



Monday, April 14, 2025 Board of Education Meeting

Scullen Leadership Center - Community Room
131 E. Washington Street, Suite 1A
Appleton, WI 54911
Time: 5:30 PM

Some participants may join remotely, and both members of the media and the public can attend the meeting in person or watch the live stream on the AASD website. Any special needs or any requests for accommodations related to accessing the meeting should be sent to Kayla Malott, at malottkayla@asds.k12.wi.us or (920) 852-5300 ext.60111, at least 24-hours in advance of the meeting.

1. MEETING OPENING

- A. Roll Call
- B. Pledge of Allegiance

2. CLOSED SESSION

- A. Motion to go into closed session
- B. Wisconsin State Statute 19.85(1)(c)- Considering employment, promotion, compensation or performance evaluation data of any public employee over which the governmental body has jurisdiction or exercises responsibility, for the purpose to discuss the Professional Educator Preliminary Notice of Non-renewal(s)
- C. Wisconsin State Statute 19.85(1)(c)- Considering employment, promotion, compensation or performance evaluation data of any public employee over which the governmental body has jurisdiction or exercises responsibility, for the purpose to discuss a Principal Personnel Matter
- D. Motion to return to open session

3. POSSIBLE RECESS/RECONVENE at 6:00pm

****PLEASE NOTE**** The regular open session business portion of the meeting will begin at 6:00 PM or upon the conclusion of the closed session, whichever is later. If the closed session concludes prior to 6:00 PM, the Board will recess until 6:00 PM.

4. APPROVAL OF AGENDA (GC-2: Governing commitments)

- A. Board Member request to remove Consent Agenda Item(s) for Separate Consideration
- B. Approval of Agenda

5. SPECIAL PRESENTATION

- A. Student School Board Representative Report
- B. Appleton West High School Performance
- C. Recognizing Board Member James Bacon

6. PUBLIC INPUT (GC-3.3: Initiate and maintain effective communication with the citizens.)

A. Public Input

7. BOARD DEVELOPMENT (GC-2.2: The Board will assure that its members are provided with training and professional support necessary to govern effectively.)

A. None

8. INFORMATION FOR BOARD DECISION PREPARATION (OE-8.4: Assure that the Board had adequate information from a variety of internal and external viewpoints to assure informed Board decisions.)

A. Business Services Update(s):

- AP Check Register-March 2025

B. School/Student Services Update(s): None

C. Personnel Services Update(s):

- Professional Educator New Hire(s)
- Professional Educator Contract(s)
- Professional Educator Contract Change(s)
- Professional Educator Resignation(s)
- Professional Educator Preliminary Notice of Non-renewal(s)

Attachments: [IFC- PE New Hires 4.14.25.pdf](#)

Attachments: [IFC- PE Contracts 25_26 4.14.25.pdf](#)

Attachments: [IFC- PE Contract Change\(s\) 4.14.25 \(1\).pdf](#)

Attachments: [IFC- PE Resignation\(s\) 4.14.25.pdf](#)

Attachments: [IFC- PE Contract Preliminary Notice of Non-renewals 4.14.25.pdf](#)

9. BOARD'S CONSENT AGENDA (GC-2.4: The Board will use a consent agenda as a means to expedite the disposition of routine matters and dispose of other items of business it chooses not to discuss.)

A. Board Meeting Minutes from March 31, 2025

Attachments: [BOE Meeting minutes 3.31.25 \(1\).pdf](#)

10. SUPERINTENDENT'S CONSENT AGENDA (OE-8.10: Provide for the Board adequate information about all administrative actions and decisions that are delegated to the Superintendent but required by law to be approved by the Board.)

A. Professional Educator New Hire(s)

Attachments: [IFC- PE New Hires 4.14.25.pdf](#)

B. Professional Educator Contract(s)

Attachments: [IFC- PE Contracts 25_26 4.14.25.pdf](#)

C. Professional Educator Contract Change(s)

Attachments: [IFC- PE Contract Change\(s\) 4.14.25 \(1\).pdf](#)

D. Professional Educator Resignation(s)

Attachments: [IFC- PE Resignation\(s\) 4.14.25.pdf](#)

E. Professional Educator Preliminary Notice of Non-renewal(s)

Attachments: [IFC- PE Contract Preliminary Notice of Non-renewals 4.14.25.pdf](#)

11. REPORTS (OE-8.2: Provide for the Board, in a timely manner, information about trends, facts, and other information relevant to the Board's work.)

A. Business Services Report:

- Current Budget Update-How did we get here?

Attachments: [Current Financial Outlook 4.14.25.pdf](#)

B. School/Student Services Report:

- Attendance Update

Attachments: [BOE Attendance Update 4.14.25.pdf](#)

C. Personnel Services Report: None

12. BOARD BUSINESS

A. AP Check Register-March 2025

B. Policy Update: 453.1- Emergency Nursing Services

Attachments: [IOI Emergency Nursing Services Policy 453.1.pdf](#)

Attachments: [Draft 453.1 Emergency Nursing Services Policy.pdf](#)

C. Policy Update: 453.3 -Communicable Diseases

Attachments: [IOI- Communicable Disease Policy 453.3 4.14.25.pdf](#)

Attachments: [DRAFT 453.3 Communicable Disease Policy .pdf](#)

D. Policy Update: 453.4- Administration of Drug Products/Medications to Students

Attachments: [IOI-Policy 453.4 - Administration of Drug Products_ Medications to Students.pdf](#)

Attachments: [Draft Policy of Medication Admin Policy 453.4.pdf](#)

E. Policy Retirement: 453.6 Rule- First Aid

Attachments: [DRAFT First Aid-453.6 4.14.25.pdf](#)

Attachments: [IOI-First Aid 453.6 4.14.25.pdf](#)

F. Consent Agenda Item(s) Removed for Separate Consideration

13. ITEMS OF INFORMATION

A. April 1, 2025- School Board Election Results

Attachments: [AASD Election Results 2025.docx.pdf](#)

14. FUTURE MEETINGS

A. Board Work Session: Wednesday, April 23, 2025 at 7:30AM

B. Board Meeting: Monday, April 28, 2025 at 6:00PM

15. ADJOURN

A. Motion to adjourn the meeting



ITEM FOR CONSIDERATION

Topic: Professional Educator New Hire(s)

Background Information: The Professional Educator listed below is recommended for a contractual position for the 2024-2025 school year, effective April 7, 2025:

<u>Name</u>	<u>Position</u>	<u>Location</u>	<u>FTE</u>
Abigale J. Penkala	Special Ed-Cross Cat	Einstein	100%

The Professional Educators listed below are recommended for contractual positions for the 2025-2026 school year (effective August 25, 2025):

<u>Name</u>	<u>Position</u>	<u>Location</u>	<u>FTE</u>
Molly A. Conrad	Art	TBD	30%
Hannah N. Gutierrez Ibarra	English Learner	East/West	100%
Mailee Harkey	4K	HAIS	100%
Caylee A. Howe	Grade 5	Edison	100%
Brynn E. Howitt	Physical Ed/Health	North	100%
Bryant M. Peltier	Grade 3/4	HAIS	100%
Chloe L. Sawall	Music-Choral/General	Wilson	100%
Kailee A. Terracina	Speech & Language	TBD	100%

Instructional Impact: The candidates listed above are recommended by the administrator to whom they will report as the best candidates for the position.

Fiscal Impact: Salary will be commensurate with education and experience.

Administrative Recommendation: Approval

Contact Person(s): Chief Human Resources Officer, Julie King, (920) 852-5302

BOE: April 14, 2025



ITEM FOR CONSIDERATION

Topic: Professional Educator Contracts (2025-2026 School Year)

**Background
Information:**

The Professional Educators listed below were previously omitted from the original contract list for the 2025-2026 school year, which was presented to the Board of Education on Monday, March 10, 2025. The following professional educators are recommended for contractual positions and will provide for the continued education of the student population for the 2025-2026 school year (effective August 25, 2025):

<u>Name</u>	<u>Position</u>	<u>Location</u>	<u>FTE</u>
Elizabeth W. Elrod	Special Ed-Cross Cat	Franklin	100%
Jennifer T. Gresh	Special Ed-Cross Cat	Huntley	100%
Joel D. Hallstrom	Special Ed-Cross Cat	East	100%
Sean M. Sloan	Special Ed-Cross Cat	Johnston	100%

Administrative

Recommendation: Approval

Contact

Person(s): Chief Human Resources Officer, Julie King, (920) 852-5302

BOE: April 14, 2025



ITEM FOR CONSIDERATION

Topic: Professional Educator Contract Change(s)

**Background
Information:**

The following contract changes are recommended for the 2024-2025 School Year (effective March 31 – June 6, 2025):

<u>Name</u>	<u>Position</u>	<u>Location</u>	<u>FTE</u>
Elizabeth A.R. Beckman	Music	KA	100% to 108%
Melanie A. Malm	Art	KA	108% to 116%

The following contract changes are recommended for the 2025-2026 School Year (effective August 25, 2025):

<u>Name</u>	<u>Position</u>	<u>Location</u>	<u>FTE</u>
Hayley C. Bold	Instructional Coach	ABS	75% to 50%
Caden P. DeBruin	Business/Marketing	East	90% to 100%
Kristen J. Hedberg	World Lang.-French	KA	83% to 92%
Nicole M. Severing	World Lang.-Spanish	KA	100% to 92%
Margie G. Westmoreland	Business Education	North	60% to 80%

**Instructional
Impact:**

These assignment adjustments will meet student needs.

**Fiscal
Note:**

As indicated above.

Administrative

Recommendation: Approval

Contact

Person(s): Chief Human Resources Officer, Julie King, (920) 852-5302

BOE: April 14, 2025



ITEM FOR CONSIDERATION

Topic: Professional Educator Resignation(s)

**Background
Information:**

The following Professional Educators have submitted a letter of resignation effective at the end of the 2024-2025 school year:

Megan A. Geffers has been with the District for eight years, most recently as an English Language Arts/Social Studies Teacher at Kaleidoscope Academy.

Amanda L. Knapp has been with the District for three years, most recently as a Grade 2 Teacher at Houdini Elementary School.

Chelsea R. Lehman has been with the District for three years, most recently as a Special Education Teacher at Richmond Elementary School.

Madyson T. Pearson has been with the District for one semester, most recently as a Special Education Teacher at Wilson Middle School.

Leila A. Ramagopal Pertl has been with the District for a combined total of nine years, most recently as a Music Teacher at Edison Elementary School.

Megan K. Simenson has been with the District for two years, most recently as a Science Teacher at Wilson Middle School.

Emma C. Skiff has been with the District for one year, most recently as an English Language Arts/Social Studies Teacher at Wilson Middle School.

Jeremy D. Sparks has been with the District for four years, most recently as a Social Studies Teacher at West High School.

Rachel L. Thurston has been with the District for three years, most recently as a Special Education Teacher at Badger Elementary School.

Amy E. Westphal has been with the District for four years, most recently as a Grade 5 Teacher at Johnston Elementary School.

The following Professional Educator was a recent hire and has submitted a letter of resignation prior to the August 25, 2025, start date:

Jeffry T. Lawrence – Special Education Cross-Categorical Teacher, located at Ferber Elementary School.

Instructional

Impact: Qualified replacements will be procured

Fiscal

Impact: Dependent upon replacements

Administrative

Recommendation: Approval

Contact

Person(s): Chief Human Resources Officer, Julie King, (920) 852-5302

BOE: April 14, 2025



ITEM FOR CONSIDERATION

Topic: Professional Educator Contract(s) - Preliminary Notice of Non-renewal(s)

**Background
Information:**

Wisconsin Statute §118.22 required teachers not receiving contracts for the upcoming school year to receive both a preliminary notice of non-renewal and a final notice of non-renewal by specific dates.

The Board of Education is required to provide teachers with written notice of renewal or non-renewal on or before May 15. Per Statute, at least 15 days prior to giving written notice of refusal to renew a teacher's contract for the ensuing school year, the employing board shall inform the teacher by preliminary notice in writing that the board is considering nonrenewal of the teacher's contract and that, if the teacher files a request therefore with the board within 5 days after receiving the preliminary notice, the teacher has the right to a private conference with the board prior to being given written notice of refusal to renew the teacher's contract.

Instructional

Impact: None

Fiscal

Impact: None

Administrative

Recommendation: Approval

Contact

Person(s): Chief Human Resources Officer, Julie King, (920) 852-5302

BOE: April 14, 2025

Appleton Area School District

Board of Education Meeting (Monday, March 31, 2025)

Generated by Kayla Malott on Tuesday, April 1, 2025

The meeting was called to order at 6:00 PM by Treasurer Edward Ruffolo at the Scullen Leadership Center, 131 E. Washington Street, Suite 1A, Appleton, Wisconsin.

1. Meeting Opening

A. Roll Call

Members Present: Kristine Sauter (Virtually), Edward Ruffolo, James Bacon, Pheng Thao, Jason Kolpack, Nick Ross

Members Absent: Kay Eggert

B. Pledge of Allegiance

The Pledge of Allegiance was recited by all.

2. Approval of Agenda (GC-2: Governing Commitments)

A. Board Member Request to Remove Consent Agenda Item(s) for Separate Consideration

None

B. Approval of Agenda

Motion to approve the Board Agenda as presented.

Motion by Pheng Thao, seconded by James Bacon.

Final Resolution: Motion Carried

Aye: Kristine Sauter, Edward Ruffolo, James Bacon, Pheng Thao, Jason Kolpack, Nick Ross

3. Special Presentation

A. Student School Board Representative Report

Student School Board Representative, Olivia Feng, gave an update on events and activities at Appleton North High School.

4. Public Input (GC-3.3: Initiate and maintain effective communication with the citizens.)

A. Public Input

The following individual addressed the Board of Education during Public Input:

1. Oliver Zornow (Appleton, WI)- Public Education funding

5. Board Development (GC-2.2: The Board will assure that its members are provided with training and professional support necessary to govern effectively.)

