. It has come to my attention that Skyward® is not currently assessing older Pre-K students according to these state guidelines.

These **older Pre-K students** are reported in Column B as combined with total student enrollment.

Compliance categories and numbers for **Kindergarten students** are reported separately (in Column A) and again combined with all students/total (Column B).

As “new enterers” Kindergarten students may be “in process” (compliant) rather than “behind schedule” (non-compliant) if they have one dose of each required vaccine.





Wisconsin Immunization Registry (WIR) and Michigan Care Improvement Registry (MCIR) Interoperability

We are happy to report that the exchange of client and immunization data between the Michigan and Wisconsin immunization information systems (IIS) is operational. This means that when a Wisconsin resident receives vaccines from a Michigan immunization provider, that information is reported to both MCIR and WIR.

The benefits for both Michigan and Wisconsin patients include:

- Reducing the need to search for immunization records across multiple sources.
- Reducing the need for providers to update client records within the IIS.
- Providing better visibility for local health departments to assess vaccination coverage in their jurisdiction.



News from NASN...

[Implementing New Seizures and Epilepsy Clinical Guideline Webinar](#)

Wednesday, October 17, 11:00 a.m.-12:00 p.m., Eastern

Learn how to implement evidence into practice during this webinar featuring NASN's School Nursing Evidence-based Practice Seizures and Epilepsy Clinical Guideline to address the needs of school-age children with seizures and epilepsy. Following this webinar, school nurses will be empowered to provide optimal evidence-based nursing care to this population, and to improve outcomes through use of the current evidence in how to best manage and care for students with seizure disorders. [Register today.](#)

[National Prescription Drug Take Back Day - October 27](#)



The [National Prescription Drug Take Back Day](#) addresses a crucial public safety and public health issue. According to the 2016 National Survey on Drug Use and Health, 6.2 million Americans misused controlled prescription drugs. The study shows that a majority of abused prescription drugs were obtained from family and friends, often from the home medicine cabinet. The DEA's Take Back Day provides an opportunity for all of us to prevent drug addiction and overdose deaths.

Vitamin B May Boost Kidney Function in Young Diabetics

Adolescents suffering from Type-1 diabetes may benefit from Vitamin B supplements as it improves kidney functions by protecting against development and progression of renal diseases, a new study has found. [Read more...](#)

Teens and Asthma Medications

What are some ways to encourage teenagers to take their asthma medication every day? For this month's Ask the Allergist, the Allergy & Asthma Network spoke with Michael Blaiss, MD. [Read more...](#)

FDA Approves Expanded Use of Gardasil 9

The U.S. Food and Drug Administration approved a supplemental application for Gardasil 9 (Human Papillomavirus (HPV) 9-valent Vaccine, Recombinant) expanding the approved use of the vaccine to include women and men aged 27 through 45 years. Gardasil 9 prevents certain cancers and diseases caused by the nine HPV types covered by the vaccine. [Read more...](#)



Photo- Megan Farmer/Omaha World-Herald via AP

A Third of Students Need Eye Exams, Study Finds

Despite the spread of nearsightedness among U.S. schoolchildren, nearly 1 in 3 has not had a vision screening in at least two years, according to a new Education Week Research Center analysis of federal data, and research suggests several ways schools may help reduce children's risk of bad eyesight. [Read more...](#)

There is a lot of worry going around about an increase in anxiety among children and teenagers. Is it an epidemic fueled by contemporary stresses, or a sign that young people, and their families, are more comfortable asking for help? The [2018 Children's Mental Health Report](#) addresses that question and others in an in-depth look at recent research on anxiety.

While anxiety is the most common disorder in children, it has historically been the least treated. And that matters a great deal because we know that, left untreated, anxiety doesn't just cause children and teenagers great distress and dysfunction, it dramatically increases the risk of developing other disorders, including depression and substance abuse. [Check out the report](#) and other resources on childmind.org on identifying and treating anxiety. The good news is that treatment for anxiety is among the most effective in the mental health field, especially when it's caught early.



