

All materials and training provided by a federal grant funded by the Human Resources and Services Agency (HRSA) and supported in part by MC 00123 01 from the Department of Health and Human Services Health Resources and Services Administration, and Maternal and Child Health Bureau.

Participants will receive:

- Certification of their choice of tracks
- Credit Hours
- Emergency Preparedness Training Plan and Safety Resource Network Contacts
- "Working With" model for developing community teams in your area
- Curriculum and supporting materials

Who should attend?

Individuals, or community teams of the following:

- K-12 educators, health educators, curriculum coordinators, public health nurses, and administrators
- School nurses, interested community partners
- EMS, law enforcement personnel, and fire fighters

Questions?

Questions may be directed to:

Amy Marsh, SD EMSC Programs Coordinator
at 605-328-6668 or amarsh@usd.edu

Sponsors:

American Heart Association
American Red Cross
South Dakota EMS for Children
South Dakota Department of Public Safety
Sioux Valley Poison Center
Wisconsin EMSC
University of Wisconsin LaCrosse

South Dakota EMS for Children
1400 West 22nd Street
Sioux Falls, SD 57105-1570



Be ready with BELSS on!

**Basic Emergency
Lifesaving Skills in
Schools**

A framework for teaching
emergency lifesaving
skills to children and
adolescents

Training for Emergency
Preparedness Plan

2004

South Dakota Workshops

Rapid City, SD—
Best Western Ramkota
October 26 and 27

Sioux Falls, SD— USD
School of Medicine

Dec 9 and 10

Planning for other BELSS
workshops is in the
works, if you would like to
have a BELSS Workshop
in your community,
please let us know.



Workshop Details

Date (please circle the date you are attending):

- October 27 and 28, 2004—Rapid City
Ramkota Hotel
- December 9 and 10, 2004—Sioux Falls
USD School of Medicine

Time:

Check-in 7:30am
Workshop 8:00am to 5:00pm

Cost:

\$40.00 per person
\$30.00 per person, if registered in teams of three or more

Goals and Objectives of BELSS Training

Establish a model that:

- Includes the entire spectrum of emergency health safety, injury prevention, first aid, emergency preparedness, CPR and AED.
- Is repeated and reinforced through progression from Preschool through 12th grade.
- Is interactive, age appropriate, culturally competent, using current methods.
- Establishes community emergency response networks.
- Educates about efficient emergency preparedness

Description of the Tracks:

ONE	TWO	THREE
<p>Audience: K-8 Educators Community Team Members</p> <p>Curricula Focus: NFPA Risk Watch—<i>Risk Watch</i> is the first comprehensive injury prevention program available for use in schools. Developed by NFPA (National Fire Protection Association) with co-funding from the Lowe's Home Safety Council and in collaboration with a panel of respected safety and injury prevention experts, <i>Risk Watch</i> gives children and their families the skills and knowledge they need to create safer homes and communities.</p> <p>Emergency Preparedness Coordinated School Health First Aid, CPR and AED Training</p>	<p>Audience: Middle & High School Educators Community Team Members</p> <p>Curricula Focus: American Red Cross Basic Level and Instructor Certification Emergency Preparedness Coordinated School Health Basic First Aid, CPR and AED Training</p>	<p>Audience: Middle & High School Educators Community Team Members</p> <p>Curricula Focus: American Heart Association Basic Life Support Instructor Emergency Preparedness Coordinated School Health Heart Saver CPR and Automatic External Defibrillator (AED) Basic First Aid</p>

Registration Form

Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Email _____

School District / Community _____

I am currently certified as an AHA, CPR or AED provider.

____ Yes ____ No

I am currently certified as a Red Cross CPR provider.

____ Yes ____ No

Participation Title: Check and circle appropriate title/level.

____ Teacher: Elementary Middle School High School
 ____ Public Health: Education Administrator Nurse
 ____ School: Nurse Administrator Other _____
 ____ Community: Parent Law Enforcement Fire Fighter
 Agency Staff Community Youth Group Staff
 Other _____

I am registering for Track:

One _____ Two _____ Three _____

Registration Amount:

____ \$40.00 Single registration
 ____ \$30.00 Team registration *

*Please note, community teams must include one participant from education. Team members should mail registrations together.

Please mail you registration and make check payable to:

South Dakota EMSC
1400 West 22nd Street
Sioux Falls, SD 57105-1570