A. None

6. Information for Board Decision Preparation (OE-8.4: Assure that the Board has adequate information from a variety of internal and external viewpoints to assure informed Board decisions.)

A. Business Services Update(s):

None

B. School/Student Services Update(s):

None

C. Personnel Services Update(s): Professional Educator New Hire(s), Contract Change(s), Rescinding of Retirement, and Resignation(s)

Chief Human Resources Officer Julie King presented the Personnel Services items for consideration.

=====

7. Board's Consent Agenda (GC-2.4: The Board will use a consent agenda as a means to expedite the disposition of routine matters and dispose of other items of business it chooses not to discuss.)

Motion to approve the Board's Consent Agenda as presented.

Consent Items Approved:

- A. Board Meeting Minutes from March 10, 2025
- B. Expulsion Meeting Minutes from March 10, 2025
- C. Expulsion Meeting Minutes from March 18, 2025

Motion by James Bacon, seconded by Kristine Sauter.

Final Resolution: Motion Carried

Aye: Kristine Sauter, Edward Ruffolo, James Bacon, Pheng Thao, Jason Kolpack, Nick Ross

=====

8. Superintendent's Consent Agenda (OE-8.10: Provide for the Board adequate information about all administrative actions and decisions that are delegated to the Superintendent but required by law to be approved by the Board.)

Motion to approve the Superintendent's Consent Agenda as presented.

Consent Items Approved:

- A. Professional Educator New Hire(s)
- B. Professional Educator Contract Change(s)
- C. Professional Educator Rescinding of Retirement
- D. Professional Educator Resignation(s)

Motion by Jason Kolpack, seconded by James Bacon.

Final Resolution: Motion Carried

Aye: Kristine Sauter, Edward Ruffolo, James Bacon, Pheng Thao, Jason Kolpack, Nick Ross

=====

9. Reports (OE-8.2: Provide for the Board, in a timely manner, information about trends, facts and other information relevant to the Board's work.)

A. Business Services Report:

None

B. School/Student Services Report: Columbus/Edison Transition Update

Assistant Superintendent Nan Bunnaw, presented the Columbus/Edison Transition updates.

C. Personnel Services Report:

None

=====

10. Board Business

A. Updates: OE-12 Facilities

Executive Director of Operations, Ray Przekurat, and Director of Facilities, Joe Sargent, presented the updates from OE-12 Facilities.

B. Resolution Awarding the Sale of \$25,000,000 G.O. Promissory Notes, Series 2025

Motion to approve the Resolution Awarding the Sale of \$25,000,000 G.O. Promissory Notes, Series 2025, as presented.

Motion by Nick Ross, seconded by Jason Kolpack.

Final Resolution: Motion Carried

Aye: Kristine Sauter, Edward Ruffolo, James Bacon, Pheng Thao, Jason Kolpack, Nick Ross

C. Policy Update: Policy 151- Adoption, Revision, Maintenance & Dissemination of Board Policies (Board Policy Development)

Motion to approve Policy Update: Policy 151- Adoption, Revision, Maintenance & Dissemination of Board Policies (Board Policy Development) as presented.

Motion by Pheng Thao, seconded by James Bacon.

Aye: Kristine Sauter, Edward Ruffolo, James Bacon, Pheng Thao, Jason Kolpack, Nick Ross

D. Policy Update: Policy 154- School Board Advocacy

Motion to approve Policy Update: Policy 154- School Board Advocacy as presented.

Motion by Pheng Thao, seconded by Kristine Sauter.

Final Resolution: Motion Carried

Aye: Kristine Sauter, Edward Ruffolo, James Bacon, Pheng Thao, Jason Kolpack, Nick Ross

E. Monitoring Report: OE-7 Asset Protection

Motion to approve the Monitoring Report: OE-7 Asset Protection as presented.

Motion by Jason Kolpack, seconded by Edward Ruffolo.

Final Resolution: Motion Carried

Aye: Kristine Sauter, Edward Ruffolo, James Bacon, Pheng Thao, Jason Kolpack, Nick Ross

F. Consent Agenda Item(s) Removed for Separate Consideration

None

=====

11. Items of Information

A. BoardDocs transition to Granicus Peak

We are currently in the process of transitioning to a new system for managing Board meetings. This will be our final meeting utilizing the BoardDocs system. Beginning tomorrow, April 1, 2025, we will launch a new platform called Granicus Peak, that will be accessible through our district website, under Board of Education. This system will provide a streamlined experience where you can view live meeting videos, access future agendas, and review meeting minutes—all in one location.

=====

12. Future Meetings

- A. Board of Canvassing: Monday, April 7, 2025, 11:00 AM
- B. Board Work Session: Monday, April 14, 2025, 4:00 PM
- C. Board Meeting: Monday, April 14, 2025, 6:00 PM
- D. Board Work Session: Wednesday, April 23, 2025, 7:30 AM

=====

13. Adjourn

A. Motion to Adjourn the Meeting

Motion to adjourn the meeting at 7:11 PM.

Motion by Nick Ross, seconded by James Bacon.

Final Resolution: Motion Carried

Aye: Kristine Sauter, Edward Ruffolo, James Bacon, Pheng Thao, Jason Kolpack, Nick Ross

=====

Board President Signature: _____



ITEM FOR CONSIDERATION

Topic: Professional Educator New Hire(s)

Background Information: The Professional Educator listed below is recommended for a contractual position for the 2024-2025 school year, effective April 7, 2025:

<u>Name</u>	<u>Position</u>	<u>Location</u>	<u>FTE</u>
Abigale J. Penkala	Special Ed-Cross Cat	Einstein	100%

The Professional Educators listed below are recommended for contractual positions for the 2025-2026 school year (effective August 25, 2025):

<u>Name</u>	<u>Position</u>	<u>Location</u>	<u>FTE</u>
Molly A. Conrad	Art	TBD	30%
Hannah N. Gutierrez Ibarra	English Learner	East/West	100%
Mailee Harkey	4K	HAIS	100%
Caylee A. Howe	Grade 5	Edison	100%
Brynn E. Howitt	Physical Ed/Health	North	100%
Bryant M. Peltier	Grade 3/4	HAIS	100%
Chloe L. Sawall	Music-Choral/General	Wilson	100%
Kailee A. Terracina	Speech & Language	TBD	100%

Instructional Impact: The candidates listed above are recommended by the administrator to whom they will report as the best candidates for the position.

Fiscal Impact: Salary will be commensurate with education and experience.

Administrative Recommendation: Approval

Contact Person(s): Chief Human Resources Officer, Julie King, (920) 852-5302

BOE: April 14, 2025



ITEM FOR CONSIDERATION

Topic: Professional Educator Contracts (2025-2026 School Year)

**Background
Information:**

The Professional Educators listed below were previously omitted from the original contract list for the 2025-2026 school year, which was presented to the Board of Education on Monday, March 10, 2025. The following professional educators are recommended for contractual positions and will provide for the continued education of the student population for the 2025-2026 school year (effective August 25, 2025):

<u>Name</u>	<u>Position</u>	<u>Location</u>	<u>FTE</u>
Elizabeth W. Elrod	Special Ed-Cross Cat	Franklin	100%
Jennifer T. Gresh	Special Ed-Cross Cat	Huntley	100%
Joel D. Hallstrom	Special Ed-Cross Cat	East	100%
Sean M. Sloan	Special Ed-Cross Cat	Johnston	100%

Administrative

Recommendation: Approval

Contact

Person(s): Chief Human Resources Officer, Julie King, (920) 852-5302

BOE: April 14, 2025



ITEM FOR CONSIDERATION

Topic: Professional Educator Contract Change(s)

**Background
Information:**

The following contract changes are recommended for the 2024-2025 School Year (effective March 31 – June 6, 2025):

<u>Name</u>	<u>Position</u>	<u>Location</u>	<u>FTE</u>
Elizabeth A.R. Beckman	Music	KA	100% to 108%
Melanie A. Malm	Art	KA	108% to 116%

The following contract changes are recommended for the 2025-2026 School Year (effective August 25, 2025):

<u>Name</u>	<u>Position</u>	<u>Location</u>	<u>FTE</u>
Hayley C. Bold	Instructional Coach	ABS	75% to 50%
Caden P. DeBruin	Business/Marketing	East	90% to 100%
Kristen J. Hedberg	World Lang.-French	KA	83% to 92%
Nicole M. Severing	World Lang.-Spanish	KA	100% to 92%
Margie G. Westmoreland	Business Education	North	60% to 80%

**Instructional
Impact:**

These assignment adjustments will meet student needs.

**Fiscal
Note:**

As indicated above.

Administrative

Recommendation: Approval

Contact

Person(s): Chief Human Resources Officer, Julie King, (920) 852-5302

BOE: April 14, 2025



ITEM FOR CONSIDERATION

Topic: Professional Educator Resignation(s)

**Background
Information:**

The following Professional Educators have submitted a letter of resignation effective at the end of the 2024-2025 school year:

Megan A. Geffers has been with the District for eight years, most recently as an English Language Arts/Social Studies Teacher at Kaleidoscope Academy.

Amanda L. Knapp has been with the District for three years, most recently as a Grade 2 Teacher at Houdini Elementary School.

Chelsea R. Lehman has been with the District for three years, most recently as a Special Education Teacher at Richmond Elementary School.

Madyson T. Pearson has been with the District for one semester, most recently as a Special Education Teacher at Wilson Middle School.

Leila A. Ramagopal Pertl has been with the District for a combined total of nine years, most recently as a Music Teacher at Edison Elementary School.

Megan K. Simenson has been with the District for two years, most recently as a Science Teacher at Wilson Middle School.

Emma C. Skiff has been with the District for one year, most recently as an English Language Arts/Social Studies Teacher at Wilson Middle School.

Jeremy D. Sparks has been with the District for four years, most recently as a Social Studies Teacher at West High School.

Rachel L. Thurston has been with the District for three years, most recently as a Special Education Teacher at Badger Elementary School.

Amy E. Westphal has been with the District for four years, most recently as a Grade 5 Teacher at Johnston Elementary School.

The following Professional Educator was a recent hire and has submitted a letter of resignation prior to the August 25, 2025, start date:

Jeffry T. Lawrence – Special Education Cross-Categorical Teacher, located at Ferber Elementary School.

Instructional

Impact: Qualified replacements will be procured

Fiscal

Impact: Dependent upon replacements

Administrative

Recommendation: Approval

Contact

Person(s): Chief Human Resources Officer, Julie King, (920) 852-5302

BOE: April 14, 2025



ITEM FOR CONSIDERATION

Topic: Professional Educator Contract(s) - Preliminary Notice of Non-renewal(s)

**Background
Information:**

Wisconsin Statute §118.22 required teachers not receiving contracts for the upcoming school year to receive both a preliminary notice of non-renewal and a final notice of non-renewal by specific dates.

The Board of Education is required to provide teachers with written notice of renewal or non-renewal on or before May 15. Per Statute, at least 15 days prior to giving written notice of refusal to renew a teacher's contract for the ensuing school year, the employing board shall inform the teacher by preliminary notice in writing that the board is considering nonrenewal of the teacher's contract and that, if the teacher files a request therefore with the board within 5 days after receiving the preliminary notice, the teacher has the right to a private conference with the board prior to being given written notice of refusal to renew the teacher's contract.

Instructional

Impact: None

Fiscal

Impact: None

Administrative

Recommendation: Approval

Contact

Person(s): Chief Human Resources Officer, Julie King, (920) 852-5302

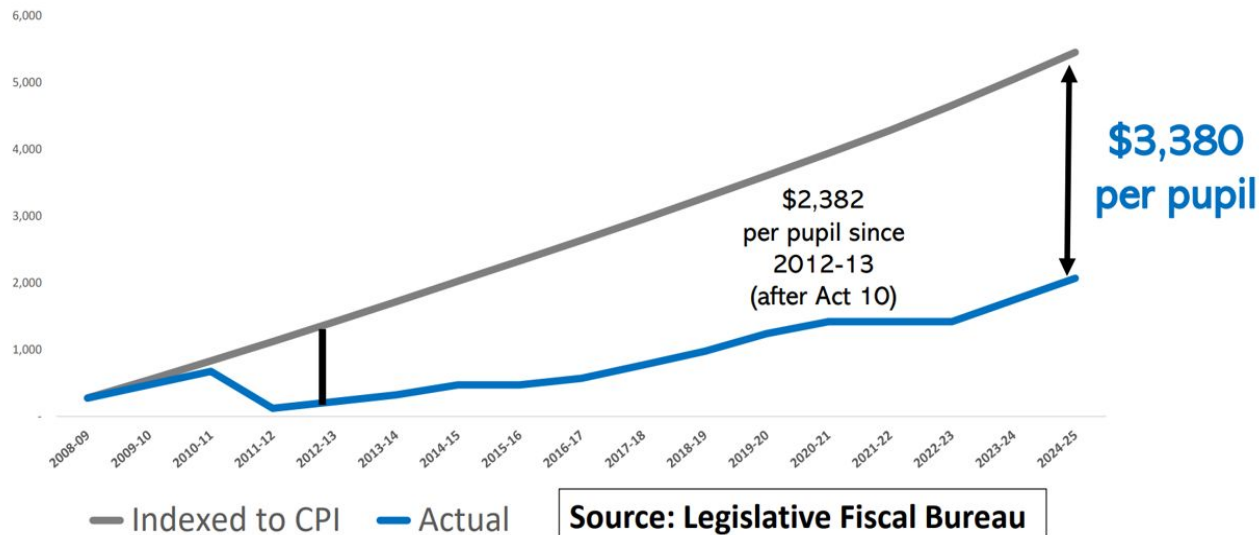
BOE: April 14, 2025

Current Financial Outlook

How did we get here?

