

# WSCC PRACTICE BLUEPRINT

A School Planning Guide  
for Whole Child Initiatives



(Version 2 - 2026)



**UConn**



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## WHAT'S NEW IN VERSION 2 OF THE BLUEPRINT?

Welcome to Version 2 of the WSCC Blueprint! Since releasing Version 1 in 2022, we've engaged with Blueprint activities through opportunities to dive deeply with school districts across the state of Connecticut. This work was supported, in part, by funding through a healthy schools cooperative agreement with the Center for Disease Control and Prevention (CDC) and the National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP) to provide professional development and technical assistance to schools and districts in the state of Connecticut.

Based on this work, Version 2 of the WSCC Practice Blueprint includes:

- **Clearer description of where academics fit with the WSCC model.** Because academics are not explicitly shown in the model, we often received questions about how the WSCC model connects with academics. We have added a section entitled "[Academics and the WSCC Model](#)" to explain how central academics are to the WSCC model.
- **Greater connection between the WSCC model and developmental pathways.** In professional learning, our explanations of five developmental pathways—academic, social, emotional, behavioral, and physical—have helped educators to think about student development holistically. In this version of the Blueprint, we explain these in greater depth and more explicitly connect them to the WSCC model in the "[What do we mean by Whole Child?](#)" section.
- **Stronger emphasis on aligning WSCC work with school and district priorities.** In our piloting of the version 1 Blueprint activities, we learned how valuable and important it can be for schools or districts to align their WSCC goals with school or district priorities. This alignment allowed schools and districts to *work smarter, not harder* and leverage available resources and buy-in towards initiatives. We describe this in greater detail in the "[What do we mean by Whole School?](#)" section and now integrate this consideration into many of the Blueprint activities.
- **Updated and expanded case studies.** Version 1 of the Blueprint included a case study describing a school team's blueprinting process. We have updated this case study to include a compilation of ideas and initiatives our school and district partners have considered or undertaken. We have also expanded to include a district team case study throughout as many of our users to date have been district teams.
- **Addition of more robust assessment options.** We have added our recently developed and piloted WellSAT WSCC in Practice as an assessment tool to be

used in Activity 7. This tool provides teams with more robust information about strengths and opportunities for growth in their current practices.

- **Revised activities.** Perhaps most exciting, we have revised some of the activities to align with the progression we've observed to be most useful to teams completing the Blueprint. Specifically, we've improved Activities 2, 4, 8, and 9 and replaced previous activities with new Activities 6 and 7. These activities include a greater emphasis on aligning WSCC goals with school and district priorities, gathering data and the perspectives of key groups to guide decisions, and writing SMART goals that will be measurable and achievable in your setting. The narrative of the Blueprint has also been updated to provide users with the prerequisite knowledge needed to successfully engage with each of these activities.

## HOW SHOULD WE COMPLETE THIS BLUEPRINT?

This blueprint can be completed in a number of ways: over a series of sessions, in a longer chunk of professional learning time, or as a revisit after completing the full blueprint once.

Below, we recommend a 10-session structure for completing your blueprinting work. Depending on your schedule and needs, you can modify this schedule or combine sessions. **Each session (including reading) is expected to take approximately 30-45 minutes to complete.** However, each team will find its own rhythm and flow. Activities can be spaced out over more time or revisited.

We suggest working on the activities in each session during shared meeting time. The anticipated time to complete each activity generally ranges from 20-30 minutes, but teams may choose to spend more time diving into an activity to be sure they get the most out of it and are prepared for next steps.

Your team can choose whether to also independently read the associated pages during shared meeting time or to each review the material prior to the meeting. The reading **provides important information for completing the activities**, so we suggest choosing a structure that will ensure team members have read **prior** to completing the activities.

## Suggested Structure to Completing the Practice Blueprint

Session and Section	Activities	Purpose
<b>Session 1</b> Introduction	<p>Review blueprint sections:</p> <ul style="list-style-type: none"> <li>• <a href="#">How should we complete this blueprint?</a></li> <li>• <a href="#">Who should complete this blueprint?</a></li> </ul> <p>Do Together: <a href="#">Activity 1 – Constructing an Effective Leadership Team</a></p>	To create a multidisciplinary team to lead the WSCC blueprinting work.
<b>Session 2</b> Introduction	<p>Review blueprint sections:</p> <ul style="list-style-type: none"> <li>• <a href="#">Section 1: Introduction to the Blueprint</a></li> <li>• <a href="#">Navigating the Blueprint</a></li> <li>• <a href="#">Intro to the WSCC model</a></li> <li>• <a href="#">Academics and the WSCC Model</a></li> <li>• <a href="#">Building and Mapping WSCC Resources activity &amp; case studies</a></li> </ul> <p>Do Together: <a href="#">Activity 2 – Build and Map WSCC Knowledge</a></p>	To gain familiarity with the WSCC model and available resources for strengthening knowledge.
<b>Session 3</b> Introduction/ Exploring Context	<p>Review blueprint sections:</p> <ul style="list-style-type: none"> <li>• <a href="#">What do we mean by Whole Child?</a></li> <li>• <a href="#">What do we mean by Whole School?</a></li> <li>• <a href="#">What do we mean by Whole Community?</a></li> <li>• <a href="#">A Quick Note about Policy</a></li> <li>• <a href="#">Setting Up for Success Using the 3Es</a></li> <li>• <a href="#">Step 1: Exploring Context</a></li> <li>• <a href="#">Resource Inventory activity, case study, &amp; reflection questions</a></li> </ul> <p>Do together: <a href="#">Activity 3 – Taking Inventory of Your Resources</a></p>	To understand the rationale behind the blueprinting process and to document your setting's existing practices and resources related to each WSCC domain.
<b>Session 4</b> Exploring Context	<p>Review blueprint sections:</p> <ul style="list-style-type: none"> <li>• <a href="#">Exploring WSCC in Context activity, case study, &amp; reflection questions</a></li> </ul> <p>Do together: <a href="#">Activity 4 – Exploring WSCC Practices in Context</a></p>	To evaluate your setting's use of recommended practices in each WSCC domain.
<b>Session 5</b> Evaluating Directions	<p>Review blueprint sections:</p> <ul style="list-style-type: none"> <li>• <a href="#">Step 2: Evaluating Directions</a></li> <li>• <a href="#">Big Picture WSCC SWOT Analysis activity, case study, &amp; reflection questions</a></li> </ul> <p>Do together: <a href="#">Activity 5 – Big Picture WSCC SWOT Analysis</a></p>	To identify WSCC domains that are areas of strength, weakness, opportunity, and tension in your setting's practices.

<b>Session 6</b>  Evaluating Directions	Review blueprint sections: <ul style="list-style-type: none"> <li>• <a href="#">WellSAT WSCC in Practice &amp; Identifying Potential directions activity, case study, &amp; reflection questions</a></li> </ul> Do together: <a href="#">Activity 6 – WellSAT WSCC in Practice and Identifying Potential Directions</a>	To more thoroughly evaluate practices in one WSCC domain and identify potential practices to strengthen.
<b>Session 7</b>  Evaluating Directions	Review blueprint sections: <ul style="list-style-type: none"> <li>• <a href="#">Establishing Next Steps</a></li> <li>• <a href="#">De-Implementing: Opportunities to Reallocate Resources</a></li> <li>• <a href="#">Gathering Information to Prioritize Potential Directions activity, case study, &amp; reflection questions</a></li> </ul> Do together: <a href="#">Activity 7 – Gathering Information to Prioritize Future Directions</a>	To gather input and information to inform next steps.
<b>Session 8</b>  Establishing Actions	Review blueprint sections: <ul style="list-style-type: none"> <li>• <a href="#">Step 3: Establishing Actions</a></li> <li>• <a href="#">Congruence activity, case study, &amp; reflection questions</a></li> </ul> Do together: <a href="#">Activity 8 – Confirming Congruence</a>	To confirm your setting’s readiness to engage in each potential practice change and narrow down to 1-5 practice changes to pursue.
<b>Session 9</b>  Establishing Actions	Review blueprint sections: <ul style="list-style-type: none"> <li>• <a href="#">Planning for sustained implementation</a></li> <li>• <a href="#">Creating SMART goals</a></li> <li>• <a href="#">Measuring Process and Outcomes of Action Plan Implementation</a></li> <li>• <a href="#">Action Planning activity, case study, &amp; reflection questions</a></li> </ul> Do together: <a href="#">Activity 9 – Action Planning</a>	To create an action plan for each practice change you are going to pursue with plans for measuring your process and outcomes.
<b>Session 10</b>  Establishing Actions	Review blueprint sections: <ul style="list-style-type: none"> <li>• <a href="#">Celebrating your Practice Plan</a></li> <li>• <a href="#">Advocating for WSCC Policy activity, case study, &amp; reflection questions</a></li> </ul> Do together: <a href="#">Activity 10 – Advocating for WSCC Policy</a>	To identify the policy changes that need to be made to align policy with new practices.

# WHO SHOULD COMPLETE THIS BLUEPRINT?

This practice blueprint is intended for school teams who are interested in improving their use of whole child practices. To guide this work, we specifically use the [Whole School, Whole Community, Whole Child \(WSCC\) model](#). Before you dive into blueprinting, we offer an activity to help you construct an interdisciplinary leadership team that represents expertise and voice across WSCC domains. It is likely that specific individuals in your setting hold expertise related to practices in specific domains (e.g., physical education teacher, school counselor, college and career readiness coordinator); knowledge-sharing can help to ensure that your team gets the most out of the blueprinting process.



## Activity 1 - Constructing an Effective Whole Child Leadership Team

Anticipated time needed to complete this activity: 20 minutes

[Activity 1 - Constructing an Effective Whole Child Leadership Team](#) is intended to help determine team composition. Key considerations that it will help with are:

- Who should serve on the leadership team to enable coverage across the majority of WSCC domains?
- Who else can be brought into conversations as needed to ensure the WSCC domains and voices of key groups are fully represented?
- How many core leadership team members are sufficient to balance representation and efficiency?
- How often and when will meetings occur?

### ACTIVITY 1 – CONSTRUCTING AN EFFECTIVE WHOLE CHILD LEADERSHIP TEAM



Time to Complete: 20 minutes

Goal of Activity: To create a multidisciplinary team to lead the WSCC blueprinting work.

#### Instructions

1. For each domain, brainstorm the key personnel that partake in decision-making AND in the implementation of services in that area.
2. Use the third column to identify existing team members that are linked to each domain. Note that names may be written multiple times in this column. The goal is to ensure that each domain has at least one team member who can represent the ongoing work in that area.
3. Answer the two questions below the table to (a) to summarize how many people are on the team, and (b) to plan for when and how often meetings will occur.

