



Asthma School Nursing Award

community leaders helping children breathe better

Coaches Training Project

Project To-Do Checklist 2010

Project Goal

Teach asthma management basics to 10 or more coaches of sport teams for children ages 5-18.

Preparation

- Schedule group training session(s). While multiple training sessions are not required, some school nurses may find that offering it multiple times will be beneficial.
- Contact local schools and parks/recreation department as a way to contact coaches and leaders of extra-curricular activities (e.g., band, dance, etc.)
- Contact Peggy Gaddy to order copies of training manuals and other materials (e.g., laminated quick-reference bag tags) for session participants. The materials are free to Asthma School Nursing Award recipients.
- View *School Staff In-Service Video*, which is available at <http://www.dhss.mo.gov/asthma/Publications.html> (Note: a DVD version of this video was mailed to all school nurses May 2007; if you need a copy, please contact Peggy Gaddy.)
- Review *Winning With Asthma* online training program (www.winningwithasthma.org)
- Advertise the training session. We recommend purchasing at least one advertisement in the local newspaper and promoting the training session to sport league managers (e.g., little league).
- Prepare agenda for training session
- Develop a presentation, based on *Winning With Asthma* training manual (download from www.asthahere.org/coaches)

Report Results

- Submit *Outcomes Report Form* to Peggy Gaddy by September 30, 2010.

Due Dates

August 31, 2010 – complete training session(s)

September 30, 2010 – submit *Outcomes Report Form*

For more information, please visit WWW.ASTHMAHERE.ORG or contact:

Peggy Gaddy
Missouri Department of Health & Senior Services
920 Wildwood Drive, PO Box 570
Jefferson City, MO 65102-0570

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OUTCOMES REPORT FORM

Coaches Training Project

School Nurse Name: _____

County: _____

Due September 30, 2010

Return to:

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Jefferson City, MO 65102-0570

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QUESTIONS >> Please answer these questions:

1. How many coaches attended the training session(s)? _____
2. How did you promote the training session to recruit coaches?
3. Do you feel the training session was useful for coaches? Why or why not?
4. Are you interested in leading additional asthma training programs for coaches in your community?
 Yes No

DATA >> Please attach the following data:

- A. List of coaches who attended the training session, including name, mailing address, phone number and sport team(s) coached. Note: Program staff may contact listed participants for the purposes of program evaluation.

*If you have any questions about completing this report,
please contact Peggy Gaddy: (573) 522-2876, peggy.gaddy@dhss.mo.gov*