Revenue Limit Imposed by the State

General school district revenues per pupil lag inflation by more than \$3,300 since 2009

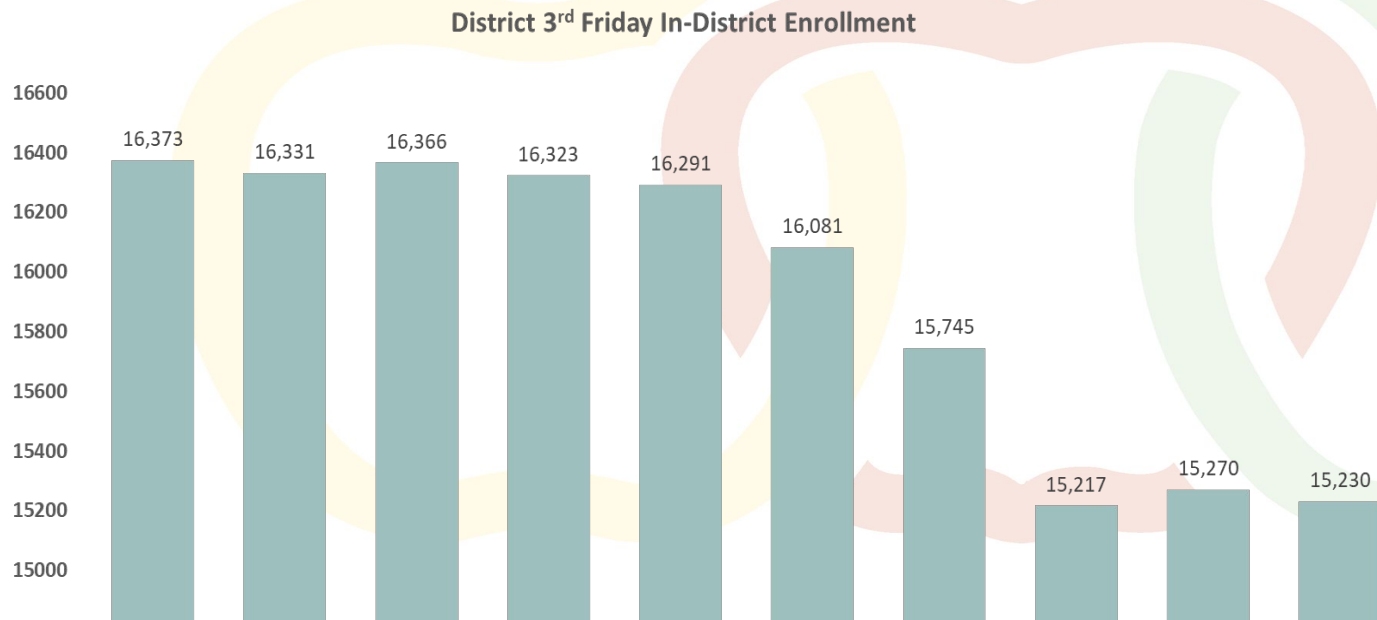


Difference = \$3,380 X 14,011 = \$47 million

43% of \$47 million = \$20 million additional tax levy

The additional \$20 million would add \$1.61 to our tax rate, or \$161 on \$100,000 of property

Enrollment Impact



Revenue Limit - CPI - Salaries

	2021-2022	2022-2023	2023-2024	2024-2025	Average
Revenue Increase	0%	0%	3.90%	2.75%	1.66%
CPI	1.23%	4.70%	8.00%	4.12%	4.51%
Salary Increase	3.30%	4.70%	6.47%	3.11%	4.31%
*Difference	\$3.3 million	\$4.7 million	\$2.6 million	\$400,000	\$2.64 million
**Cumulative		\$8.0 million	\$10.6 million	\$11.0 million	

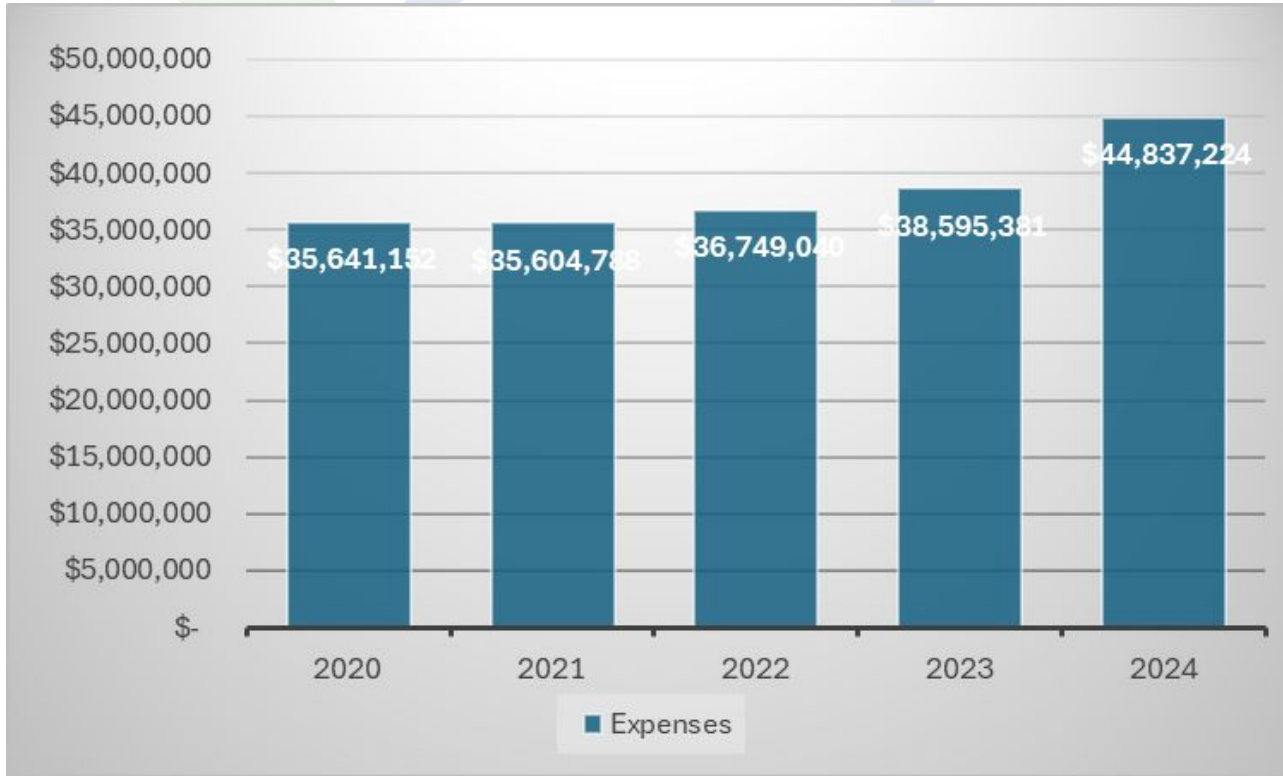
Operational Increases

In Past 5 Years: 2019-20 to 2023-24

Salaries	+ \$15.2million	15%
Health Plan	+ \$12.4million	50%
Contracted	+ \$ 7.8million	
• Transportation (+1.8)		50%
• Custodial (+1.4)		69%
• Software (as a service) (+2.9)		337%
• Special Ed/Mental Health Services (+1.7)		1517%
Other costs: Tech, security, utilities, insurance		



Special Education Costs



Voucher Impact

Year	Students
2015-2016	76
2016-2017	110
2017-2018	143
2018-2019	208
2019-2020	357
2020-2021	430
2021-2022	516
2022-2023	641
2023-2024	852
2024-2025	857

Attendance Update

CHRONIC ABSENTEEISM

Missing 10% or more of total school days, including both excused and unexcused absences. Missing 10% of eligible school days (18 days for the full school year).

2017-2018	2018-2019	2021-2022
12.2%	15.2%	33.9%

Summer of 2022- Meetings with Principals & Assistant Principals

When asked what are the three biggest challenges facing our district, attendance was a consistent answer



AASD Work Group Recommendations

MAINTAIN	ADAPT	NEW
Universal <ul style="list-style-type: none"> <input type="checkbox"/> Accurate attendance taking-improve fidelity <input type="checkbox"/> Classroom community opportunities to increase sense of belonging <input type="checkbox"/> Expectation clarity for students 	Universal <ul style="list-style-type: none"> <input type="checkbox"/> Student education on attendance <input type="checkbox"/> Revision of attendance letters by level <input type="checkbox"/> Universal messaging- importance of attendance <input type="checkbox"/> Consistent Implementation of Evidence Based Interventions (Secondary) 	Universal <ul style="list-style-type: none"> <input type="checkbox"/> Community campaign messaging <input type="checkbox"/> Student-led PR Campaign <input type="checkbox"/> Expectation clarity for parents/accountability <input type="checkbox"/> Training for staff on evidence-based practices (see recommendations) <input type="checkbox"/> Scheduling considerations for students (secondary)
Tier 2 <ul style="list-style-type: none"> <input type="checkbox"/> TRAC support <input type="checkbox"/> Evidence based interventions 	Tier 2 <ul style="list-style-type: none"> <input type="checkbox"/> Training of Evidence Based Interventions (See Recommendations) <input type="checkbox"/> Adopt a TRAC type support for elementary sites <input type="checkbox"/> Education plus requirement lesson for students (formerly called Civics Lesson) <input type="checkbox"/> Consistent training with special education staff to address attendance 	Tier 2 <ul style="list-style-type: none"> <input type="checkbox"/> Home visit training and support (elementary) <input type="checkbox"/> Parent education on school and community supports <input type="checkbox"/> Prevention work-EC-6 Level <input type="checkbox"/> Consider transportation bus changes <input type="checkbox"/> Increase incentive strategy plans for students
Tier 3 <ul style="list-style-type: none"> <input type="checkbox"/> County referral option but explore other options for non-attenders <input type="checkbox"/> Keep previously approved staffing for attendance 	Tier 3 <ul style="list-style-type: none"> <input type="checkbox"/> Alternative plans for non-attenders <input type="checkbox"/> Communication to all stakeholders on attendance plans for students <input type="checkbox"/> Consider appropriate FTE allocation at High School <input type="checkbox"/> Address attendance support by level (see recommendation) 	Tier 3 <ul style="list-style-type: none"> <input type="checkbox"/> Explore required education for parents <input type="checkbox"/> Explore additional tier 3 options with a partnership approach <input type="checkbox"/> Additional FTE to support early intervention for attendance

Current Support System for Students

Universal

- Implementation of best practices for belonging, connection & engagement
- Attendance is talked about & part of the school culture
- Accurate attendance taking practices
- Recognition of positive/improved attendance
- Attendance team meets at least every other week
- Family engagement, education and supports
- Attendance letters & other family communication (electronic 3 & 7 day letters are sent automatically)

Tier 3 Strategies & Supports

- Check & Connect
- School based mental health referral
- Alternative education support (high school)
- Alternative plans for non-attendance/school avoidance
- Brief Behavior Plan
- Home visits/intensive outreach
- County prevention referral (elementary)
- Community referral
- County truancy referral (ages 10-17)*

Tier 2 Strategies & Supports

- Attendance education lessons (elementary & middle)
- Walking school bus (elementary)
- Attendance letters (5 & 10 day letters as determined by the attendance team)
- Targeted intervention with Student Success Advisors and Coordinators, Youth Advocates
- Mentoring
- Check in/Check out
- Student success plans
- Home visits
- SAIG
- Attendance incentives
- TRAC referral (secondary)



CHRONIC ABSENTEEISM

Missing 10% or more of total school days, including both excused and unexcused absences. Missing 10% of eligible school days (18 days for the full school year).

2017-2018	2018-2019	2021-2022	2022-2023
12.2%	15.2%	33.9%	25.5%

Survey data from staff - Spring of 2022, 2023, 2024

- Sadness when student attendance impacts student success
- Request for more resources to support student attendance
- Frustration with inability to support students who are not in school



Outcomes for students who are not successful:

- The likelihood of a high school student who is living in poverty earning a living wage by age 30 increases from 21% to 58% with strong academic achievement (Paths of Opportunity, What it Will Take for All Young People to Thrive)
- A student who is chronically absent in one year out of the five years from 8th through 12th grade is seven times more likely to drop out of school. (AASA School Administrator)
- High school dropouts are nearly four times as likely to be receiving government assistance by age 27, more than three times as likely to have been arrested, and twice as likely to use illicit drugs (National Library of Medicine)
- 70% of adults in the prison system cannot read and write above the 4th-grade level (Correctional Education Association)
- As adults, we cannot allow teenagers to continually make decisions that will negatively impact their future



Assembled an Attendance Committee to develop actions that would address our attendance challenges:

- Included parents, staff, and community members
- Met from October 2023 through January 2024
- Prioritized the following actions
 - **City ordinance to include a citation as a last resort**
 - **Hire a second Attendance Coordinator**
 - **Improve relevance and engagement of curriculum**
 - **Increase transportation options**

CHRONIC ABSENTEEISM

Missing 10% or more of total school days, including both excused and unexcused absences. Missing 10% of eligible school days (18 days for the full school year).

2017-2018	2018-2019	2021-2022	2022-2023	2023-2024
12.2%	15.2%	33.9%	25.5%	23.7%

Timeline - Asking the City of Appleton for help

- Spring through fall of 2024 - Discussions with the City about an ordinance
- Presented at March 19th Common Council of the City
- Resolution submitted by Council member to pass an ordinance
- Resolution moved to the Safety and Licensing Committee

What are we asking for from the City of Appleton?