#### Hillside's SST consists of:

- Mr. Smith, Principal
- Mrs. Garcia, Vice principal
- Ms. Lee, School nurse
- Dr. Yusuf, School psychologist
- Dr. Greenberg, School counselor
- Mr. Banerjee, Special education teacher
- Mr. Kishia, Family and consumer sciences teacher
- Mrs. Wu, English teacher
- Dr. Hess, Science teacher
- Ms. Wilcox, Math teacher
- Mr. Stevens, History teacher
- Mrs. Alves, Spanish teacher

WSCC Domain	List key personnel	Leadership team member(s) linked to domain	Additional staff linked to domain
Physical Activity	District health and wellness coordinator, school administrators, health and physical education teachers, coaches, school nurse	<ul style="list-style-type: none"> <li>• Mr. Smith</li> <li>• Mrs. Garcia</li> <li>• Mrs. Wu</li> </ul>	<ul style="list-style-type: none"> <li>• Physical education teacher(s)</li> <li>• Health education teacher(s)</li> </ul>
Health Education	District health and wellness coordinator, school administrators, health and physical education teachers, coaches, school nurse	<ul style="list-style-type: none"> <li>• Mr. Smith</li> <li>• Mrs. Garcia</li> <li>• Mrs. Wu</li> </ul>	<ul style="list-style-type: none"> <li>• Physical education teacher(s)</li> <li>• Health education teacher(s)</li> </ul>

Constructing an Effective Leadership Team | [csch.uconn.edu](#)



Throughout the blueprint, we include case studies to provide examples of one school and one district's WSCC practice blueprinting efforts. Importantly, these illustrate **only two of many paths through the blueprint**. However, reading the case studies may spark ideas for your own setting's work or provide clarity on how to approach each activity. The school team's case study is shown in green boxes. The district team's case study is shown in yellow boxes. You might choose to only read the case study (school or district) that applies to your context.

Here, we introduce the case studies that will be carried throughout the practice blueprint. In these case studies, you will learn about each team, their settings, and the insights they gained from the Constructing an Effective Whole Child Team activity.

## School Team Case Study:

### Introducing Hillside Academy's Practice Blueprint Work

Hillside Academy is a mid-size public secondary school located in a rural New England town. Hillside administration is seeking to strengthen alignment of their practices with the WSCC model. Mr. Smith, the principal at Hillside Academy, heard about the WSCC model at a conference and has since identified some Hillside Academy practices that align with WSCC domains. However, Mr. Smith feels that steps were needed to more fully integrate WSCC practices into the school's day-to-day operations.

Hillside has a Student Support Team (SST) that meets regularly to make decisions and review data regarding school initiatives. Hillside's SST consists of administrators, a general education teacher from each academic department, a special education teacher, a school nurse, and school mental health professionals. Hillside staff, including members of the SST, were introduced to the WSCC model during a recent professional development (PD) workshop. Following up on this introduction, Mr. Smith asks the SST if they are interested in forming a team focused on strengthening Hillside's WSCC efforts. The SST members are enthusiastic about increasing the school's implementation of WSCC practices and agree to discuss this further at their next SST meeting.

During Hillside's next SST meeting, the team takes the last 30 minutes to work on the Constructing an Effective Leadership Team activity. They work together to identify the key personnel that take part in decision-making AND implementation of services across various WSCC domains. They realize that the current SST members are linked to decision-making and implementation across most domains. However, they also recognize that there are colleagues that they would need to reach out to related to certain domains. In addition, they agree that if they are going to take on this work, they'll want to ensure broad staff, family, and community support before making any major decisions.

Anticipating that they'll be able to reach out to additional staff members for input at various times, the SST members believe that their team has the time, enthusiasm, and interdisciplinary structure to serve as the Whole Child Team. They identify that their goal is to align Hillside's practices with the WSCC model. They decide to allocate the last 30

minutes of every other SST meeting to focus on their WSCC practice work as the Whole Child Team.

As a first step, Mr. Banerjee, the representative from the special education department, offers to email the additional staff members that the team identified to describe the Whole Child Team to see if the team can tap their expertise when making decisions related to their work.

## **District Team Case Study:**

### **Introducing Elmwood School District's Practice Blueprint Work**

Elmwood School District is a large public school district in a mid-Atlantic city. Elmwood has been invested in whole child practices for many years and recently learned about the WSCC model. Specifically, Assistant Superintendent Taylor learned about the WSCC model and how it could be an organizing framework for the work done in Elmwood.

Assistant Superintendent Taylor shares the WSCC model with Elmwood's Superintendent and both agree to start by having the District Wellness team incorporate the WSCC model as an organizing framework for their work. Assistant Superintendent Taylor decides to use the WSCC Practice Blueprint to guide the team's learning and actions for the school year.

Elmwood's District Wellness team is co-chaired by Assistant Superintendent Taylor and the District's Registered Dietitian, Ms. Hernandez. The full team meets four times a year to make decisions related to district wellness, discuss progress on any initiatives, and brainstorm solutions to current challenges. The full team includes:

- Assistant Superintendent Taylor, co-chair
- Registered Dietitian, Ms. Hernandez, co-chair
- Superintendent Francis
- District Health and Physical Education Coordinator, Mr. Thomas
- Nursing Supervisor, Mrs. Moore
- City Department of Health official, Mr. Wilson
- Parent, Ms. Williams
- 7<sup>th</sup> grade student, Ava
- 10<sup>th</sup>-grade student, Lucas

A smaller workgroup (called an Executive Council) meets monthly to implement decisions made by the full wellness team. The Executive Council includes:

- Assistant Superintendent Taylor, co-chair
- Registered Dietitian, Ms. Hernandez, co-chair
- District Health and Physical Education Coordinator, Mr. Thomas

- Nursing Supervisor, Mrs. Moore

During Elmwood's first quarter district wellness team meeting, the team takes 20 minutes to work on the Constructing an Effective Leadership Team activity. They realize that they have representation across many of the WSCC domains, but also some key gaps. They identify the domains of Social and Emotional Climate, Behavioral Supports, Safe Environment, and Community Involvement as areas lacking sufficient representation on their wellness team. The team identifies three additional people to invite onto the team:

- District Lead Psychologist, Dr. Williams
- Facilities Manager, Mr. Robins
- Parks and Recreation Director, Ms. Adams

The team agrees to invite these three individuals to join the district wellness team, asking them to contribute to quarterly meetings and support the executive council, as needed, in between quarterly meetings. The team also agrees that the executive council should continue with the WSCC Practice Blueprint in their monthly meetings and provide a report back at the next quarterly meeting.

## SECTION I: INTRODUCTION TO THE BLUEPRINT

The goal of this guide is to support the action planning to create an effective blueprint to set your system up for successful *implementation* and *sustainment* of WSCC practices. We will refer to this throughout as **whole child systems implementation**. We structure this blueprinting work across three steps: Exploring Context, Evaluating Directions, and Establishing Actions.

In this first section, we provide an overview of the Whole School, Whole Community, Whole Child (WSCC) Model. We then define whole child, whole school, and whole community. Finally, we focus on the “how” of WSCC implementation, with particular focus on the need for coordination and integration of efforts. This first section will help set you up for success in your blueprinting process.

### Navigating the Blueprint

Throughout this blueprint, you will see the following icons to assist in navigating.



**Activity:** something to be completed to further your blueprinting work



**Tip:** something to consider or keep in mind for the future as you complete your blueprinting work



**Reflect:** questions to check for understanding and confirm that you have considered the key points of the section

### Intro to the WSCC Model

Schools are an important anchor in the community, serving as a primary system of care for children. Therefore, schools have tremendous influence on child well-being, with a unique role in promotion, prevention, and intervention across areas of child development. The [Whole School, Whole Community, Whole Child \(WSCC\) model](#) was created by the CDC and ASCD out of the recognition that coordinated and integrated systems of learning and health are more effective and efficient facilitating positive child development. Yet, these systems often operate in silos. This can lead to duplication, inefficiency, and gaps in service delivery to children. Silos also create challenges for sustaining supports because the work falls on one team or department rather than being integrated into the functioning of an entire school or district. ***Education and health sectors must collaborate to facilitate the success of the whole child.***

The WSCC model describes the importance of integrated policies, processes, and practices across 10 domains relevant to child learning, health, and well-being. WSCC offers a comprehensive model to show the many parts that can facilitate or impede child and school success.

## The Whole School, Whole Community, Whole Child (WSCC) Model



Source: <https://www.cdc.gov/whole-school-community-child/about/>

### Academics and the WSCC Model

In a quick look at the WSCC model, educators might wonder where academics (e.g., rigorous curriculum and instruction) are included in the WSCC model. Academics are central to the WSCC model and are represented in the green center – a student that is healthy, safe, challenged, supported, and engaged. The WSCC model recognizes that not only do healthy, safe, challenged, supported and engaged students learn best, but also that the 10 domains (shown in blue and described below) further support academic performance and success. Whereas a school nurse might relate most to the Health Services domain of the WSCC model, teachers, instructional specialists, and assistant superintendents might place their work in the central green area of the WSCC model. Rigorous academic learning is central to the WSCC model.

### WSCC Domains: A Closer Look

The 10 domains of the WSCC model are like gears: although the work undertaken in each might be of differing sizes, they work together to support system functioning and student outcomes. The 10 WSCC domains and associated definitions are listed next, with links to brief reports and our on-demand webinar series that describe each domain in greater detail.

# The 10 Domains of the WSCC Model



**Counseling, Psychological, and Social Services [or Behavioral Supports]:** Consists of school-based prevention and response services that address students' social, emotional, and behavioral (SEB) health.

[Practice Brief](#)



**Community Involvement:** Refers to partnerships between school and community groups and/or community-based organizations.

[Practice Brief](#)



**Employee Wellness:** Focuses on the health and well-being of school employees to promote a positive school environment for all school personnel and students.

[Practice Brief](#)



**Family Engagement:** Refers to a collaboration between families and school personnel with the goal of fostering positive outcomes for student learning, health, and development across domains.

[Practice Brief](#)



**Health Education (including Nutrition Education):** Structured learning experiences in which students acquire knowledge to engage in health-informed decision making and adopt lasting healthy behaviors.