We invite employers of nurses, nurses associations, schools of nursing, and others committed to improving the health of nurses to join the Healthy Nurse, Healthy Nation™ Grand Challenge. Partners will help spread the word about the initiative, engage on the platform, and work closely with us to reach our goals.

View this on Healthynursehealthynation

PRACTICE POINTS



In my last Practice Points (10/9/18), I mentioned that I was presenting at the State Superintendent's Leadership Conference to Pupil Services and Special Education Directors. I discussed issues related to delegation, the Wisconsin Nurse Practice Act, medication administration, and staffing. I am happy to report the room was not empty! What I did note was a true desire by those in attendance to understand student health services.

It is time that all Wisconsin school nurses 1) are recognized and counted; 2) collect, use, and report district data to inform their practice and the decisions of school administrator; and 3) share district data so the state has aggregated information reflecting the health needs of Wisconsin schoolchildren and can address gaps in providing services to those children. To achieve that, I need the help of all Wisconsin school nurses! First, I need to know who and where you are.

Last week, a Google survey was included in the email that all Special Education Directors received from Barbara Van Haren, (Director of Special Education -Wisconsin Department of Public Instruction) designed to collect contact information for school nurses in public schools. If you are reading this, please ask if your director responded to the 2-minute survey. I will use that information to build a database of Wisconsin school nurses. It is a start.

The next step is to empower school nurses to begin wherever or in whatever circumstances they are, to understand the relevance of collecting, using, and reporting school health services data. In the August 2018 back to school issue of the DPI School Nurse Update, I announced that Wisconsin's voluntary School Health Services Survey would use nationally defined data points in addition to Wisconsin specific data points. Attached to this Update is a data collection sheet. Wisconsin school nurses may use it to inform the data they are collecting this year.

On October 29, I will be traveling to Turtle Lake, Wisconsin to lead a discussion with school nurses on creating an evidenced-based school nursing practice. Evidenced-based practice (EBP) is the foundation of 21st Century school nursing practice and is part of the Scope and Standards of School Nursing practice. EBP involves critical thinking, knowing your audience, using your data, and prioritizing your work based on data. What school nurse does not need to prioritize their work, nor want to do what is best for their particular students?

Start small. Begin with the data you already collect on your students. Do you or your health aids chart? Then you are creating data! Now begin to collect it, then analyze it, and finally use it. Start with one or two data points that best tell your story or, the story of your students. If you are unsure what data point might be useful, then choose one or two from the Wisconsin School Health Services Survey. Then in May or June report that information!

School Nurse Webpage: <https://dpi.wisconsin.gov/faculty-services/school-nurse>



To join the School Nurse Email List and receive school nursing updates and information send an email to join-schoolnurse@lists.dpi.wi.gov



Wisconsin School Health Services Survey
Year Long Data Collection Tool

DATA POINT	DEFINITION CRITERIA	DATA POINT
Number of enrolled students in district	RN=Registered Nurse LPN=License Practice Nurse LVN=Licensed UAP= Unlicensed Assistive Personnel (non RN or non LPN) FTE=Full-time Equivalent (based on teacher FTE) Enrolled students: Use district's official (third Friday count) number.	
Health Personnel Information		
Total number of RN FTEs with an assigned caseload providing direct services	Direct services. Means responsible for the care of a defined group of students in addressing their acute and chronic health conditions. It includes case management, health screenings and health promotion activities. Direct services also include care provided by members of a health care team including LPNs or unlicensed assistive personnel. Include long-term substitutes. Do not include RNs, LPNs, UAPs working with medically fragile students (1:1, 1:2, 1: 3, 1; 4 or 1:5). Do not include % of administrative assignment for RN. Case management FTEs included under administrative or supervisory FTEs.	
Total number of RN FTEs with special assignment	Include RNs working with limited caseload providing direct services such as medically fragile students (1:1, 1:2, 1: 3, 1; 4 or 1:5).	
Total number of RN FTEs providing administrative or supervisory school health services	RNs providing management/clinical supervision to RNs, LPNs, or other health extenders, UAPs, or conducting other administrative health services, e.g. case management.	
Total number of LPN FTEs with an assigned caseload providing direct services	See definition of direct services above.	
Total number of LPNs FTEs with special assignment	Include LPNs working with limited caseload providing direct services such as medically fragile students (1:1, 1:2, 1: 3, 1; 4 or 1:5).	
Total number of UAP FTEs with an assigned caseload that includes providing direct health services	See definition of direct services above.	