- ★ **An ordinance that would support student success**
- ★ **The ordinance would be used when our three-tiered system of support has not helped a student consistently attend school**
- ★ **The Common Council determines the dispositions that would be available to the court**
- ★ **Implemented during a 4-semester trial period, followed by a review of impact**

District-wide Attendance Data



CHRONIC ABSENTEEISM DATA

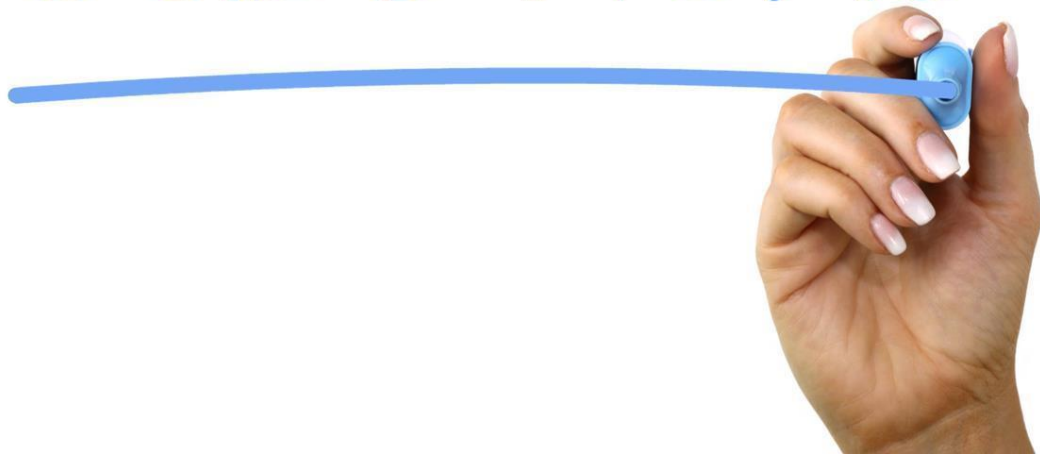
Missing 10% or more of total school days, including both excused and unexcused absences. Missing 10% of eligible school days (9+ days for Semester 1).

	2018-2019	2021-2022	2022-2023	2023-2024	2024-2025
4K/Elementary	8.6%	27.4%	14.0%	14.1%	13.8%
Middle	10.3%	25.1%	17.6%	19.4%	17.8%
High School	15.2%	33.9%	25.5%	23.7%	25.4%

**Because of the state-mandated school closures and rapid transition to virtual instruction during March of 2020 Chronic Attendance/ Habitual Truancy second semester attendance data is not comparable to other school year data.*

***Data from the 20-21 school year is also not comparable to other school year data due to the transition across our schools from virtual, to hybrid, to in-person learning.*

QUESTIONS





ITEM OF INFORMATION

Topic: Policy Update: 453.1- Emergency Nursing Services

**Background
Information:**

The Wisconsin Association of School Boards (WASB) was contracted to conduct a policy audit last year. Through the audit, policies were identified to be either created or revised. The policy work was delegated to administrators who oversee the respective area of the policy. These administrators utilized WASB-recommended sample policies and researched other districts or sought legal advice depending on the complexities of the policy.

As policies are created or revised, they will be Items of Information at Board of Education meetings for discussion and then be scheduled for a future meeting as an Item for Consideration.

Based on the WASB's updated policies, we are revising Policy 453.1 with the recommended language.

**Instructional
Impact:**

Accurate and current Board policies are critical to school operations, establishing a safe and welcoming school environment, and providing high-quality instruction for our students.

**Contact
Person(s):**

Executive Director of Student Services, Laura Jackson, 920-852-5317.
jacksonlarua@asds.k12.wi.us

[Emergency Nursing Services 453.1](#)

EMERGENCY NURSING SERVICES

~~The Appleton Area School District shall provide for student emergency nursing services in accordance with state law.~~

~~Emergency Nursing Services shall be under the direction of the Superintendent or District designee. The District shall employ professional registered nurses licensed in the State of Wisconsin for the purpose of developing, consulting and providing emergency nursing services.~~

~~The District shall have a physician licensed to practice in the State of Wisconsin to serve as the District's Medical Advisor per contract.~~

~~The Superintendent or District designee, in conjunction with the School Nurse, Medical Advisor, other district personnel and representatives from community health agencies, as designated by the School Board, shall assist in the annual review of policies, procedures, and first-aid standing orders/protocols pertaining to Emergency Nursing Services.~~

~~Emergency nursing services shall be available during the school day and during all school sponsored activities, including summer school, same day field trips, extended field trips, out of the country field trips and athletic events or school sponsored co-curricular activities.~~

~~Cross References: Medication Administration to Students, 453.4
Emergency Nursing Services and Routine Illness and Injury Care,
453.1 Rule~~

~~Legal References: Wisconsin State Statutes 118.29 and 121.02(1)(g)
Wisconsin Administrative Code PI 8.01(2)(8)~~

~~Adoption Date: June 8, 1992~~

~~Amended Date: November 10, 2014~~

EMERGENCY NURSING SERVICES

Procedures

~~Emergency nursing services includes response care to medical emergencies and illness and injury care. This includes policies, rules, protocols, and procedures (including training requirements), which are developed by a professional nurse registered in Wisconsin in cooperation with other District personnel, representatives from community health agencies, and the licensed physician who serves the District as Medical Advisor. The Medical Advisor is designated as a “school official” who has a legitimate educational interest in accessing pupil records (Policy 347) necessary for fulfilling responsibilities under this policy.~~

~~The Superintendent or District designee will:~~

- ~~1. Understand and ensure compliance with all federal and state laws related to school based nursing services and ensure staff is aware of confidentiality standards.~~
- ~~2. Ensure that the District has developed standing orders/protocols for the provision of injury and illness management in collaboration with the School Nurses and District Medical Advisor.~~
- ~~3. Ensure that the District has a student information system that collects emergency pupil information and parental approval for emergency medical care annually.~~
- ~~4. Ensure that the District has a record system, including accident reports and a record of services performed, including but not limited to:~~
 - ~~● Injury~~
 - ~~● Illness Management~~
 - ~~● Medication Administration~~
 - ~~● Health Procedures~~
- ~~5. Review and evaluate emergency nursing services annually in collaboration with the School Nurses and District Medical Advisor and submit to the Board.~~

~~The Building Administrator will:~~

- ~~1. In collaboration with the School Nurse, identify and assign individuals responsible to assist in providing emergency nursing services (medication~~

~~administration, health procedures, illness and injury care, etc.) for all school events.~~

- ~~2. Ensure that building emergency management team members are trained to handle emergencies according to District protocols for the school day and at all school-sponsored events.~~
- ~~3. Make available current student emergency information, appropriate equipment, supplies, and facilities for the provision of illness and injury care and emergency nursing services.~~
- ~~4. Identify and assign staff members to take inventory of supplies, medication inventory and expiration dates.~~

~~The Medical Advisor will:~~

- ~~1. Serve as a resource/consultant for student health concerns as well as communicable disease prevention, identification and control.~~
- ~~2. Facilitate communication between the District and local health care providers regarding individual students and the general operation of District health services.~~
- ~~3. Assist with the development of policies and procedures for emergency nursing services in consultation with School Nurses and the District Superintendent or designee as needed.~~
- ~~4. Review and consult with Superintendent or District designee regarding evidence-based first aid training and illness management for District staff.~~

~~In consultation with appropriate school personnel and outside agencies, the Medical Advisor will:~~

- ~~1. Assist with the yearly review of emergency nursing services, providing suggestions to improve quality, efficiency and safety.~~
- ~~2. Assist in developing sports medicine policies and procedures.~~
- ~~3. Review health appraisal screening guidelines in the school setting.~~
- ~~4. Review crisis management and pandemic mitigation plans.~~
- ~~5. Provide recommendations and consultation for training needs for staff.~~
- ~~6. Advise on safe handling and disposal precautions for prescription drugs.~~

~~The School Nurse will:~~

- ~~1. Assist with the development of policies and procedures for emergency nursing services in consultation with the District Medical Advisor and Superintendent or District designee as needed.~~
- ~~2. Assist with the annual review of emergency nursing services in collaboration with Superintendent or District designee.~~
- ~~3. Identify responsible individuals to assist in providing emergency nursing services based on established illness and injury management standing orders/protocols, medication administration and health procedures in collaboration with the Building Administrator.~~
- ~~4. Assist in the education, training and supervision of staff responsible for medication administration and student specific health care procedures. This includes any of the following:~~
 - ~~• Provide skills training, coordination, direction and inspection of the practice of staff performing medication administration and student specific health care procedures.~~
 - ~~• Document training provided and date of training.~~
 - ~~• Review medication errors to determine appropriate actions that may include revisions to policies and procedures.~~
- ~~5. Maintain required documentation for Medicaid billing.~~
- ~~6. Participate in the evaluation, development, review and update of student specific health plans, emergency action plans, 504 plans and IEPs. In collaboration with others, this process may include:~~
 - ~~• Completing an assessment to help determine the ability of the student to independently manage his/her chronic condition in the school environment.~~
 - ~~• Determining health interventions and school accommodations needed in the learning environment.~~
 - ~~• Participating in the evaluation of student progress for those with health related conditions.~~

~~Adoption Date: June 8, 1992~~

~~Amended Date: November 10, 2014~~

EMERGENCY NURSING SERVICES

Emergency nursing services for the Appleton Area School District are provided with input, direction, and coordination furnished by one or more registered nurses employed by the District. Emergency nursing services shall be available during the school day and during all school-sponsored activities for students, including summer school, field trips, athletic events, and other co-curricular and extracurricular activities.

To ensure the provision of an appropriate emergency nursing services program:

1. The Superintendent or Executive Director of Student Services shall have primary administrative responsibility for the District's emergency nursing services program, including ensuring that the District conducts an annual review of the emergency nursing program and that the findings and recommendations from the annual review are presented to the District Administrator and School Board.
2. The District shall designate the registered nurse(s) whose employment responsibilities include the nursing-related duties identified in this policy.
3. The Board shall act to approve the emergency nursing procedures that are developed (or revised) under the direction of a registered nurse pursuant to applicable law and this policy.
4. The District shall arrange for a physician to serve as the District's medical advisor for the emergency nursing services program and in connection with handling other significant student and school health concerns. The Superintendent or Executive Director of Student Services and the registered nurse(s) employed by the District shall be the primary point of contact with the District's medical advisor on an as-needed basis.
5. The District shall make available the equipment and supplies necessary for providing emergency nursing services in the District. A health room/area shall be designated in each school.
6. In consultation with the registered nurse(s) employed by the District, the Superintendent or Executive Director of Student Services or an administrative-level designee shall assign direct responsibilities to appropriate school personnel related to the provision of emergency and other health-related services. The building principal of each school shall designate staff who are assigned and trained to serve as site-based first responders in the event of a health-related emergency. As used in District policy, the term "site-based first

responder” is a local term that should not be equated with a “certified first responder” under state law.

In providing for the coordination and oversight of emergency nursing services, one or more registered nurses designated by the District shall:

1. Maintain and coordinate the day-to-day implementation of the District’s emergency nursing procedures, including protocols for the administration of medication to students, protocols for dealing with student injury and illness (e.g., first aid protocols and other emergency procedures), and related recordkeeping procedures. These procedures will be developed by a registered nurse in cooperation with the Superintendent or Executive Director of Student Services, and, on an as-needed basis, in consultation with the District’s medical advisor and/or representatives of the county health department or other community health agencies.
2. Disseminate the District’s current emergency nursing procedures and protocols to appropriate school personnel.
3. Provide or arrange for the provision of training of designated school district staff in regard to the District’s medical emergency protocols (e.g., general first aid, cardiopulmonary resuscitation (CPR), the use of an automated external defibrillator (AED), and the administration of medication to students. As needed, the nurse shall also provide or arrange for the training of school personnel related to the District’s provision of specialized health-related services to individual students.
4. Provide any necessary nursing-related supervision in connection with any specialized health-related services that the District provides to individual students with special health care needs.
5. Monitor and make recommendations to the administration regarding the equipment, supplies, and space needed for the appropriate provision of emergency care and other health-related services.

Closely related to the responsibilities identified above, the registered nurse(s) employed by the District shall also:

1. Assist in identifying and arranging for any necessary services and accommodations for students within the District who have medical or health concerns that may require a health plan, Section 504 plan, or individualized education program (IEP).
2. Serve as a resource person for administrators and school personnel on student and school health issues, and the District’s provision of instruction to students regarding personal health and life-saving skills.

3. Serve as a liaison between the schools and community-based health agencies and services.

Cross References: Administration of Drug Products/Medications to Students, 453.4

Legal References: Wisconsin Statutes 118.076, 118.125, 118.29, 118.291, 118.2925, 118.293, 118.2935, 121.02(1)(g)t], 146.81 to 146.84, 440.01(1)(ad), 895.48

Wisconsin Administrative Code, Chapter N 6, PI 8.01(2)(g), SPS 332.50

Federal Laws

29 Code of Federal Regulations (CFR), Part 1910 - Subpart Z

Adoption Date: June 8, 1992

Amended Date: November 10, 2014, [April 28, 2025](#)

A. Student Emergency Information

1. An emergency information form must be completed for each student upon his/her initial enrollment or attendance in school or his/her participation in any District-sponsored athletic activity for students. The form shall be completed regardless of the student's full-time status, enrollment status, or residency. At least annually, each school shall request that the student's parent or guardian provide any updates to the emergency information that is presently on file. The student's emergency information shall also be updated any time during the school year that a parent or guardian submits a change. The form shall include:
 - a. Emergency contact names and information in the event of an accident, injury, illness, or other emergency.
 - b. Information about any special health concerns or procedures relevant to the student.
2. Upon receipt of a new or amended emergency information form provided by a parent or guardian, the Building Principal or designee shall ensure that the information is reviewed by an appropriate staff member or other representative of the school to determine whether the District may need to follow up with a further response or inquiry. A registered nurse serving the District shall be consulted as necessary in connection with the review of emergency information forms.
3. Emergency health information shall be kept in the relevant school office and shall be shared with school personnel and other school officials as deemed appropriate and necessary, consistent with legal requirements and with the District's student records policy and procedures.
4. When students are involved in school-sponsored activities away from school, student emergency information will be made available in order to enable activity supervisors to appropriately address any individualized health concerns or possible emergency situations. It is the joint responsibility of the Building Principal or designee and the staff who are planning/supervising the activity to ensure that this information is readily available.