[Practice Brief](#)



**Health Services:** Consists of supports provided to promote the physical health of students in the school setting.

[Practice Brief](#)



**Nutrition Environment and Services:** Focuses on developing students' abilities to make healthy nutritional decisions.

[Practice Brief](#)



**Physical Education and Physical Activity:** Includes: (a) physical activity before, during, and after school, (b) physical education, (c) staff involvement, and (d) family and community engagement.

[Practice Brief](#)



**Physical Environment [or Safe Environment]:** Describes the school building and physical space around the school, school grounds, and the land on which the school is built, as well as how safe people feel in that space.

[Practice Brief](#)



**Social and Emotional Climate:** Refers to the psychosocial aspects of student experiences.

[Practice Brief](#)



## Activity 2 - Build and Map WSCC Knowledge

Anticipated time needed to complete this activity: 20-30 minutes

If WSCC is new to you or it would be helpful to expand your knowledge before diving in, we encourage you to spend time familiarizing yourself with the WSCC model and each of the 10 domains. Then, we encourage you to map WSCC knowledge in your setting. This will help you to recognize the personnel you already have implementing WSCC-related practices in your setting.

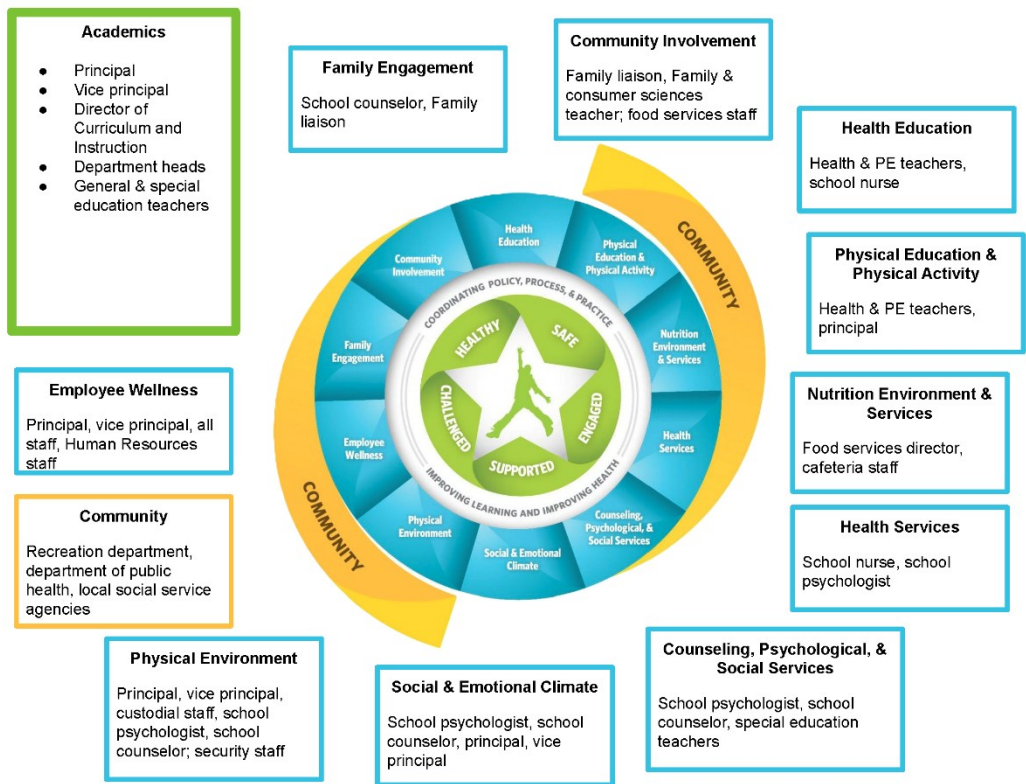


We have compiled WSCC Resources from CSCH and the CDC. The CDC's resources include a virtual healthy school where users can explore the WSCC model in action, overviews of the WSCC model, and summaries of research supporting the WSCC model.

CSCH's resources include short on-demand webinars and practice briefs about (a) the WSCC model as a whole and (b) each of the 10 domains. The webinars incorporate interviews with school and district personnel discussing how they incorporate WSCC into their practice. The "Overview of the WSCC Model" video in our [on-demand webinar series](#) gives an overview of the WSCC model, and each of the remaining videos present information specific to a domain.

The practice briefs summarize evidence behind why each WSCC domain is important, how each domain relates to student outcomes, and best practices within each domain. The [overview brief](#) provides the background whereas the others expand specific content for each domain.

Using [Activity 2 – Build and Map WSCC Knowledge](#), we encourage you to select resources to explore to strengthen your WSCC knowledge. We suggest selecting an overview resource (e.g., [CDC's WSCC Overview](#), [CSCH Overview Brief](#), or CT WSCC Partnership "[Overview of the WSCC Model](#)" webinar) and 1-2 additional resources related to domains of interest. There are many resources, but we suggest limiting yourself to a manageable amount of time for this activity. Then, using the provided visual, document who in your setting holds knowledge about each domain.



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Build WSCC Knowledge | [csch.uconn.edu](https://csch.uconn.edu)

## School Team Case Study:

### Building and Mapping WSCC Knowledge at Hillside Academy

At their next meeting, the WSCC Practice Team takes 15 minutes to review WSCC resources. They each select different resources to review, with some choosing to read practice briefs and others choosing to watch brief WSCC webinars. Mrs. Alves comments that they may want to return to the Evidence in Action pages of the briefs at a later date to select opportunities for improvement in their setting.

Next, the team works on mapping expertise in their setting. In addition to their own expertise, they identify several other colleagues with expertise in various WSCC domains. In brainstorming colleagues who are engaged in WSCC-aligned work, they also reflect upon the many practices that are already happening at Hillside.

## District Team Case Study:

### Building and Mapping WSCC Knowledge with the Elmwood Executive Team

Elmwood’s executive council of the district wellness team continues with the WSCC Practice Blueprint in their next monthly meeting. The team members each spend 10 minutes exploring WSCC domains that are less familiar to them (e.g., Social and Emotional Climate, Behavioral Supports). Out of curiosity, they also each briefly check out the resources related to their areas of expertise! Then, the team works together to map the current expertise and initiatives in their district to the WSCC model. Because there are so many initiatives, they decide to focus on those at the district level (rather than including school-specific initiatives as well). They are encouraged to see how much WSCC work they are already doing and how well many of their existing efforts map onto the WSCC model! They make a note to share this map with the full wellness team at their next quarterly meeting as it provides a nice visual of the district’s work and reinforces the value of the new expertise they have invited to the team!

Next, we more explicitly define “whole child,” “whole school,” and “whole community.”

## What do we mean by Whole Child?


Whole means that the primary focus of our systems and interventions is to support healthy child development. But what is healthy child development, and how do we support it?

Children develop in multiple ways, including academic, social, emotional, behavioral, and physical development. These are sometimes called developmental pathways. Each pathway has unique contributions to a child’s development but the pathways are also interrelated. For example, if a child has a chronic health condition (i.e., an aspect of physical development) that affects their school attendance, their academic development may also be affected. Considering the whole child means attending to these interrelated areas of child development, recognizing that all have an impact on student success in school.

For additional context and information about whole child, whole school, and whole community, we recommend reading our article, [Engaging a Whole Child, School, and Community Lens in Positive Education to Advance Equity in Schools.](#)

Facet of Child Development	Description
Academic	Students' academic, cognitive, and executive functioning skills, such as literacy, math, task completion, and time management
Social	How students interact, including their social skills and relationships with peers and adults
Emotional	How students feel, including their ability to recognize and regulate their emotions, self-confidence, and emotional well-being
Behavioral	How students act, including contributions to their communities, controlling impulses, and interacting kindly with others
Physical	Students' health, including meeting expected developmental milestones, any chronic health conditions, and medical needs

Although whole child development is the responsibility of many key groups—families, medical professionals, schools, out-of-school time providers, and coaches, for example—schools play a key role in promoting whole child development. Not only does supporting whole child development contribute to stronger outcomes for students, it can also facilitate healthier and more academically successful school environments.



**REFLECT**

1. What does “whole child” mean to you?
2. Which pathways of student development (e.g., academic, social, emotional, behavioral, physical) does your setting prioritize most / least?
3. In your setting, what does “whole child” look like? Are shifts needed to enable a focus on the “whole child”?

## What do we mean by Whole School?

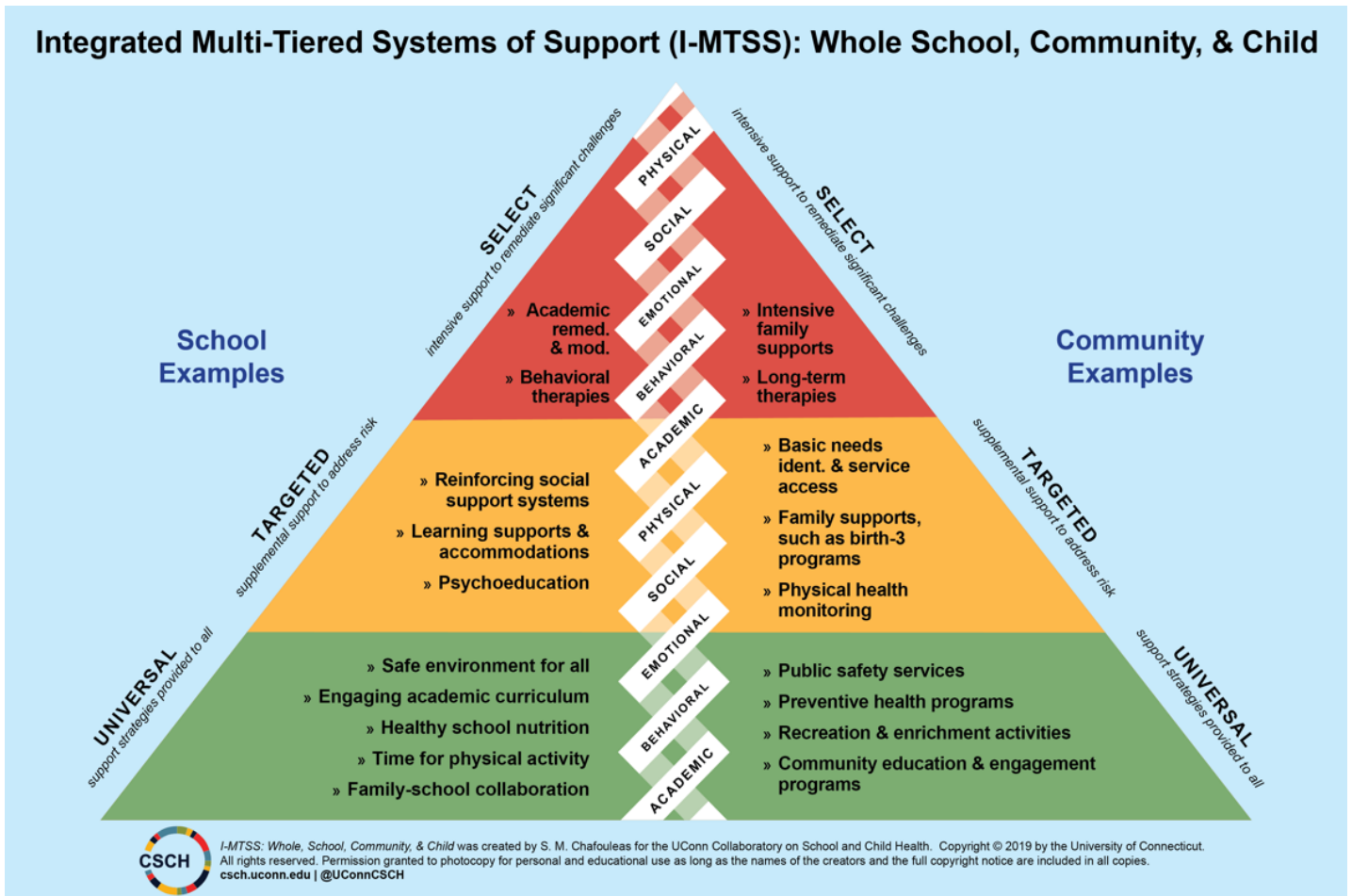
By whole school, we mean integrated and coordinated—rather than siloed—efforts to promote student development. We also mean supporting the full school community, including families, educators, staff, and other school employees. One way to improve whole school implementation is to align new initiatives with school and district priorities. By aligning initiatives with school and district priorities, we increase opportunities for buy-in, available resources, and sustainment over time. This alignment allows school and districts to strengthen their work, rather than having multiple teams going in different directions with initiatives. We encourage school and districts to *work smarter, not harder*.