Total number of UAPs FTEs with special assignment	Include UAPs working with limited caseload providing direct services such as medically fragile students (1:1, 1:2, 1: 3, 1; 4 or 1:5).	
Total number of assistant FTEs providing administrative support services to RNs or LPNs	Assistants providing administrative support services to RNs or LPNs/LVNs, e.g. clerical assistance. Do not include FTEs spent doing non-health related clerical activities.	
Health Services Provided		
Urinary Catheterization	Enter the number of students requiring the procedure at school, <u>not</u> the number of times the procedure was performed. A student may be entered in more than one category if he/she had more than one procedure. Include students who were enrolled at any time during the current school year even if they have been withdrawn or dropped out. Only include students for which a healthcare provider ordered the procedure to be done during school hours or during a school sponsored activity. If no students required the procedure, enter a numerical zero (0). If your district/school does not collect this information then enter DNC	
Wound Care (i.e. dressing changes)	See definition above.	
Glucose Monitoring	See definition above.	
Carbohydrate Counting	See definition above.	
Nebulizer Treatment	See definition above.	
Ostomy Care (Colostomy, Ileostomy, Jejunostomy)	See definition above.	
NG/G Tube Care (includes care, feeding and/or medication)	See definition above.	
Oral Suctioning	See definition above.	
Tracheal Suctioning/ Trach Care	See definition above.	
Ventilator Care	See definition above.	
Oxygen Delivery	See definition above.	
Other (specify)	"Other" examples include range of motion exercises, peak flow measurements, feeding assistance, IV/Heparin flush, oxygen saturation readings, weight measurements, etc.	
Medications: Record the total number of students with order to receive dose(s) of medication administered by school district staff or self-administered.	Record number of known students with orders to administer medications at school, <u>not</u> number of doses administered. Count students with valid medication consent for prescription and over the counter medications on file even if doses self-administered. Include students who were enrolled at any time during the current school year even if they have withdrawn or dropped out. If your district/school does not collect this information then enter DNC.	

Students with orders for daily/regular scheduled prescription medications.	See description above.	
Students with prescription orders for non- emergency PRN or as needed medications.	See description above.	
Students with prescription orders for emergency or urgent medication (e.g. Glucagon, diastat, epinephrine- not all inclusive list)	Include all orders for inhalers.	
Students with consents for cover-the-counter medication (Tylenol/Ibuprofen, etc.)	See description above.	
Screenings:	If your district/school does not collect this information then enter DNC . If no screening or referral completed then enter a numerical zero (0).	
<u>Height and Weight (BMI)</u> Screened for height and weight	Report number of students with a health population screenings at school, regardless of which staff or agency conducts the screening.	
Referred for height and weight		
<u>Vision Screening</u> Screened for vision	Report number of students with a health population screenings at school, regardless of which staff or agency conducts the screening.	
Referred for vision		
<u>Hearing Screening</u> Screened for hearing.	Report number of students with a health population screenings at school, regardless of which staff or agency conducts the screening.	
Referred for hearing		
Number of IEP assessment or planning meetings attended by RN.	Record number of meetings attended. May include multiple meetings for same student. If your district/school does not collect this information then enter DNC. If RN did not attend any such meeting, enter zero (0).	
Number of 504 assessment or planning meetings attended by RN.	Record number of meetings attended. May include multiple meetings for same student. If your district/school does not collect this information then enter DNC. If RN did not attend any such meeting, enter zero (0).	
Number of Student Intervention meetings attended by RN.	Record number of meetings attended. May include multiple meetings for same student. If your district/school does not collect this information then enter DNC. If RN did not attend any such meeting, enter zero (0).	
Presentations Given	Each inservice or class = 1 session. Include sessions RN coordinates or conducts as a self-study with a Q&A opportunity, such as bloodborne pathogens training.	
Staff inservice/training sessions	See definition above.	