B. Health/Medical Plans

1. The District develops health/medical plans for students on an as-needed basis and in a manner consistent with applicable law. In appropriate cases, individualized planning will occur in connection with the development of a Section 504 plan or individualized education program (IEP).

2. In most cases, a team-based approach will be used to develop any individualized plan, including consideration of relevant medical information and recommendations. A registered nurse serving the schools will generally be involved in the process of establishing and monitoring any such plan.
3. As needed, a nurse serving the school will provide nursing-related supervision, including but not limited to providing or arranging for appropriate training of designated school personnel, in situations where a student's plan calls for the District to provide specialized health services.

C. Planning for Possible Medical Emergencies in Connection with Activities Held Away from School

1. When students will be participating in a District-sponsored activity that is being held away from school, activity organizers/supervisors are expected to engage in both general and student-specific planning for possible emergency care needs. General planning may involve tasks such as identifying unusual activity-specific risks (e.g., unusually hazardous areas, increased opportunities for student exposure to likely allergens, unusual physical demands), assessing the availability of medical and emergency services/facilities near the activity location(s), verifying that activity supervisors will have access to students' emergency information, and informing accompanying school personnel and volunteers about what to do in case of a medical or health-related emergency. Student-specific planning involves an assessment of needs related to any special health concerns of the individual students who will be participating in the activity.
2. The extent of emergency care planning for such away-from-school activities should generally be proportionate to the uniqueness of the location and type of activity. For example, general emergency planning can often be less extensive in connection with recurring activities (e.g., away contests for students participating in athletics) when participating staff, students, and students' parents and guardians can be expected to be reasonably familiar with the nature and location(s) of the activity.
3. Activity organizers/supervisors shall consult with the building principal and a registered nurse serving the District on an as-needed basis to assist with emergency care planning for such away-from-school activities.

D. Emergency Equipment and Supplies

1. First aid supplies and equipment will be available and in accessible locations within each school building.
2. A copy of the District's first aid procedures/protocols will be maintained within each school building.

3. Mobile first aid kits shall be available for field trips and similar away-from-school activities involving students.
4. Each building principal shall assign a staff member(s) to maintain a regular inventory of the first aid supplies/equipment and to notify the principal or his/her designee when additional supplies/equipment are needed.
5. A copy of the [Wisconsin Childhood Communicable Diseases Chart](#) from the Wisconsin Department of Health Services shall be maintained in each school's primary student health room/area.
6. An automated external defibrillator (AED) will be available in each school building in the District. The AED shall be used and maintained in accordance with legal requirements, the manufacturer's specifications, and established District procedures.

E. Designation and Training of Emergency Care Providers

1. The Superintendent, Executive Director of Student Services, or building principal, in consultation with a registered nurse serving the school, shall:
 - a. Designate an appropriate number of staff members, by building, to serve as site-based first responders in case of a medical/health care emergency occurring in the school. A minimum of two staff members per school building shall be designated as site-based first responders.
 - b. Designate any staff members who, in addition to the site-based first responders, will receive role-appropriate training and be available to implement relevant emergency care procedures in connection with school-sponsored activities that take place off school premises or outside of the normal school day, such as field trips, athletic events, and other co-curricular and extracurricular activities.
2. The building principal, in consultation with a registered nurse serving the school, shall also monitor each school's implementation of a role-specific training schedule for the individuals who have been designated to implement elements of the District's emergency care procedures.
3. All individuals designated as site-based first responders shall receive broad training related to the District's emergency care procedures, including training in at least the following areas:
 - a. the District's general first aid protocols (e.g., student injury/illness response protocols);
 - b. cardiopulmonary resuscitation (CPR);
 - c. the use of an automated external defibrillator (AED);

- d. the District's policies and procedures concerning the administration of medication to students; and,
 - e. the District's bloodborne pathogens/exposure control plan
4. A registered nurse serving the schools shall provide, or assist in arranging for the provision of, first aid training and such other role-appropriate training for designated emergency care providers as may be required by law and/or under District policies/procedures.
 5. The Executive Director of Student Services or a designee shall maintain records of who has been trained, the specific training provided, and the date of the training.

F. General Emergency Care Procedures

In case of an accidental injury or illness occurring on school premises or during a school-sponsored activity, these general procedures shall be followed:

1. Serious Injury/Accident or Illness

- a. Designated school personnel (site-based first responders whenever available) shall assess the situation and administer basic first aid as needed to:
 - restore and maintain an open airway,
 - restore and maintain breathing,
 - promote adequate circulation, and/or
 - stop severe bleeding

As soon as it is determined to be necessary/appropriate, a call should be placed to 911 to summon professional emergency medical assistance (ambulance, rescue squad, etc.).

If a healthcare professional (e.g., a registered nurse or physician) or any professional emergency medical assistance personnel are present at the location of an incident, he/she should be immediately summoned to the scene or contacted for consultation if practical.

- b. No internal or external medication should be administered to the individual unless specifically prescribed or specifically authorized under the conditions outlined in state law and in the District's medication administration procedures.
- c. If the emergency situation involves a student, the student's parent(s) or guardian(s) shall be contacted as soon as reasonably practical under the

circumstances. If the parent or guardian cannot be reached, the emergency contact(s) as identified on the student's emergency information on file with the District shall be called. A responsible adult should remain with the student until the parent(s) or guardian(s) assumes responsibility if possible.

- d. The building principal or designee shall be informed immediately if the accident, injury, or illness occurs during the school day. If the accident, injury, or illness occurs outside of the school day or at an activity off school premises, the building principal or designee shall be informed as soon as possible, but no later than the next school day.

2. Minor Accidents/Injuries/Illness

- a. Designated school personnel (i.e., on-site nurses, health assistants, or other designated site-based first responders, whenever available) will provide the appropriate intervention/response to any minor injury or illness occurring on school premises or during a school-sponsored activity as deemed necessary for the situation.
- b. If a student becomes ill during the school day, school personnel should send him/her to the designated room in the building to rest or for attention. Office personnel will provide care for the student and/or contact parent or guardian to determine whether the student needs to be sent home. If the parent or guardian is unavailable, the emergency contact person identified on the student's emergency information will be notified. In making a determination whether to send a student home from school, school personnel shall consider protocols outlined in the District's emergency services and communicable disease management procedures. If it is determined the student is to be sent home, arrangements will be made for the student to leave the school premises. If all contact attempts fail and the student's parent or guardian or emergency contact person are not available, continued attempts will be made to reach the parent or guardian or emergency contact person.

G. Accident Reporting and Recordkeeping

1. The person(s) administering emergency care or assistance under these procedures is responsible for ensuring that the first aid or other emergency care administered in relation to accidents, injuries, or illnesses are properly documented.
2. The relevant class/activity supervisor(s) and the school employee(s) who assumed primary responsibility for responding to a specific accident/incident have joint responsibility for ensuring that they promptly notify the building principal and complete a written Accident/Injury Report according to

procedures outlined on Student Non-Employee Incident Report narrative instructions.

H. Annual Review of Emergency Nursing Services

The District shall conduct an annual review of the District's emergency nursing services program and related policies/procedures, including medication administration policies/procedures, at the end of each school year.

1. The findings of the review shall include the identification of any recommended changes to the program that would improve quality, efficiency, or safety. The administration shall ensure that any new or substantive revisions to first aid, injury, illness, or medication administration protocols are reviewed and approved by a registered nurse serving the District prior to being presented for adoption by the School Board.
2. The Board shall normally be informed of the findings of the annual review of the District's emergency nursing services program, related policies/procedures, and any recommended changes at a regular school board meeting.

Adoption Date: June 8, 1992

Amended Date: November 10, 2014, April 28, 2025



ITEM OF INFORMATION

Topic: Policy Update: 453.3- Communicable Disease

**Background
Information:**

The Wisconsin Association of School Boards (WASB) was contracted to conduct a policy audit last year. Through the audit, policies were identified to be either created or revised. The policy work was delegated to administrators who oversee the respective area of the policy. These administrators utilized WASB-recommended sample policies and researched other districts or sought legal advice depending on the complexities of the policy.

As policies are created or revised, they will be Items of Information at Board of Education meetings for discussion and then be scheduled for a future meeting as an Item for Consideration.

Based on the WASB's updated policies, we are revising Policy 453.3 with the recommended language.

**Instructional
Impact:**

Accurate and current Board policies are critical to school operations, establishing a safe and welcoming school environment, and providing high-quality instruction for our students.

**Contact
Person(s):**

Executive Director of Student Services, Laura Jackson,
920-852-5317. jacksonlaura@aad.k12.wi.us

[Communicable Disease Policy 453.3](#)

COMMUNICABLE DISEASES

~~The Appleton Area School District adheres to health policies and disease control procedures for the purpose of protecting the health and safety of all students and employees. These procedures will be maintained in cooperation with city, county, and state health departments and in accordance with Wisconsin State Statutes. When a reportable communicable disease is known or suspected within the school environment, the District will contact the appropriate health department.~~

~~The goal of this policy is to minimize disruptions to teaching and learning caused by illness and disease. If students with communicable diseases are excluded from school for a significant period of time, they may be provided alternative educational services.~~

Student Nondiscrimination

~~The Appleton Area School District does not discriminate against students on the basis of sex, race, color, religion, national origin, ancestry, creed, pregnancy, marital or parental status, sexual orientation, or physical, mental emotional or learning disability or handicap in its education programs or activities. Discrimination complaints shall be processed in accordance with established procedures.~~

~~**Adoption Date: September 14, 1987**~~

~~**Amended Date: November 8, 1999 and August 27, 2012**~~

COMMUNICABLE DISEASES

Procedures

Reporting

~~The school nurse, building principal, or his/her designee will notify the appropriate health department within the appropriate timelines when it is known or suspected that a student or employee may have a communicable disease as identified by the Department of Health and Family Services.~~

Resources

~~The school nurse serves as a resource for current information regarding communicable diseases. The AASD will provide yearly information to employees relative to universal precautions and blood borne pathogens. Guidelines and protocols for blood and body fluid exposure are located on the AASD website in the Exposure Control Plan (see: Departments/ Facilities and Operations/Safety Programs/training).~~

Supplies

~~Supplies and equipment appropriate to reducing the risk of transmission of communicable diseases are provided at each school.~~

Liaison

~~The District administrator or designee, principal and school nurse function as the District's liaison with students, employees, parents, physicians, public health officials, and the community at large concerning communicable disease issues in the school.~~

Exclusion

~~Students or employees suspected of having a communicable disease may be sent home by the building principal or his/her designee or school nurse until diagnosis and/or adequate treatment has occurred. Students or employees may also be excluded for other health conditions that may impair an individual's ability to perform or may affect the health or well being of the student or other individuals.~~

Confidentiality

~~Only information needed for the purpose of investigation, control or prevention of reportable communicable diseases shall be reported to appropriate health agencies. Information and subsequent reporting regarding Hepatitis and HIV will be the responsibility of the physician completing such an evaluation. Any part of a student health care record or employee (personnel) record that concerns the results of a test for the presence of HIV or antibody to HIV (the virus which causes acquired immune deficiency syndrome — AIDS) shall be confidential and may be disclosed only with the informed written consent of the test subject.~~

~~All information shall be kept in strict confidence in accordance with State and Federal laws and regulations.~~

~~Legal References:~~ ~~Wisconsin State Statutes~~

~~118.125(2m)(b) Confidentiality of Pupil Physical Health
Records
118.13 Pupil Discrimination Prohibited
252.01 Definitions Communicable Diseases
252.05 Reports of Cases
252.15 Restrictions on Use of a Test for HIV
252.19 Communicable Diseases; Suspected Cases;
Protection of Public
252.21 Communicable Diseases; Schools; Duties of
Teachers; Parents; Officers~~

~~Wisconsin Administrative Code HFS 145 Control of
Communicable Diseases (see attached)~~

~~Cross References:~~ ~~Student Records, 347~~

~~Head Lice/Nits In the School (Pediculosis), 453.31
Student Bloodborne Pathogen Exposure Control Plan, 453.33
Acquired Immunodeficiency Syndrome/HIV Virus, 453.34
Employee Bloodborne Pathogens Exposure Control Plan, 526~~

~~Adoption Date: September 14, 1987~~

~~Amended Date: November 8, 1999 and August 27, 2012~~

Appendix A

ILLNESS/COMMUNICABLE DISEASE

~~In order to promote a healthy environment at school for your children, we ask that you be particularly alert to the beginning signs of illness in your child. Keeping your child home during an illness until recovered will help prevent spread of illness to others in the school. The following symptoms may indicate the presence of communicable disease:~~

~~Thick mucus from the nose~~ — ~~Persistent, productive cough~~ — ~~Elevated temperature associated with~~
~~Diarrhea~~ — ~~Nausea or vomiting~~ — ~~Skin infection~~
~~Discharge from eyes or ears~~ — ~~Red eyes~~ — ~~Excessive drowsiness~~
~~Sore throat~~ — ~~Earache~~ — ~~Persistent abdominal discomfort~~
~~Any rash that is not normal for your child~~ — ~~other symptoms~~

~~If your child has any of these symptoms at school, you may be contacted, and if so will be expected to make arrangements to pick your child up from school as soon as possible.~~

~~If your child is absent from school, please call the school to notify staff if it is due to illness or other reasons. If your child's absence is prolonged due to illness, we ask that a doctor's note explaining the illness and authorizing the return to school accompany your child upon return to school.~~

~~We must have consent forms signed by parent/guardian and doctor if medication is required during school hours. Please call the school office to obtain these forms and further information on the school medication policy.~~

~~It is also very important to have current emergency information for children at school. We must have a working number to contact you and also a number for a responsible relative or friend in case you are not available. **Remember to notify us if there are any changes in the phone numbers.**~~

~~To assist us in providing the best possible care for your child at school, please keep us informed of any changes in your child's health status, including medication changes, allergies, etc. We would be happy to discuss any concerns you may have about your child's health. Please feel free to contact us at school.~~

COMMUNICABLE DISEASE CONTROL

Appleton Area School District (AASD) shall cooperate with state and local public health officials in establishing and maintaining appropriate health standards for the school environment, promoting the good health of students and staff, and educating students and staff in disease prevention methods and sound health practices. The administration shall ensure that AASD has written procedures that document requirements for reporting communicable disease information to public health agencies. AASD schools, other district facilities, or work locations may be closed for public health reasons by order of a public health officer, agency, or as determined to be necessary by the district administrator.