We also encourage schools to consider opportunities to integrate their WSCC work within existing structures. One common existing structure in schools is multi-tiered systems of support (MTSS). Conceptualized as a triangle, the model organizes supports into levels of intensity based on student need, including universal (provided to all), targeted (provided to some), and select (provided to a few) levels of intensity. Most schools have likely used MTSS to organize academic supports, and many others may be incorporating behavioral supports into MTSS. However, as we share next, MTSS and WSCC can be integrated to organize services across all WSCC domains or pathways of child development.

Drawing on the content of the WSCC model (the *what*) and the service delivery focus of MTSS (the *how*), we merged these models and have named this model Whole Child Integrated MTSS, or Whole Child I-MTSS (see Figure 1). Whole Child I-MTSS weaves together efforts across developmental pathways, including academic, social, emotional, behavioral, and physical development. Schools and districts can optimize this work by engaging in community partnerships that support the work of addressing the range of needs of every child. This weaving of efforts across settings is depicted in Figure 1. As shown, multiple tiers (or levels) of service delivery allow all students and families to receive appropriate intensity of support to foster positive development. Universal supports include, for example, facilitating safe environments and ensuring a solid core academic curriculum to establish the foundation for success. For those that need additional supports to do their best, progressively more intensive strategies may be put in place – with both the school and community working together to effectively provide necessary supports for students and families. At the targeted level, for example, those students struggling to reach reading goals might be provided with additional instruction, in a small group format, led a school reading specialist. At the select level, community providers might provide intensive family supports to assist in meeting the physical health goals for a student experiencing complex health needs.

The examples shown in Figure 1 are not exhaustive. Consider for a moment the many tiered supports your setting provides to facilitate students' academic, social, emotional, behavioral, and physical development.

Figure 1.



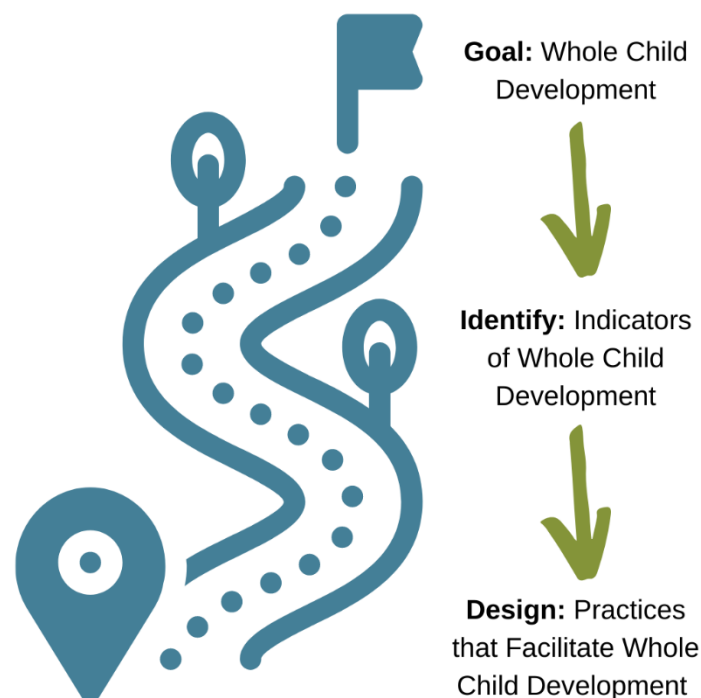
## What do we mean by Whole Community?

Whole community refers to connecting whole child goals across settings and contexts. Doing so facilitates positive outcomes for each individual and enhances sustainability of systems, programs, and initiatives (Chafouleas & Iovino, 2021). Although whole child development serves as the foundation to decisions, high quality and sustained implementation of supports must guide decisions about whole child policies, processes, and practices.

A danger with a model as detailed as WSCC is that multiple initiatives could be adopted that each address a specific issue, but implementation may be fragmented rather than interconnected. This can lead to inefficient use of resources, difficulty sustaining initiatives over the long-term, and missed opportunity to capitalize on the reinforcing effects of coordinated efforts. But how do we organize our work in a way that supports whole child development throughout our initiatives? How do we avoid the trap of adding “one more thing” to address a specific issue?

Coordination and integration of initiatives promote sustained implementation. Here we draw upon a framework often adopted in curriculum design to place intended outcomes in the decision-making process: **backwards design**. Backwards design (Wiggins & McTighe, 2005) encourages educators to begin by identifying their end goal. In the case of whole child systems implementation, we identify that the goal of positive whole child development will guide all our efforts. The second step in backwards design is to decide how we will evaluate whether our goal has been met – in this case, whole child development. This step allows us to envision what success looks like. The third and final step of backwards design is to design practices that lead to our goal. In the case of whole child systems implementation, we aim for these practices to enable optimal outcomes through coordination and integration of work across WSCC domains. Our backwards design roadmap is shown in Figure 2. As shown, we start with focus on the destination (or goal), decide how to assess whether our goal (whole child development) has been met, and then land at the beginning of our route to design practices that facilitate whole child development.

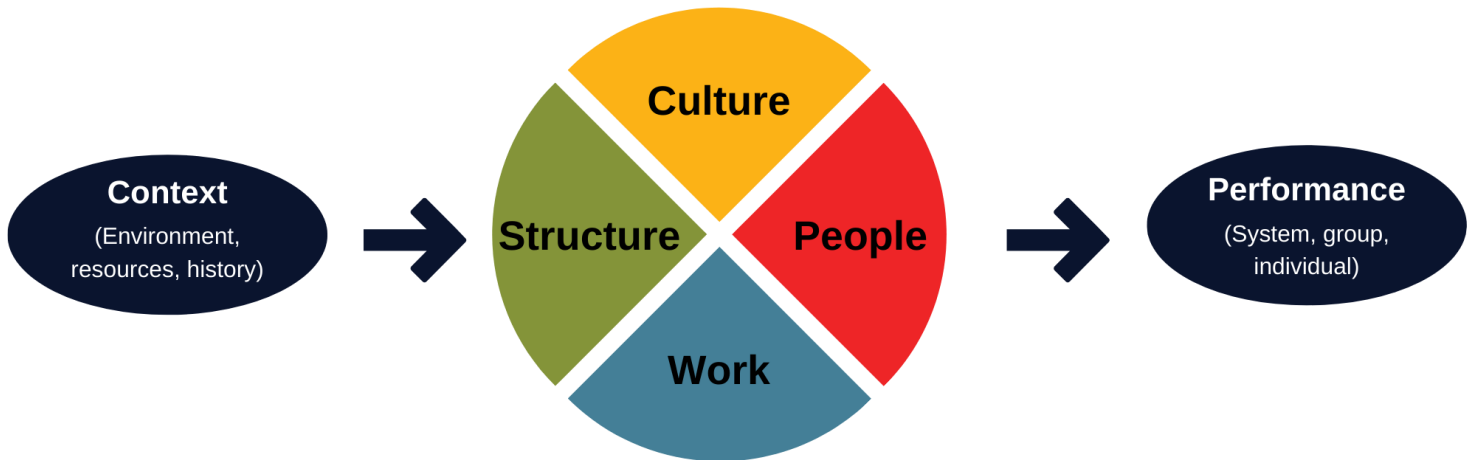
**Figure 2.** Using backwards design to create a roadmap to whole child development.



Using backwards design helps us keep focus on our goal and selected indicators of positive whole child development. Then, we can turn to the practical aspects of implementation, such as securing buy-in and resource allocation. Coordination and integration of efforts occurs best by considering the realities of our context. This means that we consider potential facilitators and barriers within our system and surrounding systems.

Congruence theory can offer a useful visual of these contextual considerations. Shown in Figure 3, congruence refers to the **goodness-of-fit** between the *work* that needs to be done, the *people* who do the work, the formal *structure* of a system, and the *culture* of a system (Nadler & Tushman, 1980). Congruence theory can help us to determine our **readiness** to take on an initiative or next steps to improve readiness.

**Figure 3.** Congruence Model (Adapted from Nadler & Tushman, 1980).



Applying the congruence model to school settings, we define the components of the model in the following ways:

- The *work* refers to the instructional, curricular, and related support tasks.
- The *structure* (school, district, state) assigns the work.
- The *people* include the personnel tasked with the responsibilities for doing the work.
- The *culture* refers to the informal structures in place, such as willingness to adapt current work, or attitudes and skills about new work.