Student health education presentations	See definition above.	
Parent or community group presentations	See definition above.	
	Student Health Encounters and Disposition	
Number of student encounters/health office visits to RN	Include only students who are seen (face to face) by RN.	
RN Disposition: Return to class or stayed in school	Include only students who are seen (face to face) by RN.	
RN Disposition: EMS (911) called	Include only students who are seen (face to face) by RN.	
RN Disposition: Student sent home or released from school	Include only students who are seen (face to face) by RN. Includes students sent home with the recommendation/directive to see a healthcare provider.	
Number of student encounters/health office visits to LPN	Include only students who are seen (face-to-face) by LPN (not RN).	
LPN Disposition: Return to class or stayed in school	Include only students who are seen (face to face) by LPN.	
LPN Disposition: EMS (911) called	Include only students who are seen (face to face) by LPN.	
LPN Disposition: Student sent home or released from school	Include only students who are seen (face to face) by LPN. Includes students sent home with the recommendation/directive to see a healthcare provider.	
Number of student encounters/health office visits health aide/UAP	Include only students who are seen (face-to-face) by other health UAP staff (non-RN, non- LPN). May include secretary or other IF it is included as a specific part of their responsibility. Do not include if seen by RN or LPN.	
UAP Disposition: Return to class or stayed in school	Do not count if seen by RN or LPN.	
UAP Disposition: EMS (911) called	Do not count if seen by RN or LPN.	
UAP Disposition: Student sent home or released from school	Do not count if seen by RN or LPN.	
	CHRONIC HEALTH CONDITIONS	
Record the number of students in each category with a medical diagnosis from a healthcare provider.	<p>Medical Diagnosis refers to documentation of a diagnosis from a licensed healthcare provider/prescriber. For example if parents say their child has asthma, etc., but does NOT provided documentation from a healthcare provider, the child should NOT be included in this count.</p> <p>Count students who were enrolled at <u>any time during the current school year</u> even if they have withdrawn or dropped out.</p> <p>Count students who had diagnosis at start of school year or were diagnosed at any point during the school year.</p>	

	<p>Student may be counted in more than one category if they have multiple diagnoses.</p> <p>Lists of possible conditions for inclusion are not exhaustive or all inclusive.</p> <p>If your district/school does not collect this information then enter DNC. If information collected but, no students have a condition enter a numerical zero (0).</p>	
Attention Disorder	See definition above.	
<u>Life threatening Allergic Disorder</u> (Student has medically diagnosed severe allergy that has the potential to cause death.)	See definition above.	
<u>Non-life threatening Allergic Disorder</u> (Student has medically diagnosed seasonal, perennial, food/chemical/drug/or insect allergy that is not known to have the potential to cause death - allergic rhinitis , localize swelling.)	See definition above.	
Asthma	See definition above.	
Cancer (Leukemia, tumors, and other forms of cancer)	See definition above.	
<u>Cardiovascular</u> (Clinically significant cardiac murmurs, cardiac insufficiency, arrhythmias, pace makers, hypertension, Kawasaki's disease, Raynaud's syndrome)	See definition above.	
<u>Congenital/Genetic</u> (Down syndrome, Fragile X Syndrome, Turner Syndrome, other syndromes)	See definition above.	
Diabetes Type 1	See definition above.	
Diabetes Type 2	See definition above.	
Eating Disorders	See definition above.	
Eye (Blindness, amblyopia and other eye diseases/conditions. Do not count basic corrective eyewear)	See definition above.	