In an effort to maintain a safe and healthful school environment, AASD shall provide information to students and staff regarding measures that can be taken to reduce the risk of contracting or transmitting communicable diseases at school and during school-related activities. AASD employees with occupational exposure to blood or other potentially infectious agents or materials, as well as any other employees who may be designated by the administration, shall receive specific training regarding the AASD's Exposure Control Plan and will be expected to comply with the precautions and procedures identified in the plan and in the related training.

AASD students and employees may be excluded from school or the workplace (including school-related activities) if they are suspected of or diagnosed as having a communicable disease, including any disease expressly defined or identified as communicable by a public health agency, that poses a significant health risk to others or that renders them unable to adequately perform their jobs or pursue their studies. In some situations, exposure to or close contact with a source of a communicable disease may be sufficient to result in a temporary exclusion. Except as otherwise necessary to comply with a specific public health order or directive, such decisions will normally be made on an individualized basis and in consultation as needed with appropriate health care professionals, public health officials, and/or with reference to applicable public health standards. Students and employees excluded from school pursuant to this policy may appeal their exclusion as set forth in the administrative procedures implementing this policy.

AASD recognizes that an individual's health status implicates a variety of privacy interests. Therefore, AASD shall handle information regarding students and employees with suspected or confirmed communicable diseases in accordance with state and federal laws and board policies governing the confidentiality of student and staff health and medical records.

In connection with communicable disease management and with the purpose of mitigating any known and significant health risk, the District Administrator, or their

administrative-level designee, is further authorized to exercise authority on behalf of the board regarding conditions or directives under which persons other than students and employees may be present at, or temporarily excluded from, AASD property or AASD-sponsored events or activities. Such other persons include, as examples, contractors, employees of contracted services, authorized volunteers, parents, and other visitors. Administrative directives and decisions affecting such persons that are related to communicable disease management shall be consistent with any directly applicable policies or directives established by the board and shall otherwise consider the potential relevance of the rules and standards that AASD applies to students and employees as well as such other information as may be reasonably available under the circumstances (e.g., applicable public health standards and/or information obtained from appropriate health care professionals or public health officials).

Cross References: Student Records, 347
Head Lice/Nits In the School (Pediculosis), 453.31
Student Bloodborne Pathogen Exposure Control Plan, 453.33

Legal References: Wisconsin Statutes Section 103.15, 111.31, 115.01(10), 118.01(2)(d)2., 118.07(3), 118.125, 118.13, 118.15(3)(a), 118.195, 120.13(35), 121.02(1)(i), 146.81 – 146.83, 252.04, 252.15, 252.19, 252.21
Wisconsin Administrative Code DHS 144, 145, 145-Appendix A PI 8.01(2)(g) SPS 332.50

Federal Laws 29 C.F.R. 1910.1030 29 U.S.C. §794 et seq.[Section 504 of the Rehabilitation Act of 1973, as amended, prohibiting discrimination based on a qualifying disability; implementing regulations at 34 C.F.R. Part 104 and 28 C.F.R. Part 42, Subpart G] 42 U.S.C. §12111 et seq.[The Americans with Disabilities Act, Title I, as amended, prohibiting employment discrimination based on a qualifying disability; implementing regulations at 29 C.F.R. Part 1602 and Part 1630] 42 U.S.C. §12131 et seq.[The Americans with Disabilities Act, Title II, as amended, nondiscrimination based on disability by state and local governments; implementing regulations at 28 C.F.R. Part 35]

Adoption Date: April 28, 2025

COMMUNICABLE DISEASE CONTROL

A. Educational and Preventive Measures

1. The District, under the primary administrative responsibility and direction of the Executive Director of Student Services, will ensure that it obtains and appropriately retains records of all immunizations (or a related waiver) and health examinations/tests (e.g., tuberculin screening or test results) required of students and staff by law and Board policy.
 - a. The District Lead Nurse shall periodically review the District's student immunization procedures and evaluate school-level compliance with relevant state statutes (including Chapter 252) and regulations (including Chapter DHS 144).
 - b. The human resources department shall have primary responsibility for ensuring that District employees complete all required physical examinations (including tuberculin screening or testing, as applicable).
2. The school nurse shall post or verify the posting of the Department of Health Services' Wisconsin Childhood Communicable Diseases Chart at each school in at least the nurse/health office or other primary station/area that is designated for student health services. The chart is a non-comprehensive reference and general guide for school staff that includes information on selected diseases, including signs and symptoms, incubation periods, periods of communicability, modes of transmission, and control measures/public health responses.
3. First aid kits and other supplies and equipment appropriate for reducing the risk of transmission of communicable diseases in the school environment, as determined in consultation with public health officials and/or a health care professional serving the District, will be provided in each school building.
4. Information regarding suppression and control of communicable diseases will be included as a regular part of the District's health curriculum for students.
5. The district shall ensure that student handbooks or other school-to-home communications inform parents and guardians of general expectations and standards for keeping students who are sick, or who are known or believed to be at risk of carrying or spreading a communicable disease, home from school (including avoiding in-person participation in school activities).

6. The District shall ensure that parents and guardians of students in the 7th grade receive information about meningococcal disease as mandated by state law.

B. Reporting Communicable Disease Information and Exposure Incidents

1. Except as otherwise directed by the District Administrator, each school's principal shall function as the District's primary liaison with students and staff, parents and guardians, medical practitioners, public health officials and the community at large concerning communicable disease issues in any individual school. The Executive Director of Student Services shall normally serve as the primary liaison for any such issues arising on a District-wide basis or in connection with the District office or any District facility that is not directly part of a school's physical premises.
2. Intra-District Reporting:
 - a. Any District employee, as well as any non-employee contracted service provider who works in any school or directly with students, who knows or suspects that a student, District employee, or other person who has been present in a school or other District facility has a communicable disease or that a communicable disease may be otherwise present in any such setting shall immediately report the information to the school principal or his/her designee. Other persons, including any parent, student, school volunteer, or visitor who knows or suspects that a communicable disease may be present in a school setting or in any other District facility, are strongly encouraged to report the information in the same manner as is outlined for school employees. Upon receiving a report under this paragraph, the relevant District official shall:
 - i. Promptly evaluate the relevant information for purposes of determining an appropriate response. The relevant official should seek clarifying information (e.g., from the subject of the report, a student's parent or guardian, etc.) and confer with relevant subject matter experts (e.g., medical professionals, public health officials, etc.) as needed and to the extent circumstances permit.
 - ii. If the District Administrator has not already been notified, notify the District Administrator of the situation no later than the point at which a decision is made to pursue external reporting (see below) or the point at which the official determines there is a reasonable probability that the District will need to formulate an incident-specific response.
 - b. Whenever any occupationally exposed employee, as defined above, or other person who has received training in the District's Exposure Control Plan has an actual incident involving exposure to blood or other potentially infectious agents or materials, the person is expected to report the

incident to relevant supervisors or administrators in accordance with the procedures outlined in the Exposure Control Plan.

3. Reports to Public Health Officials:

- a. Pursuant to state law and as further outlined in this section, a teacher, school nurse, or principal of any school (or childcare center) who knows or suspects that a reportable communicable disease is present in a school (or center) is required to immediately notify a local public health officer. By policy, the District extends the external reporting responsibilities outlined in this section to the following additional positions: the District Administrator, the Chief Human Resources Officer, and the Executive Director of Student Services.
 - i. While a person who is subject to this reporting duty may consult with others to determine the need to make an external report and to coordinate the District's report, such consultation and coordination shall not delay the making of a timely report once a reportable situation has been identified.
 - ii. The District encourages staff to attempt to coordinate such reports through a nurse serving the school or through the school principal, but such coordination may not be practical in all situations. No staff member will be disciplined for making a direct external report provided that the staff member also informs appropriate administrators within the District of the situation and the report.
 - iii. Any staff member who makes an external report shall ensure that at least the District Administrator and any relevant school principal are promptly notified of the submission of the report.
- b. All known or suspected cases of a vaccine-preventable disease covered by a student vaccination mandate (i.e., as identified in section 252.04(2) of the state statutes and/or in Chapter DHS 144 of the Wisconsin Administrative Code) which occur among students or staff shall be reported immediately by telephone to the local health department.
- c. To the extent public health officials establish or modify external reporting procedures or expectations in response to a public health emergency (e.g., via a specific public health order, emergency regulation, or other similar directive), such additions or modifications shall supplement the expectations found in these procedures and, in the event of any conflict, supersede these procedures.
- d. Nuisance diseases, such as head lice, are not required to be reported to the local public health officer. However, a school nurse or school principal or their designee may contact public health officials for information about the

prevention, control, and treatment of such diseases and request their involvement in addressing particular outbreaks.

C. Exclusion of Students from School

1. Students in any of the following situations shall be granted an excused absence from school until their presence, as ultimately determined by the District or any applicable public health order or directive, no longer poses an unacceptable threat to the health of themselves or others:
 - a. Any student who has been diagnosed as having a communicable disease that renders them unable to pursue their studies or that poses a significant risk of transmission to others in the school environment, or any student who is in the process of seeking a diagnosis due to a reasonable concern or suspicion of having such a disease.
 - b. Any student who is subject to a public health order that excludes them from school. Notwithstanding the remainder of these procedures, a public health order that requires a student's exclusion from school (including an order excluding non-vaccinated students from school following a substantial outbreak of a vaccine-preventable disease) is sufficient, by itself, to justify an exclusion.
 - c. Any student who is subject to a District-issued directive related to a communicable disease that excludes the student from attending school.
2. Under state law, any nurse who is employed by or directly serving a school, or any school principal, may send a student home from school if the student is suspected of having a communicable disease or other disease that the Department of Health Services has specified by rule. The District Administrator is also authorized to make such a determination as a designee on behalf of any school principal. Under District procedures, teachers are normally expected to refer such issues to the school's health staff and/or to the school principal for a decision unless such individuals are unavailable and there is a need for the teacher to make a decision in their absence.
 - a. Any District employee or nurse serving a school who sends a student home under the above authority shall immediately notify the student's parent or guardian of the action and the reasons for the action. As soon as practicable, the District shall also notify the student's parent or guardian of any specific terms or conditions on the student's return to school. This information shall be noted in the health log.
3. A District decision to exclude a student from school (including any restrictions on a student's participation in school-sponsored activities) beyond the current school day for reasons related to a communicable disease, including the duration and any other terms and conditions of such an exclusion, shall initially be made or expressly approved by the school principal or their administrative

designee. The District Administrator or his/her administrative-level designee may also make or give final approval to such a decision. Such decisions shall be based on all of the relevant facts and circumstances, giving appropriate consideration to information that may be provided by health care professionals and/or public health officials and to any applicable public health orders or standards that may be established by any authorized public health agency or official(s).

- a. Any initial determination shall be revisited as soon as reasonably practicable if a student has been initially sent home or excluded from school as a health and safety measure, conditioned on the receipt of additional information. Similarly, any initial determinations shall be subject to reconsideration in the event of a material change in circumstances or due to the availability of new, material information. Such reconsideration may be initiated by the District or upon the request of the student's parent or guardian.
 - b. If the administrator(s) charged with making a decision regarding exclusion from school determines that the need for exclusion or the appropriate duration or other terms or conditions of an exclusion are unclear or would otherwise benefit from further expert input and analysis, such administrator(s) may refer the situation to a health care team. Members of such a team should be selected based on the specific circumstances, but may include individuals such as the relevant school administrator(s), any nurse serving the school, the District's designated medical advisor, and/or any state or local public health official(s). Based on the individuals who are contacted/involved, District staff shall observe any legal limitations on the disclosure of personally-identifiable information or patient health care records. To the extent the cooperation of the individuals can be obtained, the student and/or the student's parent or guardian and the student's own health care provider(s) may be invited to provide relevant information or otherwise participate in the evaluation of the situation.
4. Any time a decision or order to exclude a student from school due to a communicable disease involves a student with a disability under either Section 504 or under the Individuals with Disabilities Education Act (IDEA), the District employees involved in the matter shall promptly inform the District's lead administrator or coordinator for special education or Section 504, so that appropriate District personnel can evaluate the District's obligations and options regarding any required notices, potential changes in placement, modifications to the student's individualized education program (IEP) or section 504 plan, etc.
5. Any student who is excluded and excused from school attendance due to a communicable disease concern is entitled to at least the same opportunities to make up work as are available to other students with an excused absence. In addition, the student's parent or guardian (or an adult student) may submit

a request for particular program or curriculum modifications. Depending on the duration of the period of exclusion, the District may also affirmatively propose other alternative educational arrangements and opportunities for the student.

6. Following any incident or student absence from school that involves a concern about a communicable disease, the administration may require a statement from a public health official or from a qualified health care provider about a student's suitability to return to school, if the matter warrants such a statement.