Without congruence, practices can stall or be fragmented – leaving schools or districts challenged with decisions about what and how to implement. Think of the game Chutes and Ladders® – when there is strong congruence, we are positioning ourselves to land on ladders, leading to more efficient and successful implementation. However, when there is weak congruence, we can face setbacks – or chutes – that hinder our efforts towards positive whole child outcomes. Evaluating congruence helps us to better anticipate potential challenges and set up for success.



As an example, many schools are considering implementing social, emotional, and behavioral universal screening. Although this could lead to many positive outcomes, if a setting does not have the necessary understanding about its connection to academic outcomes and associated buy-in from staff and families, efforts are likely to stall. In addition, if school policy has not been updated to reflect this commitment to universal screening, it may fall by the wayside when new initiatives surface or leadership changes. Congruence provides a structure for considering whether the work, structure, people, and culture of a setting are aligned to support implementation. In addition, congruence encourages us to coordinate our policies and practices to further support student health. We revisit congruence in Activity 8 of this Blueprint.

To learn more about implementing and sustaining school-based practices, we recommend visiting resources available through the [Sustain Collaborative](#).

## A Quick Note About Policy

In this blueprint, we focus on WSCC **practices**. That said, we strongly recommended school and district leaders complete the blueprinting process for both practice and policy, as this will help paint a picture of the level of coordination across what you are doing (practice) and supposed to be doing (policy). We recommend that administrators complete the policy blueprinting process as they are typically the key personnel responsible for creating, revising, or evaluating school policy.

Interested in diving into policy? Check out the [WSCC Policy Blueprint](#).

Ideally, practice and policy changes will occur in parallel – that is, when changes are made to practices, policies should be reviewed and updated as needed to ensure that the messaging is coordinated with what is happening. For example, if a district has decided to implement universal social, emotional, and behavioral screening, they will want to ensure that their policy is updated to reflect procedures for notifying families, opting out, reviewing data, and referring to indicated interventions or health care providers. Documenting these practice changes in policy can also help to encourage use of the new practice, as there is now some accountability behind it via school policy. Finally, it enhances sustainability of practices as new school personnel come into the system.

Now that you have built foundational knowledge of the WSCC model and background information guiding this blueprinting process, it is time to apply that information to your setting!

## Setting Up for Success Using the 3Es

The 3Es of whole child systems implementation, briefly introduced here and described in the next section, are grounded in implementation science, and are designed to effectively guide your system through *exploration* and *planning* activities that seamlessly transition to *implementation* and, ultimately, *sustainment* of whole child initiatives. Taking these steps can help to ensure that initiatives are aligned with your school or district's strengths and needs, and are well positioned for coordinated and sustained implementation.



### Exploring Context

Identifying strengths and needs related to educating the whole child

Goal: to recognize existing areas of strength and need and how existing work aligns with the WSCC model



### Evaluating Directions

Examining opportunities to strengthen whole child initiatives by implementing, refining, or de-implementing

Goal: to prioritize areas of focus and identify potential directions



### Establishing Actions

Planning for success by identifying action steps, addressing anticipated barriers, and creating plans for monitoring implementation

Goal: to define specific goals, consider potential barriers, plan action steps, and measure progress

## SECTION II: THE 3ES OF WHOLE CHILD SYSTEMS IMPLEMENTATION

### STEP 1: Exploring Context



## Exploring Context

Identifying strengths and needs related to educating the whole child

Goal: to recognize existing areas of strength and need and how existing work aligns with the WSCC model

As noted previously, sustainable change for any initiative is not automatic. We know that change does not happen quickly! Planful work is a necessary prerequisite to enabling sustained change. Thus, in the first part of this planning blueprint, you will gather background information to inform planning efforts for implementation. We call this stage **exploring your context**.

Activities in this section address our key goals in this stage:

1. Identifying existing practices that address WSCC domains
2. Assessing current and future needs

**TIP**



If you are new to the WSCC model and have not already done so, we encourage you to read the [Introduction to the WSCC Model](#) and complete [Activity 2 – Build and Map WSCC Knowledge](#) to learn important definitions and foundational principles of engaging in this work.



## Activity 3 – Taking Inventory of Your Resources

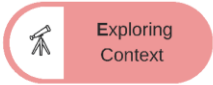
Anticipated time needed to complete this activity: 30 minutes

Exploring your context begins with conducting a *resource inventory*, which involves identifying all potential resources that are available to you in your setting. This helps you to make appropriate decisions about whether to adopt a new practice (so you don't end up with too many initiatives at once!) and can help you capitalize on available resources (Sanetti & Collier-Meek, 2022).

As noted by Sanetti and Collier-Meek (2022), taking inventory of your resources involves listing out:

- Practices (e.g., initiatives, curricula)
- People (e.g., district/school staff, community partners)
- Assets (e.g., programs, services, funding, etc.)

In [Activity 3 – Taking Inventory of Your Resources](#) we offer space to inventory your resources in each WSCC domain. A completed example is provided below.



### ACTIVITY 3 – TAKING INVENTORY OF YOUR RESOURCES


**Time to Complete:** 30 minutes

**Goal of Activity:** To document your setting's existing practices and resources related to each WSCC domain.

---

**Instructions**

1. Identify your existing practices that align with WSCC domains.
2. For each practice, identify who is available to or currently implements that practice, along with what training they have or need.
3. Then, for each domain, identify any assets that might support your practice efforts. Examples include state or district initiatives, new legislation, available grant funding, or professional learning opportunities.

Domain	Practices <i>List out all current initiatives, curricula, etc. for each WSCC domain.</i>	People <i>Who is available to or currently implements this practice? What training do they have or need?</i>	Assets <i>What programs, services, funding, etc. are available in our setting? How can we use these resources?</i>
	<ul style="list-style-type: none"> <li>• All students have 1 hour of physical education per week;</li> <li>• School personnel participate in group games during recess;</li> <li>• Monthly flyers with community-based physical activity events sent home;</li> <li>• No professional development/staff training;</li> <li>• Working on developing a Comprehensive School Physical Activity Program (CSPAP)</li> </ul>	<ul style="list-style-type: none"> <li>• Physical education teachers organize student activities;</li> <li>• Instructional staff oversee recess periods on a rotating schedule basis</li> </ul>	<ul style="list-style-type: none"> <li>• Funding for the physical education curriculum is allotted for in school and district budgets;</li> <li>• Teachers have traditionally overseen recess duties on a rotating basis</li> </ul>

Adapted from Sanetti & Collier-Meek. (2022). Sustaining practice 101: Resource mapping. Authors. Taking inventory of Your Resources | [cscsch.uconn.edu](https://cscsch.uconn.edu)

## **School Team Case Study:**

### **Hillside's Efforts to Identify their School's Existing Resources**

At their next meeting, the Hillside Academy Whole Child Team works together to identify existing practices that align with each WSCC domain. Ms. Lee, the school nurse, agrees to jot down everyone's ideas on the Resource Inventory Worksheet. The group determines who is currently involved (or could be involved) in the implementation of each practice, along with what training they have or need. Then, for each domain, the team records existing resources that currently or could support these practices.

In completing the inventory, the team realizes that Hillside Academy has many student-oriented practices, but few initiatives related to Employee Wellness. The team was surprised to see that they could only identify two employee wellness initiatives. The first involves team building activities at the beginning of each of their staff meetings. Second, administrators hold a "Staff Appreciation Potluck" for the staff a few times each year.

The team sees high levels of burnout among staff in the building. They wonder if a focus on employee wellness may be a valuable focus for their work, and agree to take a deeper dive into this at their next meeting.

## **District Team Case Study:**

### **Elmwood's Inventory of Existing District Practices**

At their next monthly meeting, the executive council of the district wellness team works together on Activity 3 – Taking Inventory of Your Resources. The team draws on their respective expertise to catalogue current district initiatives and offerings. Assistant Superintendent Taylor and Nursing Supervisor Mrs. Moore are able to identify existing initiatives and resources related to Behavioral Supports, Social and Emotional Climate, and Employee Wellness, but decide that an additional next step is to share the completed activity with the full wellness team for input. This will help to identify any additional initiatives or resources they have missed and generate a full team discussion about potential areas for improvement.

Before proceeding, consider the following reflection questions.

## REFLECT



1. Which WSCC domains were more challenging to inventory? Which were less challenging to inventory?
2. When stepping back to think about the activity, what excited you about your resource inventory?




### Activity 4 – Exploring WSCC Practices in Context

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. 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 identify potential areas of focus as you proceed through the 3Es.

In [Activity 4 – Exploring WSCC Practices in Context](#) you will rate implementation of recommended practices for each domain. Then, you will provide a brief, data-based 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 your practices with WSCC.

Domain	Item	Rating			Justification
		not yet	sort of	got it!	
	1. Avoid physical activity as a disciplinary consequence and ensure that all students have equal access to participation in physical activity.	✓	✓	✓	<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.				

## School Team Case Study:

### Hillside's WSCC Practices Ratings

Hillside's Whole Child Team begins to take a closer look at their WSCC-aligned practices. Dr. Yusuf, the school psychologist, pulls up Activity 4 - Exploring WSCC Practices in Context so that the team can examine their practices across WSCC domains. The team works together to assign a rating based on their current implementation of recommended practices for each domain. The team makes sure to support their ratings 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, referencing the data that was discussed.

The Whole Child Team is pleasantly surprised to find that they rated some of the domains so favorably! Many of their ratings indicated partial implementation, which they also found to be encouraging. What stood out, however, was their 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.

## District Team Case Study:

### Introducing Elmwood School District's Practice Blueprint Work

In looking ahead at Activity 4 – Exploring WSCC Practices in Context, Assistant Superintendent Taylor recognizes that this would be a great activity for the full wellness team to do at their next quarterly meeting. This will allow for the expertise of all members to be used and for a team conversation about areas of strength and opportunities for improvement. In the meantime, co-chair Ms. Hernandez confirms the new members' willingness to join the district wellness team and availability to attend the next quarterly meeting.

Ms. Hernandez and Assistant Superintendent Taylor kick off the next quarterly meeting by sharing the executive council's mapping of the district's expertise across the WSCC model (Activity 2) and their Resource Inventory (Activity 3). The group spends 10 minutes reviewing the resource inventory, and is able to add some additional initiatives and assets to the document. Next, Assistant Superintendent Taylor introduces Activity 4 – Exploring WSCC Practices in Context to the group. She suggests that they split up to complete the domains most relevant to their expertise, and then to report back on how the district is doing in comparison to best practices.