Gastro-Intestinal (GERDS, ulcers irritable bowel syndrome, encopresis, Celiac Disease, Crohn's Disease, colostomy)	See definition above.	
Genito-Urinary (Voiding dysfunction including enuresis, bladder disease, urostomy, renal disease, dysmenorrhea, endometriosis)	See definition above.	
Hematology (not including cancers)	See definition above.	
Musculo-Skeletal (Muscular dystrophy, scoliosis, skeletal dysplasia, fibromyalgia, juvenile rheumatoid arthritis, osteogenesis imperfect)	See definition above.	
Concussions (known medically diagnosed concussions)	See definition above.	
Migraines (known medically diagnosed)	See definition above.	
Seizure Disorders (known medically diagnosed)	See definition above.	
Other Neurological Disorders (autism, cluster headaches, spina bifida, cerebral palsy, traumatic brain injury, benign vertigo, and neurofibromatosis)	See definition above.	
Pregnancy (count female students only. Count student only once unless she becomes pregnant more than once during current school year)	See definition above.	
Psychiatric - other than eating disorders (Anxiety, depression, bi-polar, obsessive compulsive disorder, suicide ideation, behavior disorder, alcohol use disorder, drug misuse)	See definition above.	
Respiratory other than asthma (Chronic bronchitis, tracheostomy/ventilator dependent)	See definition above.	

Other (Use this category ONLY for diagnoses that cannot be included in one of the reportable categories)	See definition above.	
Total Number of Students with Special Health Conditions	<p>A special health care condition is a condition reported by a parent and/or diagnosed by a physician or nurse practitioner.</p> <p>Include all students for which your district consulted, monitored, developed a care plan, provided clinical services, or provided teaching, counseling, or related services.</p> <p>Do not count students more than once. Count students who were enrolled at any time during the current school year even if they have withdrawn or dropped out.</p> <p>If your district/school does not collect this information then enter DNC.</p>	
District Health Services Practices		
Does the school district bill Medicaid for School Based Services Nursing/Health Services?		
Does your district stock albuterol?		
Does your district stock emergency epinephrine?		
Does your district stock naloxone?		
Does your district stock over-the-counter analgesics?		

Drug Impairment Training

for Educational Professionals (DITEP)



8:30 am—3:30 pm
Registration 8:00-8:30 am

DATES / LOCATIONS:

■ **October 25-26, 2018**

CESA #2
1221 Innovation Drive
Whitewater, WI 53190
Contact: Jackie Schoening, CESA #6
(920) 236-0515
jschoening@cesa6.org

■ **November 14-15, 2018**

CESA #5
626 E. Slifer Street
Portage, WI 53901
Contact: Lynn Verage, CESA #9
(715) 453-2141 Ext.228
lverage@cesa9.org

■ **December 11-12, 2018**

CESA #7
595 Baeten Road
Green Bay, WI 54304
Contact: Chris Kleiman, CESA #7
(920) 617-5645
ckleiman@cesa7.org

■ **March 5-6, 2019**

CESA #11
225 Ostermann Drive
Turtle Lake, WI 54889
Contact: Carol Zabel, CESA #10
(715) 720-2145
czabel@cesa10.org

AUDIENCE:

Educators,
School Nurses,
Administrators,
Law Enforcement,
Parents, and
Youth-Serving
Organizations



The purpose of this two-day training is to enable education professionals to identify chemically impaired individuals and types of drugs for the purpose of ensuring a safe learning environment.