D. Applicability of these Procedures

1. The procedures above governing individualized decisions to exclude students and staff for reasons related to a communicable disease are not intended to apply:
 - a. In the event of the temporary closure of a school or any workplace due to a communicable disease concern, or
 - b. To an exclusion decision that the District Administrator or his/her administrative-level designee determines is necessary to comply with a public health order or directive and that applies to a defined class of employees or a defined group of students, regardless of any case-by-case, individualized circumstances.
2. In the event of a school or workplace closure or any non-individualized exclusion decision, as described above in this section, the District will make reasonable efforts to notify affected persons. In addition, a person affected by a non-individualized exclusion decision may appeal the decision using the appeal procedure included in these procedures (above) for students or employees, as applicable.
3. Nothing in these procedures prevents the administration from taking lawful and reasonable actions to exclude persons other than students and District employees from District property or District activities in order to address concerns with health and safety and the possible transmission of any communicable disease. For example, the administration may apply the decision-making procedures regarding the exclusion of District employees to contracted service providers and authorized District volunteers who are performing roles that are similar to roles that may otherwise be filled by a District employee.

Adoption Date: April 28, 2025



ITEM OF INFORMATION

Topic: Policy Update: 453.4- Administration of Drug Products/
Medications to Students

Background Information: Currently, Policy 453. 4 and the related 453.4 Rule allow for the administration of emergency epinephrine through an auto-injector or EpiPen. Emergency epinephrine is now available for administration nasally. It is recommended that the policy be revised to state emergency epinephrine and not exclusively mention an auto-injector, which will allow for nasal administration.

Additional edits to remove outdated language and reference the medication disposal protocol are also included in this revision.

Instructional Impact: Accurate and current Board policies are critical to school operations, establishing a safe and welcoming school environment, and providing high-quality instruction for our students.

Contact Person(s): Laura Jackson, Executive Director of Student Services, (920) 852-5317, jacksonlaura@asds.k12.wi.us

[Administration of Drug Products/Medications to Students Policy 453.4](#)

BOE: April 14, 2025

ADMINISTRATION OF DRUG PRODUCTS/MEDICATIONS TO STUDENTS

Drug products/medications are given to students in the school setting, including alternative placements, to continue or maintain a medical therapy which promotes health, prevents disease, relieves symptoms of illness, or aids in diagnosis. Parent(s)/guardian(s) should administer medications to students outside of the school day whenever possible.

The Appleton Area School District (AASD) shall administer medication in accordance with Wisconsin State Statutes §§ 118.29, 118.291, 118.292, 121.02(1)(g), and 939.25(1). The District may administer prescription medication to a student in compliance with the written instruction of a licensed practitioner, as defined by Statute § 118.29, and written consent from the student's parent/guardian.

Administration of nonprescription medication requires the written instruction and consent of the student's parent/guardian. A request to administer a nonprescription medication in a dosage other than the recommended ~~therapeutic dose,~~ ~~age-based dosing~~ must also be accompanied by the written approval of a licensed practitioner.

For the safety and protection of all students, substances that are not United States Food and Drug Administration (FDA)-approved will not be administered in the school setting.

Students with asthma may possess and self-administer a metered dose or dry powder inhaler with the written approval of a licensed practitioner and parent/guardian.

Students with epinephrine ~~auto-injectors~~ may possess and self-administer for the purpose of treating a severe allergic reaction to include anaphylaxis, with the written approval of a licensed practitioner and parent/guardian.

~~Two doses of adult (0.3 mg) stock epinephrine auto-injectors and two doses of pediatric (0.15 mg) stock~~ Two doses of adult stock epinephrine and two doses of pediatric stock epinephrine will be available at each school location. Epinephrine ~~auto-injectors~~ will be available at each school location, not including community 4K sites. The stock epinephrine ~~auto-injectors~~ must remain on school grounds and will not be taken off campus (i.e., field trips). If an individual appears to be experiencing a severe allergic reaction, dial 911 or the emergency medical service provider. Any individual who is trained on the proper administration of an epinephrine ~~auto-injector~~ may administer epinephrine to the individual experiencing a severe allergic reaction. Individuals receiving the epinephrine ~~injection~~ should be transported to the local emergency department by ambulance.

Naloxone nasal spray will be available at each school location, not including community 4K sites. The naloxone will remain on school grounds and will not be

taken off campus (i.e., field trips). If an individual shows signs of an opioid overdose or if an overdose is suspected, immediately dial 911 for emergency services. Any AASD staff member who is properly trained following a Department of Public Instruction-approved training in the administration of naloxone spray may administer naloxone to the individual who is showing signs of an opioid overdose.

A school administrator will authorize in writing any school employee to administer oral and non-oral prescription or nonprescription medication to students. With the exception of stock epinephrine ~~auto-injectors~~, administration of non-oral medication or medication by means other than ingestion may be done by any school employee with proper training and evaluation. Determining such individuals will be the joint responsibility of the building administrator and the school nurse. Employees, other than health care professionals, who are authorized to give non-oral medication, will receive training approved by the District and the Department of Public Instruction (DPI).

School employees, other than school nurses, who are authorized and trained to administer medication are immune from civil liability for his or her acts or omissions in administering medication to a student unless the act or omission constitutes criminal negligence which is defined in state law as a “high degree of negligence” (§ 939.25 (1), Wis. Stats). School nurses are regulated by Chapter 441, the Nurse Practitioner Act.

The school administrator who authorizes an employee to administer oral medication and who has received required training for administering non-oral medications will be immune from civil liability for the action authorized, unless a court determines that the action constitutes criminal negligence which is defined in state law as a “high degree of negligence” (§ 939.25 (1), Wis. Stats).

Procedures for obtaining and filing written instructions and consents for medication administration, and the protocols for storage, administration, and documentation are delineated in this policy’s Administrative Rule.

Legal References: Wisconsin State Statutes 118.29, 118.291, 118.292, 121.02(1)(g), and 939.25(1)
Wisconsin Administrative Code N. 6.03(3); Chapter 441

Adoption Date: May 9, 1994

Amended Dates: April 24, 2000; March 14, 2011; August 27, 2012; November 10, 2014; October 24, 2016; April 25, 2022, April 24, 2023, [April 28, 2025](#)

ADMINISTRATION OF DRUG PRODUCTS/MEDICATIONS TO STUDENTS Procedures

I. Training of Designee

A school administrator will authorize in writing any school employee to administer oral and non-oral prescription or nonprescription medication to students in compliance with Wisconsin State Statutes §§ 118.29 and 118.291. Employees, other than school nurses, who are authorized to administer non-oral medications to students will receive training approved by the District and DPI, when available. Administration of non-oral medication or medication by means other than ingestion may be done by any school employee with proper training and evaluation. Determining such individuals will be the joint responsibility of the building administrator and the school nurse.

School personnel should complete the knowledge portion of the medication administration training for required routes (non-oral) at least every 4 years and more frequently if needed, as provided on the DPI website. Skill training for the required routes of administration must occur at initiation of the medication assignment and should be repeated annually thereafter. This training is provided by the District.

II. Consent to Administer

A. Prescription Medications

Parent/guardian is responsible for providing the school with a completed medication form for each medication administered at school (forms HS-017, HS-018. The statement must include:

- Student name, date of birth
- Medication name, dose, route, frequency, time/conditions, duration, directions
- Reason for medication
- Precautions, possible untoward reactions, and/or interventions
- Name of licensed practitioner
- Parent/guardian signature, licensed practitioner signature, date

Requests must be renewed each school year or more often if changes ~~in dosage~~ occur. The required forms must be completed and submitted each school year, even if no changes in medication or dosing have occurred. ~~All changes will be noted on the medication administration record (form HS-018a), dated and initialed by the designee.~~ The prescribing licensed practitioner may be notified by school personnel when the parent/guardian requests the discontinuation of any medication at school.

Medications must be supplied by the parent/guardian in the original pharmacy-labeled package and the package name of the student, prescriber, prescription drug product, dose, effective date, and the directions in a legible format. All controlled substances must be delivered to the school by a parent/guardian or other adult.

The school nurse shall be informed by school personnel of all students receiving medication and any changes in dosage. The school nurse will review the medication record periodically and use professional judgment in contacting the practitioner, school personnel, or parent/guardian to resolve inconsistencies in administration directions.

B. Nonprescription Medications

Nonprescription medication (over-the-counter), which is FDA approved, can be administered at school (refer to Section V. for all field trip and activities off school premises). A written, signed statement from the parent/guardian must be on file at the school authorizing school personnel to administer a nonprescription medication. ~~(form HS-018).~~

Nonprescription medication must be supplied in the original manufacturer's package by the parent/guardian. The package must list the ingredients and recommended ~~age-based dosing therapeutic~~ dose in a legible format with the student's name affixed.

If a nonprescription medication is requested to be administered in a dosage other than the recommended ~~age-based dosing therapeutic~~ dose or is intended for long-term use on a daily basis, it must be accompanied by the written approval of a licensed practitioner.

A limited amount of stock medications will be available in the health room for students in grades 6-12 with the approval of the District Medical Advisor. These medications are acetaminophen, ibuprofen, diphenhydramine, and calcium carbonate. If a parent/guardian wishes for their student to receive as needed medications from this supply, they will be required to give consent through on-line registration or in writing using the following form "Consent for Administering Stock Medications at School."

C. Alternative Medication

For the safety and protection of all students, alternative medications (i.e., food supplements and natural products) will not be given in the school setting.

D. Antineoplastics, Oral Chemotherapeutic Agents, and Other Hazardous Drugs

Permission to administer medications in these drug categories may be granted upon review by the building administrator and school nurse in consultation with the District medical advisor after consideration of safe handling and disposal precautions.

E. Research Medication

Medication prescriptions that do not fall within the established FDA guidelines for pediatric use and/or dosing may fall into the following two categories:

- Off-label medications are those FDA-approved medications prescribed for non-approved indications in children.
- Pediatric experimental or investigational drugs are those medications currently involved in clinical trials. These medications are undergoing formal study to determine the efficacy and safety of pediatric dosing, but they do not have FDA approval.

Requests to administer research medication in school will be evaluated on an individual basis by the school nurse. The following materials will be required from the prescribing licensed practitioner:

1. Information regarding the protocol or a study summary from the research organization
2. Signed parent/guardian permission
3. Reporting requirements
4. Any follow-up required nursing actions to be taken at school
5. Additional information/documentation may be requested as needed

Permission to administer medications in these drug categories may be granted upon review by the building administrator and school nurse in consultation with the District medical advisor. The District reserves the right to refuse to administer the medication.

F. Stock Epinephrine ~~Auto-Injectors~~

Stock Epinephrine ~~Auto-Injectors~~ will be available in District school buildings for the health and safety of all individuals with known and unknown allergic reactions to foods or other environmental items.

A stock epinephrine ~~auto-injector~~ should be retrieved for use when symptoms of anaphylaxis are identified:

- Difficulty swallowing or tightening of the throat
- Difficulty breathing
- Nausea and vomiting
- Swelling of the face or extremities
- Skin rash, hives

Two doses of adult stock epinephrine and two doses of pediatric stock epinephrine will be available at each school location. ~~Available doses are the~~

~~adult (0.30 mg) dose and the pediatric (0.15 mg) dose.~~ If an individual appears to be experiencing a severe allergic reaction, the protocol is to dial “911” or the emergency medical service provider. Any individual who is trained to ~~use an epinephrine auto-injector to~~ administer epinephrine may do so to the individual experiencing a severe allergic reaction. Individuals receiving the epinephrine ~~injection~~ should be transported to the local emergency department by ambulance.

G. Stock Naloxone Nasal Spray

Stock naloxone nasal spray will be available in District School Buildings for the safety of all individuals. Naloxone is a medication that is an opioid antagonist that rapidly reverses an opioid-related drug overdose and has no effect on someone who does not have opioids in their system.

Stock naloxone nasal spray should be retrieved for use when the symptoms of an opioid-related drug overdose are identified:

- Unconsciousness
- Very small pupils
- Slow or shallow breathing
- An inability to speak
- Faint heartbeat
- Limp arms and legs
- Pale skin
- Purple lips and fingernails
- Vomiting

If an individual appears to be experiencing an opioid-related drug overdose, the protocol is to dial 911. An individual trained to administer naloxone through a DPI-approved training may do so to the individual who is showing signs of an opioid-related drug overdose. Individuals receiving naloxone should be transported to the local emergency room by ambulance.

III. Self-Administered Medications

- A. Students with asthma may possess and self-administer metered dose inhalers or dry powder inhalers for the purpose of preventing or alleviating the onset of asthmatic symptoms. The student must have the written approval of a licensed practitioner and the written approval of the student’s parent/guardian. ~~(form HS-017).~~ A copy of this approval will be present in the student’s school and maintained in the behavioral record (Wisconsin State Statute § 118.291).
- B. Students may possess and self-administer a prescription medication upon the written approval of a licensed practitioner and the written approval of the student’s parent/guardian. ~~-(form HS-017).~~ A copy of this approval will be

present in the student's school and maintained in the behavioral record. The student will possess no more than the daily supply of the medication at a time, and the medication must be in the original pharmacy-labeled package.

- C. A student may possess and self-administer an epinephrine ~~auto-injector~~ for the purpose of treating a severe allergic reaction, including anaphylaxis, that requires the administration of epinephrine to avoid severe injury or death. The student must have written approval of a licensed practitioner and written approval of the student's parent/guardian ~~(HS-017)~~. A copy of this approval will be present in the student's school and maintained in the behavioral record (Wisconsin State Statute § 118.292). If a student administers epinephrine, dial "911" or an emergency medical service provider.
- D. A student may possess and self-administer nonprescription medications. A written statement identifying the medication and granting permission for self-administration is to be signed by the parent/guardian and maintained in the behavioral file. ~~(HS-017)~~.

