



# WSSCC Practice Blueprint

## Session 5

**Purpose:** To evaluate your setting's use of recommended practices in each WSSCC domain

### Review

- Exploring Context in WSSCC Practices activity, case study, & reflection questions

### Do Together

- Activity 5: Exploring Context in WSSCC Practices



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## Activity 5 – Exploring Context in WSCC Practices

Anticipated time needed to complete this activity: 30 minutes

Now that you have listed out the practices, people, and assets related to WSCC in your setting, it is time to take a closer look at whether your current practices in each domain align with best practices. In other words, we want to identify how comprehensive our current implementation of WSCC practices is within each domain. This will allow us to identify domains that are strengths and those that are areas of growth; with this information, you'll be well positioned to prioritize next steps in WSCC practices as you proceed through the 3Es.

In Activity 5 – Exploring Context in WSCC Practices, available in Appendix B, you will rate implementation of recommended practices for each domain. Then, you will provide a brief, data-driven justification for your rating. These steps will also be completed for integration, implementation, and evaluation of WSCC practices. Evidence-informed practice strategies are listed for each domain to give a frame of reference of recommended practices. At the conclusion of this step, you will have a clear sense of strengths and areas for growth in relation to aligning school practices with WSCC.

Domain	Item	Rating <small>Rate: 0 (needs work), 1 (sort of), 2 (got it)</small>	Justification <small>Explain: provide brief justification List: data sources used to determine rating</small>
	1. Avoid physical activity as a disciplinary consequence and ensure that all students have equal access to participation in physical activity.	1	<p><u>Explanation:</u> Students have 20-minute recess one time per day, all students have access to recess/physical education, school personnel participate in group games at recess, monthly flyers with community-based physical activity events sent home, no professional development/staff training, working on developing CSPAP</p> <p><u>Data sources:</u> Review of curricula, anecdotal reports from school wellness team members, professional development session list, CSPAP</p>
	2. Promote employee involvement in physical activity such as by providing opportunities for personnel to lead recess activities, participate in physical activity breaks, and serve as healthy role models.		
	3. Encourage family involvement in physical activity by providing information on how to be physically active at home and physical activity events/programming in the community.		
	4. Incorporate physical activity into existing curricula, such as by having students act out the meaning of a word or jump to solve a math problem.		
	5. Provide opportunities for and choices of physical activity throughout the day, including providing physical activity breaks several times per day that last between 5 and 15 minutes.		
	6. Develop a Comprehensive School Physical Activity Program (CSPAP) plan.		
	1. Utilize the Health Education Curriculum Analysis Tool (HECAT) to select and/or develop appropriate and effective health education curricula based on student and community needs.	1	<p>All Hillside students are required to enroll in a health class for one semester of each academic year. Health class curricula cover a wide range of health and wellness issues including nutrition guidance, sex and relationship education, and substance use prevention programs. Parents and guardians are kept informed about what specific topics are being discussed at the start of the semester to support family involvement</p>
	2. Align health education curricula with community needs and student interests to ensure delivery of an up-to-date and inclusive health education curriculum in a developmentally tailored, culturally relevant, and community-focused manner.		
	3. Promote family involvement in health education by providing families with newsletters and information sheets, including family-student homework assignments, and offering family-student and family information sessions as part of the health education curriculum.		
	4. Use multiple active-learning components in teaching health education such as role-playing, opportunities to practice healthy lifestyle skills, practice interpreting nutrition and medication labels, and meal planning and preparation.		

Note. This tool was adapted from Gaurino, K. & Chagnon, E. (2018). Trauma sensitive schools training package. Washington D.C.: National Center on Safe and Supportive Learning Environments.

## Case Study:

### Hillside's Deep Dive into WSCC Practices

Hillside's WSCC Practice Leadership Team begins to take a closer look at their WSCC-aligned practices. Dr. Yusuf, the school psychologist, pulls up Activity 5 - Exploring Context in WSCC Practices so that the team can examine their practices across WSCC domains. The team works together to assign a rating from 0 (needs work) to 2 (doing great) based on their current implementation of recommended practices for each domain. The team makes sure to support their rating with evidence, such as disciplinary data and staff feedback. Ms. Lee writes down a brief explanation for each rating based on the Team's conversation, citing the data that was discussed.