Day 1 is designed to be a general information day which includes:

- Introduction and overview
- Drugs in society
- Policy, procedures, and roles
- Drug identification
- Overview of alcohol
- Drug categories and their observable effects
- Issues involving the law
- Contacting parents
- References

Day 2 is designed to be a skills training day which includes:

- Eye examinations
- Vital signs
- Divided attention tests
- Poly-drug use
- Assessment Process

Objectives of this training are the following:

- Describe the involvement of drugs in school and society
- Name the seven drug categories and recognize their effects
- Describe drug impairment signs and symptoms
- Properly interpret the results of your observations

ONLINE REGISTRATION:

■ **Whitewater:** <https://login.myquickreg.com/register/event/event.cfm?eventid=21132>

■ **Portage:** <https://login.myquickreg.com/register/event/event.cfm?eventid=21133>

■ **Green Bay:** <https://login.myquickreg.com/register/event/event.cfm?eventid=21134>

■ **Turtle Lake:** <https://login.myquickreg.com/register/event/event.cfm?eventid=21131>

COST: \$50.00 (Includes Lunch and Refreshments)

Registration Questions:

Mary Devine (800) 514-3075; mdevine@cesa4.org;

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 and purchase orders. Thank you!



Introduction to Restorative Practices and Using Circles Effectively

From day one, you will learn a range of practices you can use every day. You'll learn how to set high expectations while being supportive. You will practice how to provide direct feedback and how to ask questions that foster accountability. You will also learn the most effective methods to resolve common conflicts.

AUDIENCE:

Administrators, School Counselors,
Social Workers, and Teachers

Registration 8:00-8:30 am
Workshop 8:30 am-3:30 pm

DATES / LOCATIONS:

■ Oct. 19 and Nov. 30, 2018

Prairie River Middle School Library
106 N. Polk Street, Merrill, WI 54452
Contact: Carol Zabel, CESA #10
(715) 720-2145
czabel@cesa10.org

■ November 7-8, 2018

CESA #12, 618 Beaser Avenue
Ashland, WI 54806
Contact: Lynn Verage, CESA #9
(715) 453-2141;
lverage@cesa9.org

■ January 8-9, 2019

CESA #2, 1221 Innovation Drive
Whitewater, WI 53190
Contact: Jackie Schoening, CESA #6
(920) 236-0515 jschoening@cesa6.org

■ January 21-22, 2019

CESA #6, 2300 State Road 44
Oshkosh, WI 54904
Contact: Jackie Schoening, CESA #6
(920) 236-0515 jschoening@cesa6.org

■ January 22-23, 2019

CESA #8, 223 W. Park Street
Gillett, WI 54124
Contact: Chris Kleiman, CESA #7;
(920) 617-5645
ckleiman@cesa7.org

■ March 6-7, 2019

CESA #1, N25 W23131 Paul Road
Pewaukee, WI 53072
Contact: Chris Kleiman, CESA #7;
(920) 617-5645
ckleiman@cesa7.org

■ June 19-20, 2019

CESA #7, 595 Baeten Road
Green Bay, WI 54304
Contact: Chris Kleiman, CESA #7;
(920) 617-5645
ckleiman@cesa7.org

DAY 1: Participants will understand key concepts of restorative practices, including:

- Fundamental Hypothesis/Social Discipline Window
- Fair Process
- Psychology of Affect
- Restorative Practices Continuum

We devote the second day entirely to teaching attendees to facilitate restorative circles. Circles are an essential process for building social capital, resolving social problems and responding when harm occurs. Circles create a positive learning environment. You will learn by participating in circles with other attendees, taking turns to learn how to facilitate. By the end of the day, you will be prepared to return to your setting and run your first circle!