Team members work individually or in small groups to complete sections of Activity 4. Tenth-grade student, Lucas, chooses to work with the District Psychologist Dr. Williams on rating Social and Emotional Climate and Behavioral Supports. Seventh-grade student, Ava, chooses to work with District Health and Physical Education Director Mr. Thomas on rating Physical Education and Physical Activity, and parent, Ms. Williams, decides to rate Family Engagement with Assistant Superintendent Taylor. Superintendent Francis, Parks and Recreation Director Ms. Adams, and Department of Health official Mr. Wilson work together to rate Community Involvement.

The full team then comes back together to review each section. Those who rated each section share their ratings and rationale. Other team members ask questions about potential areas for improvement but primarily focus on taking the opportunity to take stock of their current practices (and learn more about domains that are not their areas of expertise!). The team notes high ratings in Social and Emotional Climate, Behavioral Supports, Health Services, and Nutrition Environment and Services. They note specific opportunities for improvement in Physical Education and Physical Activity, Family Engagement, and Community Involvement.

## 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?

## TIP



Activity 4 – Exploring WSCC Practices in Context does not provide a full assessment of each WSCC domain. Instead, it gives you a snapshot of how you are doing across all 10 WSCC domains. In Activity 6 – WellSAT WSCC in Practice and Identifying Potential Directions, you will more thoroughly assess one WSCC domain of focus. This will help you to generate more specific ideas of practices to improve as well.

## STEP 2: Evaluating Directions



### Evaluating Directions

Examining opportunities to strengthen whole child initiatives by implementing, refining, or de-implementing

Goal: to prioritize areas of focus and identify potential directions

We refer to the second step in WSCC Practice Blueprinting as **evaluating directions**, as you will complete activities that allow you to evaluate opportunities, or directions, for strengthening whole child practices in your setting. After completing these activities, you should have clear priority areas of focus and ideas about future directions to address in the final step.



#### Activity 5 – Big Picture WSCC SWOT Analysis

Anticipated time needed to complete this activity: 20 minutes

If you have experience in the corporate world, you may have conducted SWOT analyses. A SWOT analysis allows us to identify **strengths**, **weaknesses**, **opportunities**, and **tensions**. In WSCC practice blueprinting, SWOT analysis is used to identify priority areas of focus. This allows to improve and refine practices related to the whole child.

There is not one right way to complete your Big Picture WSCC SWOT Analysis. Instead, [Activity 5 – Big Picture WSCC SWOT Analysis](#) is meant to be a tool for processing Activity 4 – Exploring WSCC Practices in Context. The example below shows how a school team completed their Big Picture WSCC SWOT Analysis.

## SWOT Analysis: Strengths, Weaknesses, Opportunities, and Tensions

Strengths	Weaknesses
<ul style="list-style-type: none"> <li>● Nutrition Environment                             <ul style="list-style-type: none"> <li>○ Farm-to-School programs enable the use of fresh produce</li> </ul> </li> <li>● Safe Environment                             <ul style="list-style-type: none"> <li>○ Hillside's moisture, air, water quality, thermostats, smoke alarms, and humidity levels are assessed annually</li> </ul> </li> <li>● Behavioral Supports                             <ul style="list-style-type: none"> <li>○ The Student Support Team (SST) consistently relies on data-based decision-making practices to effectively support students</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>● Employee Wellness                             <ul style="list-style-type: none"> <li>○ No current plans currently exist related to the practice of staff wellness</li> </ul> </li> </ul>
Opportunities	Tensions
<ul style="list-style-type: none"> <li>● Employee Wellness                             <ul style="list-style-type: none"> <li>○ The WSCC Leadership Team sees the lack of initiatives geared towards staff well-being as an opportunity to build a more supportive framework that uses staff input and perspectives.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>○ Potential challenges to updating and integrating practices include time constraints, staff buy-in, and funding.</li> </ul>

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Big Picture SWOT Analysis | [csch.uconn.edu](https://csch.uconn.edu)

### School Team Case Study:

#### Hillside's Big Picture WSCC SWOT Analysis

The next Whole Child Team meeting begins with the team working together to complete a Big Picture WSCC SWOT Analysis.

Drawing on their Resource Inventory and Exploring WSCC in Context activities, the team identifies the domains of Nutrition Environment, Safe Environment, and Behavioral Supports as strengths of Hillside's current practices. Hillside has a strong agricultural focus and Farm-to-School program that has allowed for students to plant, cultivate, and eat local products. Students frequently have access to fresh air and opportunities to improve their environment by maintaining the school garden or picking up trash in and around the building. The building's moisture, air, water quality, temperature, and humidity levels are assessed each year. Teachers use positive behavioral support practices appropriately according to fidelity data, and office referrals have decreased substantially since Hillside made a concerted effort to increase the use of positive behavioral support practices several years ago.

Although there are opportunities for improvement across all domains, the Whole Child Team continues to feel that Hillside's main area of weakness and opportunity is within the Employee Wellness domain. The school does not have many current initiatives aimed at Employee Wellness, and team members feel that morale is low. In addition, Mrs. Wu points out that previous Employee Wellness initiatives may not have been accessible to all staff. For example, certified staff have benefited while paraprofessionals and lunch staff have not due to contract restrictions. However, the team isn't entirely sure how to best improve Hillside's Employee Wellness initiatives.

## District Team Case Study:

### Elmwood's Big Picture SWOT Analysis

At their next monthly meeting, Elmwood's executive council takes a moment to celebrate all that they accomplished in their previous quarterly meeting. The full team was highly engaged in rating the district's current practices across the WSCC model and offered insightful reflections on areas of strength and potential areas for improvement.

The executive council uses their Resource Inventory and Exploring WSCC in Context to complete a Big Picture SWOT Analysis. They list Social and Emotional Climate, Behavioral Supports, Health Services, and Nutrition Environment and Services as strengths in Elmwood's current district practices. They note weaknesses and opportunities for improvement in Physical Education and Physical Activity, Family Engagement, and Community Involvement. Specifically, they do not have any district-wide physical activity events for students and families to participate in, do not have sufficient after-school activities to meet childcare needs in the community, and do not evaluate their existing family engagement efforts. Through discussion, the team feels that physical activity might be their biggest area in need of attention. This has been identified as a priority for the district in their 5-year strategic plan and could be integrated with opportunities for greater family engagement and community involvement. The executive council decides to share their SWOT analysis and a brief summary of their discussion with the rest of the district wellness team via email, and to ask for their brief feedback on this potential area of focus.

**After** completing your Big Picture WSCC SWOT analysis, we recommend **identifying WSCC domains for follow up** (e.g., those identified as weaknesses or opportunities).

Then, we recommend choosing one domain of focus for the remainder of your blueprinting work. We hope that you will **complete the blueprinting activities multiple times**; for this first pass, **we suggest choosing one WSCC domain** as a manageable starting place. Then, you can return to blueprint for additional domains that are areas of weakness and opportunity.

To streamline your work and optimize the potential for successful implementation, you might consider choosing a domain that is aligned with current school, district, or state areas of focus. In our work with schools, we have found alignment with school and district priorities to be a key facilitator of successful and sustainable implementation. If you have not already done so, review your school or district's strategic plan (sometimes called strategic priorities or school or district improvement plan) to see how it relates to WSCC and areas identified in your Big Picture SWOT Analysis.

## TIP



If you have not already done so, we encourage you to read the [What Do We Mean by Whole School?](#) to learn why alignment with school and district priorities can be so valuable for effective implementation and sustainment of WSCC initiatives.

## REFLECT



1. What WSCC domains did you identify as areas that you would like to follow up on?
2. Which WSCC domain will you focus on for the remainder of this pass at blueprinting? How and why did you choose this domain?



## Activity 6 – WellSAT WSCC in Practice and Identifying Potential Directions

Anticipated time needed to complete this activity: 20-30 minutes

Now that you have identified your priority WSCC domain of focus, you are ready to take a deeper dive into assessing your practices in this domain and considering next steps to strengthen those practices in [Activity 6 – WellSAT WSCC in Practice and Identifying Potential Directions](#). In this activity, you will complete a more thorough assessment of



## School Team Case Study:

### Hillside's WellSAT WSCC in Practice and Identifying Potential Directions

Hillside's team is relieved to see that they will further assess their efforts in Employee Wellness as this may give them additional ideas for how to improve those efforts. The team uses the first portion of their meeting to complete the Employee Wellness section of WellSAT WSCC in Practice. The team identifies strengths in their school and district's recent emphasis on employee wellness, availability of employee assistance programs through human resources, and environmental modifications that support healthy lifestyles (e.g., access to drinking water, healthy staff meal options in the cafeteria, and employee standing desks, as requested).

The team identifies areas of improvement related to promoting a positive workplace climate and gathering employee input in the design and delivery of employee wellness initiatives. Using their WellSAT WSCC in Practice results and knowledge of their setting, the team brainstorms four potential directions for their work:

- (1) **Soliciting staff input** about desired employee wellness initiatives.
- (2) Sponsoring an **employee wellness fair** during PD time.
- (3) Providing **childcare for staff** during evening parent-teacher conferences.
- (4) **Forming a committee** dedicated to monitoring employee wellness.

## District Team Case Study:

### Elmwood's WellSAT WSCC in Practice & Potential Directions

The executive council heard back from the majority of the wellness team members and all are in agreement that Physical Education and Physical Activity is an important priority area of focus for the team. The executive council uses their next monthly meeting to complete Activity 6 - WellSAT WSCC in Practice and Identifying Potential Directions. The team works together to complete the Physical Education and Physical Activity section of WellSAT WSCC in Practice, which surfaces additional areas of strength and opportunities for improvement in Elmwood's current practices.

The district has K-12 physical education curriculum that is aligned with national standards and implemented consistently by licensed teachers. The district also has at least 20 minutes of recess for all elementary students and shared-use agreements with community providers for access outside of school hours. The district's recent focus on physical activity has specifically included professional learning for all staff on opportunities to incorporate physical activity into the curriculum and school day.

The assessment also highlighted some opportunities for improvement. For example, students only have one block of physical education per week, which does not meet the recommended number of weekly minutes of physical education for students. There are also limited opportunities for students to engage in physical activity before and after school, and limited district-wide opportunities for family engagement in physical activity events.

The executive council brainstorms three potential directions:

1. Adding an **additional physical education class** for students, beginning with students in grades K-2.
2. Bringing back **intramural sports** for students in grades 3-12 to increase opportunities for after-school physical activity (and increase childcare offerings).
3. Hosting an annual **district-wide fun run** to increase family engagement and raise funds for physical education and physical activity equipment (e.g., recess equipment).