The WSCC Practice Leadership Team is pleasantly surprised to find that they earned some '2' ratings based on their current practices! Many of their ratings were a '1', which they also found to be encouraging. What stood out, however, was that Hillside earned a '0' rating for their Employee Wellness practices. Though it had been discussed that staff were experiencing burnout and that employee wellness efforts could be better, the team was surprised to learn that Hillside did not currently engage in nearly any of the recommended WSCC practices in the Employee Wellness domain.

Some team members began to feel overwhelmed by the task of aligning Hillside's practices with the WSCC Employee Wellness domain. Team members remark, "Where do we even start?" and "I'm not sure that we'll ever make everyone happy." English department representative Mrs. Wu suggests that the team wait until their next meeting before trying to consider next steps and reminds the team of the many strengths in Hillside's practices that the activity also highlighted.

## REFLECT



1. In completing Exploring Your Context in WSCC Practices, which domains emerged as the strongest – choose up to 3?
2. Choosing up to 3, which domains received the lowest ratings?



# ACTIVITY 5 – EXPLORING CONTEXT IN WSCC PRACTICES

**Time to Complete:** 30 minutes

**Goal of Activity:** To evaluate your setting's use of recommended practices in each WSCC domain.

## Instructions

Exploring Context in WSCC Practices can help organize the big picture of current practice efforts as aligned with the WSCC model. Each WSCC domain is listed with respective specific evidence-informed practice strategies – along with an 11<sup>th</sup> scale which offers items related to integration across domains.

First, complete a rating for each domain using a 0 (needs work) to 2 (doing great). When rating each domain, consider the implementation of each item across your system's policies, processes, and practices.



Next, provide a brief justification for the rating in each area. As part of this justification, list the data sources (e.g., disciplinary data, attendance data, anecdotal report, survey/interview) used to determine your rating in each area.



Finally, go back through to identify priority areas that might be targeted within practices at different levels (e.g., system, building, individual). Consider whether efforts might best be focused on increasing knowledge and skills (“able”) and/or reinforcing attitudes and performance (“willing”).

**Policies** – The laws, mandates, regulations, standards, resolutions, and guidelines which provide a foundation for school district practices and procedures.



**Processes** – The plans or procedural steps that schools carry out in working to prepare for and implement initiatives.

**Practices** – The specific strategies/actions that schools take to best implement, adapt, and sustain initiative goals.




Domain	Item	Rating	Justification
	<ol style="list-style-type: none"> <li>1. Avoid physical activity as a disciplinary consequence and ensure that all students have equal access to participation in physical activity.</li> <li>2. Promote employee involvement in physical activity such as by providing opportunities for personnel to lead recess activities, participate in physical activity breaks, and serve as healthy role models.</li> <li>3. Encourage family involvement in physical activity by providing information on how to be physically active at home and physical activity events/programming in the community.</li> <li>4. Incorporate physical activity into existing curricula, such as by having students act out the meaning of a word or jump to solve a math problem.</li> <li>5. Provide opportunities for and choices of physical activity throughout the day, including providing physical activity breaks several times per day that last between 5 and 15 minutes.</li> <li>6. Develop a Comprehensive School Physical Activity Program (CSPAP) plan.</li> </ol>	<p><u>Rate:</u> 0 (needs work), 1 (sort of), 2 (got it)</p>	<p><u>Explain:</u> provide brief justification <u>List:</u> data sources used to determine rating</p>
	<ol style="list-style-type: none"> <li>1. Utilize the Health Education Curriculum Analysis Tool (HECAT) to select and/or develop appropriate and effective health education curricula based on student and community needs.</li> <li>2. Align health education curricula with community needs and student interests to ensure delivery of an up-to-date and inclusive health education curriculum in a developmentally tailored, culturally relevant, and community-focused manner.</li> <li>3. Promote family involvement in health education by providing families with newsletters and information sheets, including family-student homework assignments, and offering family-student and family information sessions as part of the health education curriculum.</li> <li>4. Use multiple active-learning components in teaching health education such as role-playing, opportunities to practice healthy lifestyle skills, practice interpreting nutrition and medication labels, and meal planning and preparation.</li> <li>5. Incorporate social learning approaches into health education activities such as through practice unpacking positive and negative media</li> </ol>		