DAY 2: Participants will:

- Understand the purpose of the circle process and how circles can be used in your setting
- Learn the necessary skills to prepare and facilitate restorative circles

ONLINE REGISTRATION:

- **Merrill:** <https://login.myquickreg.com/register/event/event.cfm?eventid=22070>
- **Ashland:** <https://login.myquickreg.com/register/event/event.cfm?eventid=21107>
- **Whitewater:** <https://login.myquickreg.com/register/event/event.cfm?eventid=21108>
- **Oshkosh:** <https://login.myquickreg.com/register/event/event.cfm?eventid=21109>
- **Gillett:** <https://login.myquickreg.com/register/event/event.cfm?eventid=21110>
- **Pewaukee:** <https://login.myquickreg.com/register/event/event.cfm?eventid=21111>
- **Green Bay:** <https://login.myquickreg.com/register/event/event.cfm?eventid=21112>

REGISTRATION ASSISTANCE: Mary Devine, CESA #4
(800) 514-3075; mdevine@cesa4.org

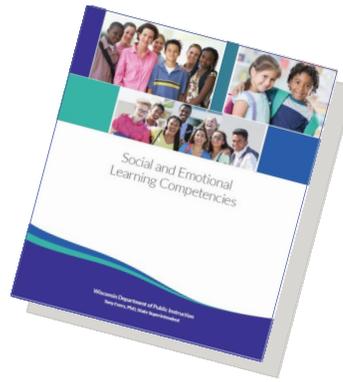
COST: \$200.00 registration fee per person
(Handouts, lunch and refreshments are included)

PAYABLE TO: CESA #4

SEND PAYMENT TO: CESA #4, 923 East Garland Street,
West Salem, WI 54669 ATTN: Mary Devine

PLEASE include and clearly define: Participant name, exact name of workshop, and date with all checks or purchase orders. Thank you!





Moving Forward with Social Emotional Learning

Making social and emotional learning (SEL) skills part of the learning equation helps children succeed in school and life. With social and emotional skills, children can manage their feelings, build healthy relationships, and navigate social environments. When adults are supported by good policies and training, children develop the skills needed to prepare them for the world.

In May of 2018, the Wisconsin Department of Public Instruction released the final draft of the long anticipated [Wisconsin Social Emotional Learning \(SEL\) Competencies](#).

Now that the competencies are finalized, districts have been asking for assistance in figuring the next steps in implementing these competencies. Therefore, we have developed this workshop to give district teams the opportunity to unpack the competencies.

Participants will:

- Map what is currently being done in their building or district to teach the competencies
- Conduct a gap analysis between the competencies and what is currently being taught
- Create a plan for filling in the gaps
- Figure out how to assess if students have mastered the competencies
- See how some school districts in our state are implementing Social Emotional Learning

Presenter:

Beth A. Herman, MSE
School Mental Health Training Consultant
Wisconsin Department of Public Instruction

*** Training dates, times and locations are on the reverse side of this flyer ***



MOVING FORWARD WITH SOCIAL EMOTIONAL LEARNING



TRAINING DATES / TIMES / LOCATIONS:

- **October 3, 2018; 9:00 am-3:00 pm**
CESA #8; 223 W. Park Street, Gillett, WI 54124
Contact: Christine Kleiman CESA #7 (920) 617-5645
ckleiman@cesa7.org

- **October 31, 2018; 9:00 am-3:00 pm**
CESA #4; 923 East Garland Street, West Salem, WI 54669
Contact: Carol Zabel, CESA #10 (715) 720-2145
czabel@cesa10.org

- **November 6, 2018; 9:00 am-3:00 pm**
CESA #2; 1221 Innovation Drive, Whitewater, WI 53190
Contact: Jackie Schoening, CESA #6 (920) 236-0515
jschoening@cesa6.org

- **November 14, 2018; 9:00 am-3:00 pm**
CESA #11; 225 Ostermann Drive, Turtle Lake, WI 54889
Contact: Carol Zabel, CESA #10 (715) 720-2145
czabel@cesa10.org

- **November 15, 2018; 9:00 am-3:00 pm**
CESA #12; 618 Beaser Avenue, Ashland, WI 54806
Contact: Lynn Verage, CESA #9 (715) 453-2141 Ext. 228
lverage@cesa9.org

- **November 16, 2018; 9:00 am-3:00 pm**
CESA # 9; 304 Kaphaem Road, Tomahawk, WI 54487
Contact: Lynn Verage, CESA #9 (715) 453-2141 Ext. 228
lverage@cesa9.org