The team decides to share their WellSAT WSCC in Practice results and these potential directions with the full wellness team at their next quarterly meeting. They anticipate this might yield some additional brainstorming or refinement of ideas, and help to determine next steps.

Before moving onto Establishing Actions, consider the following reflection questions:

## REFLECT



1. Do you expect that these practices will bring you closer to your desired outcomes in this domain?
2. In the next activity, you will solicit input from others in your setting about these potential directions. Who would be affected by these potential directions? (e.g., students, families, staff) How might you collect their perspectives about the potential changes?

## TIP



WellSAT WSCC in Practice focuses on WSCC practices broadly. To consider WSCC practices at each tier of implementation (universal, targeted, select), see [Appendix C – Examining Tiered Supports](#). There you will find guidance on considering WSCC practices at each tier of implementation and activities for considering opportunities to strengthen practices in each tier.

## Establishing Next Steps

In Activity 6 – WellSAT WSCC in Practice and Identifying Potential Directions, you concluded by recording potential directions for strengthening WSCC work in your setting. Now it is time to solicit input from key groups in your setting. Key groups may include students, families, staff, or community members. **The support of these groups is crucial to successful initiatives.** If we are considering having staff adopt new practices, do they see value in this change? Are the new practices aligned with community values? We want to be sure that there are generally positive attitudes about the potential change across key groups (note: we will almost never get 100% support, but 80% support is often used as a benchmark to indicate sufficient support to move forward with school-based initiatives).

When considering potential directions, it is also important to consider opportunities for de-implementation.

## De-Implementing: Opportunities to Reallocate Resources

When embarking on this blueprint, you may not have considered that we were going to ask you to consider taking practices away. However de-implementation is a key piece of implementation because it frees up resources for more promising initiatives.

De-implementing is desirable when initiatives are not having the intended impact or are not positioned for effective, efficient, and sustainable implementation. De-implementation frees up resources (e.g., time, staff, energy, money) that can be allocated towards more promising work.

Sample key questions that we consider here are:

- Are there any practices that you do not have sufficient resources to implement?
- Are there any practices for which the intended outcomes are not being achieved (for everyone, or for specific subgroups)?

- Are there practices that are regular sources of tension amongst members of the school community?

Evidence for Learning (2020) identifies four types of de-implementation:

- Reverse: it's not working anywhere
- Reduce: it's working for some sub-groups, but not all
- Replace: it's not working, but the problem it was trying to address still exists
- Rethink: it's not working or has achieved its desired outcome and should be de-implemented to make room for something else

In [Appendix D](#), we offer examples of each type of de-implementation. It is important to note that de-implementation often requires **learning** and **unlearning**. For example, staff may need to learn new curriculum or unlearn old curriculum. Consequently, it is important to identify the learning and unlearning that each de-implementation initiative will require. Because of the time this shift in practices will require, **de-implementation is a process, not an event**.

To learn more about de-implementation, we encourage you to consult the resource in [Appendix D](#).

Now that we have considered the importance of soliciting input from key groups in your setting and potential opportunities for de-implementation that would free up resources for your work, it's time to gather some information! So far, ideas have primarily been generated by your team. It's time to gather information and input from others in your setting.

There are a number of ways to solicit information and input. For example, consider:

- What data might speak to the need for this potential direction?
- Does the potential direction align with school or district priorities?
- What resources on best practices can you consult to learn more?
- What voices in the school community can help you determine if this should be a priority? (e.g., families, teachers)
- Which intended implementers can you talk with about potential buy-in and feasibility?
- Are there practices that could be de-implemented to free up resources because they are not achieving the desired outcomes?



## Activity 7 – Gathering Information to Prioritize Potential Directions

Anticipated time needed to complete this activity: 30-45 minutes

Now that you have identified potential directions for your WSCC work, you are ready to gather information and input from others in your setting about these potential directions in [Activity 7 – Gathering Information to Prioritize Potential Directions](#). This will help you to determine if you have adequate buy-in, if the ideas align with strategic priorities in your school or district, and the ideas are feasible for implementation at this time. Learning that your setting is not ready for an idea is just as valuable as learning it is – it can save a lot of resources to proactively identify that the time is not right for a certain idea! In this activity, you will solicit input from others, gather relevant data, and consult resources to learn more about what it would take to implement this idea in your setting.

In consultation with your team, consider:

Potential direction: **Hosting an employee wellness fair**

- A. What data might speak to the need for this potential direction?
- B. Does the potential direction align with school or district priorities?
- C. What resources on best practices can you consult to learn more?
- D. What voices in the school community can help you determine if this should be a priority? (e.g., families, teachers)
- E. Which intended implementers can you talk with about potential buy-in and feasibility?
- F. Are there practices that could be de-implemented to free up resources because they are not achieving the desired outcomes?

<b>Record your action items.</b> (For example: <i>review attendance data, speak to nurse regarding current challenges</i> ) <b>Then, record notes on each of your action items. Attach additional information if needed</b> (e.g., <i>table with data, resource on best practices</i> )
A. Employee survey (google form) - see if staff request informational resources that could be shared at an employee wellness fair Informal conversations with staff - would this be of interest?
B. Aligns with strategic plan to focus on employee wellness. Would need to find out if there's available contractual (PD time) in which it could be held.
C. Speak with colleagues in neighboring districts who have hosted employee wellness fairs. Check with human resources for any best practices.
D. Staff - see "A" above.
E. School and district administrators. School administrators suggest an employee wellness fair might have greater reach if held at the district level. They are open to sharing the idea with district administrators at an upcoming leadership meeting.
F. This could happen during PD time - choose time that is not yet well-spent.

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Gathering Information |

## School Team Case Study:

### Hillside's Gathering Information

After a thoughtful conversation about how to best solicit staff input, the team decides to send a brief, voluntary survey soliciting feedback on current and potential Employee Wellness initiatives and the potential focus of this team's efforts on Employee Wellness. The school psychologist, Dr. Yusuf, offers to draft the survey for the team's review and to then send the survey out to staff via Google Forms. In addition to sending the survey, the team also decides to explore feasibility of (a) hosting an employee wellness fair during school PD time and (2) providing childcare coverage for teachers during parent-teacher conferences as many of their teachers have school-age children that are not old enough to be left unsupervised.

The survey suggests that staff were generally in favor of the Whole Child Team focusing their efforts on improving Employee Wellness initiatives. Staff members expressed feeling overwhelmed trying to balance their professional responsibilities with life outside of school. Teachers commented on the number of evenings they feel obligated to be at school for school events, and how stressful this is with young children and other responsibilities outside of school. When asked about the employee resources sent by human resources (e.g., Employee Assistance Information, retirement planning information), staff rated the information as not helpful. Some staff elaborated to explain that the emails were dense and they rarely had time to prioritize their attention to these topics. A few staff members suggested PD time be dedicated to explaining this information to staff so they could actually use it to reduce stress. When asked if they would be interested in participating on an employee wellness committee, staff overwhelmingly declined, saying they were already overburdened with work responsibilities and other commitments.

Conversations with administrators yielded additional information about the feasibility of hosting an employee wellness fair. Administrators were generally supportive of the idea, but wondered if it should be hosted at the district level rather than school level to allow for more staff to benefit. This would also allow for a wider net to be cast in soliciting vendors or exhibitors for the event (i.e., drawing from all school's contacts and resources, rather than just one school).

Administrators were supportive of providing staff childcare for parent teacher conferences and cognizant of the stress that evening events at school put on staff. Dr. Greenberg suggested that National Honor Society students might be interested in providing childcare for service hours. Principal Smith was confident he could provide a space for the childcare to be provided. Although they weighed the idea of opening the childcare option to all families in the school community, they decided to limit it to the children of staff to start.

Equipped with input and information, the team prepares for their next meeting.

## District Team Case Study:

### Elmwood's Gathering Information

The first step in Elmwood's Gathering Information was for the executive council to bring their potential ideas to the full district wellness team. This yielded a good deal of enthusiasm and brainstorming, as well as some cautions, about each of the ideas. For example, the team was very enthusiastic about bringing intramurals back, but worried about getting it off the ground for grades K-12 all in one year. The facilities director also cautioned about limited available indoor space due to custodial shortages.

Next, the full team brainstormed additional input and data they could collect to weigh these potential directions. Team members agreed to split up the work and email the information they gathered to the co-chairs by the end of the month.

Mr. Thomas consulted the elementary physical education schedules and spoke with elementary principals and physical education teachers to gain their perspectives on adding an additional physical education class for each Kindergarten, first grade, and second grade classroom. In reviewing schedules, he concluded that the district would need to hire additional physical education teachers to add these additional sections. This was confirmed when speaking with building principals, and he also learned that in some schools, space would be a challenge as the gym was also used by physical and occupational therapists to provide related services. Physical education teachers agreed with the value of the idea, but reinforced that their current schedules would not allow for additional class sections.

Next, Assistant Superintendent Taylor gathered old documents about the intramural sports program, including which sports were offered (5 sports across fall, winter, and spring), who coached, and how the schedule was organized. She also confirmed that coaching stipends were still listed in the teaching contract, which would allow for coaches to be paid if funds could be identified. Parks and Recreation Director, Ms. Adams, spoke to the Parks and Recreation Board of Directors about opportunities to support or collaborate on the project. Ms. Williams, a parent, agreed to gauge family interest by floating the idea in closed PTO social media groups, reinforcing that the project was still in early planning stages. Ms. Williams reported back high levels of interest across all grade levels, but particularly among elementary-school families. Ava and Lucas shared the idea with student groups at the middle and high schools, and Ava, in particular, reported strong interest from middle school students. Lucas reported that because the high school had existing sports teams, some students were already committed to those.

Lastly, Nursing Supervisor Mrs. Moore gathered information from building principals about school-based physical activity opportunities for families. She also reviewed the city calendar for the following spring to see what other activities were being planned and found that a local non-profit organization was organizing a 1-mile family fun run and 5K to seed a new scholarship fund.

## STEP 3: Establishing Actions



### Establishing Actions

Planning for success by identifying action steps, addressing anticipated barriers, and creating plans for monitoring implementation

Goal: to define specific goals, consider potential barriers, plan action steps, and measure progress

Whole child systems implementation blueprinting concludes with **establishing actions** for implementation. You have:

- formed a Whole Child Team to drive this work,
- explored your context by completing a resource inventory, and reflecting on alignment with whole child practices,
- and evaluated directions in WSCC practices by analyzing strengths, weaknesses, opportunities, and tensions in your setting, and gathered information to make decisions about priority next steps.