	<p>messages and identifying ways in which social media and other influences can encourage healthy and unhealthy behaviors.</p> <p>6. Integrate health education across grade levels and subject areas in a way that is developmentally appropriate.</p>		
	<p>1. Promote positive relationships between students and staff by ensuring that students have a connection or relationship with at least one adult in the building.</p> <p>2. Use positive, proactive strategies to promote engagement and belonging that emphasize student voice, choice, and interest, such as establishment of Gay-Straight Alliance (GSA)/LGBTQ+ clubs and use of instructional choice in the classroom.</p> <p>3. Collect, review, and respond to school climate data.</p> <p>4. Implement bullying and harassment prevention and intervention using whole school, multi-tiered, multi-component approaches.</p> <p>5. Incorporate transformative social and emotional learning (SEL) strategies that focus on mitigating inequities and prioritizing development with respect to identity, agency, belonging, and problem-solving.</p> <p>6. Develop staff cultural competence and humility through professional learning on topics such as responsive teaching practices and bias awareness.</p>		
	<p>1. Involve community members in existing prevention efforts.</p> <p>2. Evaluate current community involvement initiatives to ensure school programs are matched to student and community needs.</p> <p>3. Invest in building relationships with cultural brokers and translators.</p> <p>4. Incorporate service learning activities (e.g., community service, volunteering experiences) into curricula.</p> <p>5. Establish shared-use agreements with community partners for both school and community spaces.</p> <p>6. Implement a school-based mentoring or volunteer tutoring program.</p> <p>7. Establish after-school programs in collaboration with community partners.</p>		
	<p>1. Ensure that students have at least 10 minutes to eat breakfast and at least 20 minutes to eat lunch.</p> <p>2. Promote school personnel involvement in a healthy nutrition environment by incorporating nutrition instruction and activities into classes, modeling healthy nutrition habits, and encouraging nutritional awareness.</p> <p>3. Incorporate student choice and hands-on learning activities related to healthy food consumption and general nutrition knowledge.</p>		

	<ol style="list-style-type: none"> <li>4. Collaborate with families and community organizations by providing families with newsletters, recipes, activities, and/or workshops that support healthy eating at home.</li> <li>5. Target multiple health behaviors (such as healthy eating behaviors and physical activity) when addressing nutrition.</li> <li>6. Improve the school nutrition environment by providing access to clean and free drinking water, and nutritional information on food choices and healthier options in cafeterias, vending machines, and snack areas.</li> <li>7. Provide competitive pricing for healthy foods (e.g., supplying fruits and vegetables at little or no cost; competitive pricing restrictions on sugary beverages).</li> </ol>		
	<ol style="list-style-type: none"> <li>1. Improve indoor and outdoor air quality through strategies such as increasing access to fresh air by opening windows and implementing a no-idling vehicle policy on school grounds.</li> <li>2. Promote student and staff involvement in improving and maintaining the physical environment.</li> <li>3. Change seating options with consideration of factors such as seat height, slope of desk, lumbar support, adjustability, and access to standing desks.</li> <li>4. Create a school safety team that includes a variety of stakeholders, including families, community members, and first responders, and develop and practice crisis prevention and response plans with all stakeholders.</li> <li>5. Monitor and respond to the indoor physical environment regularly for the presence of mold or moisture, air and water quality, temperature, and humidity, and create response plan(s) to address concerns.</li> <li>6. Change playground designs to match the preferences and developmental level of students in each grade and promote access to green space.</li> <li>7. Consider appropriate use of school resource officers (SROs) and, if choosing to have SROs, invest in rigorous training and guidelines that define appropriate SRO roles; additionally, include SROs in staff training in positive behavior, cultural competence and humility, and related topics.</li> </ol>		
	<ol style="list-style-type: none"> <li>1. Establish an employee wellness committee that includes teaching staff and representatives from other positions (e.g., bus drivers, administrative staff, food services).</li> <li>2. Support positive workplace climate by implementing supports to foster positive relationships and collaboration among staff.</li> </ol>		