Factors to be considered will be:

- Type of medication
- Reason for medication
- Age of the student

IV. Expired Medications

Parents/guardians are strongly encouraged to supply a medication that will not expire during the school year. For the safety of our students, expired medications should not be administered at school.

V. Administration of Medications for Field Trips

Field trips may include school-sponsored activities off school grounds, athletics, student groups or clubs, and any overnight events/field trips where a student has a medication on file that may need to be given. If a student is receiving medication at school on a daily basis, or on an as-needed basis, it is the responsibility of the staff person who is organizing the field trip to ensure that the student receives the medication per the parent/guardian/physician consents, and as indicated by the parent on the field trip permission form. All information regarding student medication administration is confidential and must be protected accordingly.

The procedures below outline steps to ensure that students receive their required medications.

A. Field Trips – Regular School Day

Prior to the field trip

- A minimum of one staff person who is attending the field trip must have

successfully completed the applicable DPI-approved training, depending on the medication needs of the students and the AASD skills training checklist with the school nurse. Current training documentation must be on file with the District prior to the date of the field trip.

- The staff person organizing the field trip must provide a list of participating students to the school secretary or designee prior to the event. The school secretary or designee will review the list of students and determine which students have medications at school.
- Parents/guardians are required to complete the medication portion of the field trip permission slip, indicating if medications are required.

Day of the field trip

- The medication will be prepared by the school secretary or designee. The daily medication dose will be put into a white envelope or Ziploc bag with the student's name, the organizing staff person's name, and the time to be given. The envelope or bag will include a field trip medication form with the student's name, name of medication, dose, and time to be given, special instructions, and a place for the organizing staff person to sign that the medication was administered (~~see attached form HS-029a~~).
- It is the responsibility of the organizing staff person to see that the medication is given on time and that the ~~child~~ student takes the medication. The organizing staff person will sign the form to document the time the medication was administered. "As needed" medications, such as asthma inhalers, if used by the student, will follow the same procedure.

After the field trip

- The organizing staff person will return all forms and all medication to the school secretary or designee promptly upon return from the event.
- The school secretary or designee will document on the medication record that the medication was administered, sign their initials and the initials of the staff person who administered the medication, and note the time the medication was administered. The field trip medication form may be stapled to the medication record.

B. Field Trips – Extended Beyond Regular School Day

Field trips that extend beyond the regular school day may require more doses of a medication to be administered that are not normally given during the school day. If additional medications and/or doses are required, consent for those medications must be on file prior to departure.

- The parent/guardian must provide the medication in a pharmacy-labeled bottle (prescription) or over-the-counter packaging (non-prescription). The required paperwork must be completed (~~HS-017 or HS-018~~) indicating all doses and times the medication is to be administered. Only the amount of medication needed on the field trip should be sent.
- The school secretary or designee may consult with the school nurse regarding questions/organization of the medication.

- It is the responsibility of the organizing staff person to see that the medication is administered on time and that the student successfully takes the medication. The staff person administering the medication on the field trip will document on the field trip medication form all doses of medication that are administered. The Regular School Day “Prior to the field trip” protocols (detailed above) must be completed prior to the trip.
- Emergency medications (i.e., asthma inhalers, epinephrine ~~EpiPens~~, glucagon) should be accessible to the student while on a field trip.
- Upon return from the field trip, forms and medication will be returned to the school secretary or designee.
- The school secretary or designee will document on the medication record that the medication was administered, sign their initials and the initials of the staff person, and note the time the medication was administered. The field trip medication form may be stapled to the medication record.

VI. Medication Storage

Medication will be stored in a secure location. Medication that needs to be accessible to the student will be stored in an appropriate location per student need (i.e., emergency medications) and stored to maintain quality (i.e., refrigeration). For the safety of our students, the AASD will not store and administer extra medications for instances when a dose was missed at home.

Building stock epinephrine ~~auto-injector~~ and stock naloxone will be stored in or near the AED cabinet ~~and in the school office~~, will not leave the school grounds, and will be checked and documented monthly by the staff person completing the AED check. The staff person will also maintain a schedule for tracking stock epinephrine and ~~stock naloxone status~~ and expiration dates. ~~Stock naloxone will be stored in or near the AED or designated medical box school office or health room and in the Naloxone Overdose Reduction Kit, and will be checked and documented monthly by the school nurse.~~

The parent/guardian or student with parent/guardian permission shall pick up unused portions of medication within seven days after the completion of the school year, when a student transfers out of the district, or when medications have been discontinued. ~~Unused portions of controlled substances may not be transported by students. Anytime~~ after seven days and documentation of written or verbal notification to the parent/guardian, medications will be ~~given to the Student Resource Officer (SRO) for disposal disposed of according to the medication disposal protocol. or destroyed pursuant to Medical Advisor or pharmaceutical instructions.~~

VII. Medication Disposal

The safe disposal of medication can prevent diversion and protect the environment. If at all possible, medications should be returned to the student’s parent/guardian who has the prescription for the medication. When returning the medication is not possible, the school must assume responsibility for managing the pharmaceutical waste. Schools must follow state law for businesses and

institutions for managing waste.

There are four categories of medications for the management of disposal:

1. Controlled Substances (e.g., narcotic pain medication and stimulant medications): per the Medication Disposal Protocol ~~schools will turn this waste over to the SRO.~~
2. Hazardous Medication Waste: schools may take advantage of the state hazardous waste contract to manage hazardous waste medications. The building engineers should be contacted for this disposal.
3. Infectious Medication Waste (e.g., Sharps containers): Contact the Building Engineer to properly dispose of Sharps containers.
4. Non-hazardous Medication Waste (e.g. Tylenol, antibiotics etc.): May be disposed of ~~at a designated pharmaceutical drop-off site. licensed solid waste landfill. District employees should may mix the medication with an undesirable substance such as water, rubbing alcohol kitty litter or coffee grounds and place in disposal container with a lid. The medication can then be placed in the trash.~~

VIII. Documentation

An accurate individual student record of administered medication will include:

- Demographic data such as name, birthdate, grade, and school year.
- Medication name, dose, date/time given, date of expiration if applicable.
- Signature of the person administering.
- Dose changes will be dated, with the signature of the designee, and reviewed by the school nurse.
- Exceptions (i.e., absent, no school, refused) will be documented on the individual student record.
- Errors (i.e., wrong student, wrong time, wrong medication, wrong dose, wrong route) will be documented on the Medication Incident Review Form (HS-019)
- For controlled substances, school office personnel shall verify the amount of the medication delivered by counting and documenting individual units of medication in the presence of the parent/guardian, adult who delivers it or another staff person. ~~Two adults parent/guardian or adult delivering the medication shall~~ verify the medication count by initialing the medication administration form.

Situations that are not considered medication errors include: students who refuse to consume or are unable to tolerate the medication, lack of supply of the medication from the parent/guardian, and a medication held by a parent. These situations are documented in the medication log and the parent/guardian is notified.

The Student Medication Record ~~(form HS-018a)~~, including consent forms will be

maintained per AASD Student Records policy 347 ~~in the student's behavioral record~~ after discontinuation of the medication.

IX. Allergy Environment

The District cannot guarantee an allergy-free environment, but recognizes that the risk of accidental exposure to allergens can be reduced in the school setting. The District is committed to working cooperatively with students, parents/guardians, and medical providers to minimize accidental exposure to known allergens and improve safety in the learning environment.

The focus of allergy management will be on prevention, education, awareness, communication and emergency response. The District will ensure that interventions and individual health care plans for students with allergies are based on medically accurate information to the extent information is known to the District and evidence-based practices.

X. Rights and Responsibilities

Authorized school personnel have the responsibility to:

- See that the medication is given within 30 minutes before or after the time specified by the parent/guardian and the prescribing licensed practitioner.
- Maintain the medication administered at school in a secure place which also maintains medication quality (i.e., refrigeration for liquid antibiotics). • Report to the school nurse any dose changes, inconsistencies, medication side effects or medication errors. In the event of a drug administration error, parent/guardian and school nurse will be notified, and the licensed practitioner notified if parent/guardian or school nurse determines it is required or necessary under the circumstances. The Medication Incident Review Form (~~HS-019~~) shall be completed by the employee involved within 24 hours of the incident.
- Have access to the Administration of Drug Products/Medications to Students Policy 453.4 for immediate reference. Document all medication administered or the reason medication was not administered (i.e., absent, refusal, error).
- Respect confidentiality. Student medication administration information is confidential and must be protected accordingly.

Authorized school personnel have the right to refuse to administer medication to students when the medication administration procedures, as described in Section II above have not been completed.

The school nurse has the responsibility to:

- Review medications and any changes in medications administered at

school when informed by designated school personnel of new medication or of any changes.

- Use professional judgment in carrying out the policy.
- Verify skills competency for the administration of non-oral medications.

XI. Distribution of Policy and Liability Waiver

- All school employees who are authorized and trained to administer medication to a student shall have access to this policy and shall be advised that, pursuant to the provision in Wisconsin State Statutes §§ 118.29, 118.291, 118.292 that they are immune from civil liability for any acts or omissions in administering a prescription or nonprescription medication to a student in accordance with this policy unless he or she is a healthcare professional or the act or omission constitutes criminal negligence which is defined in state law as a “high degree of negligence” (§ 939.25 (1), Wis. Stats).
- The school administrator who authorizes an employee to administer a prescription or nonprescription medication to a student is immune from civil liability for the act of authorization unless it constitutes criminal negligence, which is defined in state law as a “high degree of negligence” (§ 939.25 (1), Wis. Stats).
- With the exception of the administration of emergency epinephrine and naloxone auto-injectors as outlined above, a person administering a medication by means other than ingestion to a student is not immune from civil liability if he or she has not received DPI-approved training. The authorizer is not immune from civil liability if he or she authorizes a person who has not received DPI-approved training to administer medication by means other than ingestion to a student.

Refer to DPI Medication Training and Resources and the accompanying District forms.

.

Adoption Date: May 9, 1994

Amended Date: April 24, 2000; March 14, 2011; August 27, 2012; November 10, 2014; October 24, 2016; April 25, 2022, April 24, 2023, June 24, 2024, April 28, 2025

FIRST AID

Procedures

~~Emergency school health services are provided under the direction of the school nurse (a registered professional nurse). Emergencies are those conditions, which require prompt intervening action to maintain physical, mental, and emotional health of pupils. Emergency services include an assessment of the illness/injury situation or condition and appropriate intervention conducted by the school nurse or other designated trained staff. Each building principal designates at least two individuals responsible for carrying out emergency procedures for all school functions during the regular school day. Personnel capable of providing or obtaining emergency care as designated in the policy and procedures must be available during all school-sponsored activities. The knowledge and skills necessary of designated persons at co-curricular activities or accompanying students off campus include:~~

- ~~1. How to summon emergency medical care providers~~
- ~~2. Controlling arterial bleeding~~
- ~~3. Performing choking intervention measures~~
- ~~4. Responding to an unconscious person~~
- ~~5. Dispensing medications~~

~~The District contracts with a physician(s) to serve as medical advisor for school health services. The medical advisor reviews the procedures for emergency care services and advises the District regarding health services.~~

~~Policies and procedures for emergency health services are identified in the Student Injury and Illness Quick Reference (1987) available in school health rooms. Interpretation of procedure and the training of designated emergency care providers is the responsibility of the school nurse. The District provides for a parent-approved emergency medical care plan on the student enrollment card. The District provides for a parent and physician approved plan for emergency care of a student with special medical considerations. The plan is identified on the~~

~~Individualized Educational Plan (IEP) or Specialized Care in Emergency Situations plan, which is directed and coordinated by the school nurse. The school nurse and the safety coordinator provide for and monitor the record system, which includes accident investigation reports and health room log of services performed.~~

~~Equipment and supplies adequate for emergency care service are readily accessible in the school health room; with basic supplies available in other designated areas (home economics rooms, technical education rooms, etc.).~~

~~An annual review of emergency care services is conducted by the District School Health Council to assure that procedures are adequate to cover emergencies. The review includes the statistical report and recommendations of the school nurses, the medical advisor, and School Health Council members. The written report and recommendations are submitted to the Board of Education by June 30 of each school year.~~

~~Cross References:~~ ~~Medication Administration to Students, 453.4 Procedures for the Maintenance and Confidentiality of Student Records, 347 Rule~~

~~Adoption Date:~~ ~~May 22, 1989~~



ITEM OF INFORMATION

Topic: Policy Update: 453.6-Rule, First Aid

**Background
Information:**

The Wisconsin Association of School Boards (WASB) was contracted to conduct a policy audit last year. Through the audit, policies were identified to be either created or revised. The policy work was delegated to administrators who oversee the respective area of the policy. These administrators utilized WASB-recommended sample policies and researched other districts or sought legal advice depending on the complexities of the policy.

As policies are created or revised, they will be Items of Information at Board of Education meetings for discussion and then be scheduled for a future meeting as an Item for Consideration.

Based on the WASB's updated policies, we are recommending to retire this policy, as the current requirements are within the new language of updated Policy 453.1- Emergency Nursing Services.

**Instructional
Impact:**

Accurate and current Board policies are critical to school operations, establishing a safe and welcoming school environment, and providing high-quality instruction for our students.

**Contact
Person(s):**

Executive Director of Student Services, Laura Jackson,
920-852-5317. jacksonlarua@aasd.k12.wi.us

[First Aid 453.6-Rule](#)



SCHOOL BOARD SPRING ELECTION

April 1, 2025

ELECTION RESULTS

<u>Candidate</u>	<u>Total Votes</u>
Pheng Thao	20,178
Oliver Zornow	15,554
Christy Codner	14,665

Per Wisconsin State Statute, the two candidates who receive the highest number of votes will be elected to the regular three-year terms starting April 28, 2025.