- **November 26, 2018; 9:00 am-3:00 pm**
CESA #2; 1221 Innovation Drive, Whitewater, WI 53190
Contact: Jackie Schoening, CESA #6 (920) 236-0515
jschoening@cesa6.org

- **November 28, 2018; 9:00 am-3:00 pm**
CESA # 6; 2300 State Road 44, Oshkosh, WI 54904
Contact: Jackie Schoening, CESA #6 (920) 236-0515
jschoening@cesa6.org

- **November 29, 2018; 9:00 am-3:00 pm**
CESA #7; 595 Baeten Road, Green Bay, WI 54304
Contact: Christine Kleiman, CESA #7 (920) 617-5645
ckleiman@cesa7.org

- **December 14, 2018; 9:00 am-3:00 pm**
CESA #1; N25 W23131 Paul Road, Pewaukee, WI 53072
Contact: Christine Kleiman, CESA #7 (920) 617-5645
ckleiman@cesa7.org

- **January 10, 2019; 9:00 am-3:00 pm**
CESA #3; 1300 Industrial Drive, Fennimore, WI 53809
Contact: Jackie Schoening, CESA #6 (920) 236-0515
jschoening@cesa6.org

- **February 26, 2019; 9:00 am-3:00 pm**
CESA #5; 626 E. Slifer Street, Portage, WI 53901
Contact: Lynn Verage, CESA #9 (715) 453-2141 Ext. 228
lverage@cesa9.org



**REGISTRATION ON-SITE
ONE-HALF HOUR PRIOR TO WORKSHOP**

ONLINE REGISTRATION:

- Gillett**—October 3, 2018
<https://login.myquickreg.com/register/event/event.cfm?eventid=20965>

- West Salem**—October 31, 2018
<https://login.myquickreg.com/register/event/event.cfm?eventid=20966>

- Whitewater**—November 6, 2018
<https://login.myquickreg.com/register/event/event.cfm?eventid=20967>

- Turtle Lake**—November 14, 2018
<https://login.myquickreg.com/register/event/event.cfm?eventid=20968>

- Ashland** - November 15, 2018
<https://login.myquickreg.com/register/event/event.cfm?eventid=20975>

- Tomahawk** - November 16, 2018
<https://login.myquickreg.com/register/event/event.cfm?eventid=20969>

- Whitewater**—November 26, 2018
<https://login.myquickreg.com/register/event/event.cfm?eventid=22141>

- Oshkosh**—November 28, 2018
<https://login.myquickreg.com/register/event/event.cfm?eventid=20970>

- Green Bay**—November 29, 2018
<https://login.myquickreg.com/register/event/event.cfm?eventid=20971>

- Pewaukee**—December 14, 2018
<https://login.myquickreg.com/register/event/event.cfm?eventid=20972>

- Fennimore** - January 10, 2019
<https://login.myquickreg.com/register/event/event.cfm?eventid=20973>

- Portage**- February 26, 2019
<https://login.myquickreg.com/register/event/event.cfm?eventid=20974>



COST: \$25.00 (Includes lunch and snacks)

Registration Questions Contact: Mary Devine; (608) 786-4800
mdevine@cesa4.org

Send payment to:
CESA #4
923 East Garland Street
West Salem, WI 54669

ATTN: Mary Devine
PLEASE include and clearly define: Participant name, exact name of workshop, and date, with all checks or purchase orders.
Thank you!



The Herma Heart Institute & Project ADAM invite you to become a **Heart Safe School**

November
27

8:30 am – Check in
9:00 am – 11:30 am – Workshop

Location: CESA 10
725 West Park Avenue Chippewa
Falls, Wisconsin

For more information on Project
ADAM please visit:

www.projectadamwi.com
www.projectadam.com

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 the designation.

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

Please register by November 20th at
<https://www.projectadam.com/CESA10workshop>