	<ol style="list-style-type: none"> <li>3. Implement environmental changes (e.g., access to free drinking water, healthy food and beverage options, physical activity breaks) to support healthy lifestyle habits.</li> <li>4. Encourage participation in online health and wellness promotion by offering options such as access to health education, health monitoring tools, and social networks to support health behavior change.</li> <li>5. Provide supports such as workplace stress management program and resilience training to prevent and relevant treatment to respond to employee mental health needs.</li> <li>6. Provide coaching and ongoing professional development related to identified areas of need.</li> </ol>		
	<ol style="list-style-type: none"> <li>1. Utilize the Health Services Assessment Tool for Schools (HATS) to assess the quality of school-based health services, resources available to support services, and strength of school health policies and practices.</li> <li>2. Disseminate health information resources (e.g., vaccination programs, school-based health screening, allergy management) to students and families.</li> <li>3. Assess and plan for chronic health condition management by educating students about their medications, developing management and response plans and training appropriate staff on emergency care procedures, and specifying Individualized Health Care Plans.</li> <li>4. Develop relationships with a diverse group of community stakeholders (e.g., community healthcare providers, local government, local nonprofit organizations, colleges/universities) to tailor health services to the needs of the school community.</li> <li>5. Provide behavioral health training for school health service providers (SHSP).</li> <li>6. Implement multicomponent school-based prevention programs to promote student health and reduce risk behavior.</li> <li>7. Develop a school-based health center (SBHC).</li> </ol>		
	<ol style="list-style-type: none"> <li>1. Engage in ongoing communication between schools and families to share important information about educational programs, health-related screenings and follow-up services, and student health needs.</li> <li>2. Evaluate existing family engagement initiatives with consideration of when (i.e., before, during, or after school) and how (e.g., in person, virtually) families can engage with their child's school.</li> <li>3. Provide opportunities for ongoing family engagement, such as through the use of school-based family resource centers and consultation-based family-engagement interventions.</li> <li>4. Strengthen family access and inclusion within the school environment through means including distribution of materials to families in their</li> </ol>		



	<p>native or preferred language using their preferred mode of communication (e.g., email, home note, phone call).</p> <p>5. Prioritize family engagement in district and building level initiatives, including in mission statements, policies, and practices (including hiring initiatives aimed to ensure staff reflect diversity in the school community), and provide staff with ongoing professional development on evidence-based, culturally responsive family engagement to increase capacity for family engagement at all levels of the school system.</p> <p>6. Empower families to take meaningful leadership roles in school and community by fostering relevant knowledge and skills and providing opportunities to be actively involved in decision-making that impacts the school and community.</p>		
	<p>1. Promote use of positive behavior support practices such as clear and positively stated classroom expectations, explicit teaching of expectations, reinforcement of appropriate student behavior, and consistent responses to inappropriate behavior.</p> <p>2. Strengthen universal school-based mental health promotion by implementing school-wide interventions (e.g., social-emotional learning programs, psychoeducation, mindfulness) for all students.</p> <p>3. Establish a process for identifying need and matching to appropriate behavioral supports, such as through school-based universal screenings of all students.</p> <p>4. Implement targeted behavioral interventions for students demonstrating social, emotional, or behavioral concerns.</p> <p>5. Offer cognitive-behavioral therapy (CBT) based interventions to respond to student behavioral needs.</p> <p>6. Utilize function-based interventions based on functional behavioral assessment (FBA) data for students in need of intensive supports.</p>		
 <p><b>Integration</b></p>	<p>1. Majority of school personnel have foundational understanding of the WSCC model.</p> <p>2. Opportunity is provided to establish consensus regarding core values and a shared agenda as related to WSCC principles.</p> <p>3. Integration of efforts across WSCC is a leadership priority.</p> <p>4. Appropriate expertise for each WSCC domain is represented on decision-making teams.</p> <p>5. WSCC integration is evaluated when considering new/adapted practices.</p> <p>6. Data are available to facilitate integrated decisions.</p> <p>7. Data are used to evaluate implementation of integrated efforts.</p> <p>8. Regular communication is provided to all stakeholders (school-family-community) about alignment of efforts with the WSCC model.</p>		

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