#### Activity 8 - Confirming Congruence

Anticipated time needed to complete this activity: 20-30 minutes

Establishing actions for whole child systems implementation begins with confirming the potential for the *congruence* and *sustainability* of identified strategies, or practices. Let's confirm that you are set up for success with each practice under consideration. In this activity, you will rate your readiness to engage in each practice change you are considering. We suggest limiting to 3-5 practices. You will land on whether to pursue, pursue with modifications (e.g., make tweaks, shift), wait to implement, or reject each potential practice.

Then, we will assess what resources you would need to implement this new or revised practice. The goal here is to plan for success by anticipating resources and action steps you'll need to implement this practice. You may discover that one or more of your potential practices are going to be more difficult to implement than initially anticipated or that another practice is going to be well supported by existing resources and policies.

Potential barriers do not mean that you should abandon the practice; instead, between this and the next activity, you will proactively plan to address any identified barriers.

A completed example of [Activity 8 – Confirming Congruence](#) is shown below.

Potential Direction: Inviting Financial Planner to Provide Staff PD	High (5 points)	Med (3 points)	Low (1 point)
<b>CONTEXT: NEED</b> Do we have data indicating need? For example: Is this a substantial issue for students? Do families, the community, and staff also perceive need?	4		
<b>CONTEXT: FIT</b> Is this a priority for our setting? How does it align with our district's priorities or strategic plans? Is it aligned with community values?	5		
<b>STRUCTURE: RESOURCES</b> Do we have the necessary resources? For example: data systems, curriculum, space, staff	4		
<b>STRUCTURE: READINESS FOR USE</b> Is there qualified professional learning available (staffing, supervision, coaching, training)? For example: Can leadership and staff gain clear knowledge, skills, and attitudes about the need, rationale, and intended outcomes?	4		
<b>WORK: EVIDENCE</b> Is there evidence supporting match to our intended setting? For example: Is there support for effectiveness, fidelity, cost? Are demonstrated outcomes matched to our intended population?		3	
<b>CULTURE: WILLINGNESS TO IMPLEMENT</b> Are there positive attitudes about the strategy? For example: Do the majority staff perceive value to the strategy? Are intended implementers willing to change current practice to do it?	5		
<b>PEOPLE: ABLE TO IMPLEMENT</b> Do we have appropriate knowledge & skills to implement with fidelity? For example: Do intended implementers have minimum required skills and know how to access support? Do other staff have foundational knowledge to facilitate success?	5		
<b>TOTAL SCORE</b>	27	3	
<b>Action Decision</b> (pursue, modify, wait, reject)	<b>Pursue</b>		

This tool was created based on adaptations from the following sources: (1) Nadler, D., and Michael Tushman. A Model for Diagnosing Organizational Behavior. *Organizational Dynamics* 9, no. 2 (autumn 1980): 35–51. (2) Blase, K., Kiser, L., and Van Dyke, M. (2013). *The Hexagon Tool: Exploring Context*. Chapel Hill, NC: National Implementation Research Network, FPG Child Development Institute, University of North Carolina at Chapel Hill.

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## School Team Case Study:

### Confirming Congruence at Hillside

Using the information they gathered in Activity 7, the Whole Child Team works to complete Activity 8 – Confirming Congruence worksheet for four potential practice changes:

- (1) **Soliciting staff input** about desired employee wellness initiatives.
- (2) Sponsoring an **employee wellness fair** during PD time.
- (3) Providing **childcare for staff** during evening parent-teacher conferences.
- (4) **Forming a committee** dedicated to monitoring employee wellness.

First, the team considers the idea of soliciting staff input about desired employee wellness initiatives. The team considers their recent Google Form survey to staff as a “trial run” of this idea. Using Activity 8 – Confirming Congruence, they find that this practice meets a staff need and aligns with school and district priorities to focus on employee wellness. They agree it requires very little time and resources on the part of administration. Thus, their ratings of “ready and able” across categories are all in the Medium to High range. They ultimately decide to **PURSUE** this practice.

The Team then contemplates the potential congruence of sponsoring an employee wellness fair during PD time. This proposal aligns with school and district emphasis on employee wellness, but as learned in Activity 7 – Gathering Information, administrators wonder if it should be offered at the district level rather than the school level. Ms. Wilcox reminds the team of a staff suggestion to share information from human resources in a PD session rather than emails and wonders if bringing a financial planner to the school might be well received. The team decides to rate this idea instead, as it would be responsive to staff feedback and show interest in staff’s financial well-being. Everyone on the Whole Child Team is enthusiastic about the idea. They give Medium to High ratings for “ready and able” to implement across categories. The team ends up deciding to:

**PURSUE WITH MODIFICATIONS** - the initial idea for an employee wellness fair is better suited as a district event, but instead, the team will bring in a financial advisor to advise staff on options related to retirement savings, college planning, and other related financial topics.

Then, the team analyzes the logistics of providing childcare coverage for teachers during evening parent-teacher conferences. Dr. Greenberg has confirmed with the National Honor Society advisor that the students would be interested and available to provide childcare for the two evenings of fall and spring conferences. Ratings fall in the Medium-to-High range for “ready and able” across categories. The team decides to **PURSUE** this practice.

Finally, the team assesses the idea of forming an Employee Wellness Committee. When they get to the ‘Culture: Willingness to Implement’ section, team members reiterate that most staff will not be willing or able to serve on the committee. Further, the staff most willing and able to form the committee are already members of the Whole Child Team, so

a separate committee would be redundant. Thus, they provide ratings in the “Low” column for the team’s readiness and ability to take this on, and they decide to:

**REJECT** the practice – The Whole Child Team exists now, and it would be redundant to add a committee given representation across staff roles.

After completing the activities, the Whole Child Team determines that they have the need, resources, and support to successfully solicit staff input regarding employee wellness initiatives (PURSUE) and provide childcare to staff during evening parent-teacher conferences (PURSUE). Although they are going to suggest an employee wellness fair to district leadership, they decide they are well-positioned to bring a financial advisor to school during a staff professional development session (PURSUE WITH MODIFICATION). They decide to REJECT plans to form a separate Employee Wellness committee. The team expresses how helpful it was to complete the Confirming Congruence worksheet, as it allowed them to narrow their focus to practices that are feasible to implement at this time and to modify others to increase opportunities for success.

## District Team Case Study:

### Confirming Congruence in Elmwood

Using the information gathered in Activity 7 – Gathering Information to Prioritize Potential Directions, Elmwood’s executive council works in their next monthly meeting to complete Activity 8 – Confirming Congruence worksheet for three potential practice changes:

1. Adding an **additional physical education class** for students, beginning with students in grades K-2.
2. Bringing back **intramural sports** for students in grades 3-12 to increase opportunities for after-school physical activity.
3. Hosting an annual **district-wide fun run** to increase family engagement and raise funds for physical education and physical activity equipment (e.g., recess equipment).

First, the executive council assesses the idea of adding an additional physical education class for students, beginning with students in grades K-2. Using Activity 8 – Confirming Congruence, the group gives high scores in the areas of “Context: Need” and “Context: Fit” - the idea is aligned with best practices and district priorities. Yet, they give much lower scores in the area of “Structure: Resources.” As identified in Activity 7 – Gathering Information, the district lacks adequate staffing and space to implement the initiative as intended. Because of these resource limitations, the group is also concerned that “Culture: Willingness to Implement” will be low as staff will not have the necessary resources to implement as intended. Thus, the council decides to:

**WAIT** on the practice – the District is not currently in the position to hire additional physical education teachers that would be needed to enact this practice.

Next, the executive council considers the idea of bringing back **intramural sports** for students in grades 3-12 to increase opportunities for after-school physical activity. The group gives high ratings in the areas of “Context: Need,” with a note about specific need identified at the elementary and middle school levels. They wonder if high school students might be interested in paid or volunteer opportunities as assistant coaches. Next, the group gives a high score to “Context: Fit” because of its high alignment with the district’s 5-year strategic plan to increase opportunities for student physical activity. Next, they give a medium score to “Structure: Resources” because of the Facilities Director’s concern about limited indoor space and the need to onboard coaches across grades and sports. The group gives high scores to “Culture: Willingness to Implement” and “People: Able to Implement” given high buy-in across the district and Mr. Thomas’ and Ms. Adams’ interest in co-leading the relaunch of the intramural program. Mr. Thomas and Ms. Adams suggest beginning with a pilot year, introducing two sports in the fall and spring seasons, at the elementary and middle school levels, to allow time to fully build the program back. As such, the executive council decides to:

**PURSUE WITH MODIFICATION** – the group is well-positioned to bring intramurals back to the district. It is highly aligned with district priorities, and starting with a pilot version (3 sports at the elementary and middle schools) will allow for a planful rollout. High school students will be invited to participate as assistant coaches.

Lastly, the executive council contemplates hosting an annual **district-wide fun run**. The group gives medium scores to “Context: Need” as there is a need for more opportunities to engage families in physical activity opportunities, but one annual event is not going to completely fill this need. The group gives a medium score to “Context: Fit,” balancing high alignment with district priorities but redundancy with the community event being planned for the following spring. They give a medium score to “Structure: Resources” and “People: Able to Implement” as this initiative would likely require a lot of the same people as would be involved in launching the intramurals program. In addition, the group gives a low score to “Structure: Readiness for Use” as they have not previously held an event like this and would need to engage in a good amount of planning to host it. The executive council decides to:

**REJECT** the practice – the group has learned that it would be redundant with another community event. They also anticipate that investing their time and energy into rebuilding the intramurals program will generate more benefit for students and families.

After completing the activities, the executive council of Elmwood’s district wellness team determines that they have the need, resources, and support to successfully rebuild their district-wide intramurals program for elementary and middle school students, with opportunities for high school students to serve as assistant coaches (**PURSUE WITH MODIFICATION**). They decide to **WAIT** on their idea to increase physical education offerings in the early elementary grades and to **REJECT** their idea of hosting an annual district-wide fun run. The team is excited about how the information from Activities 6, 7, and 8 came together to help them make informed decisions about their next steps.

Before you move onto Action Planning, consider the following reflection questions.

## REFLECT



1. Did Confirming Congruence confirm that you are well positioned to implement each potential practice? Are there any steps you can take to strengthen congruence as you plan for implementation?
2. Did Confirming Congruence reveal any practices that you are not currently well positioned to implement? Will you revisit these in the future? If so, how could you strengthen congruence?

## Planning for Sustained Implementation

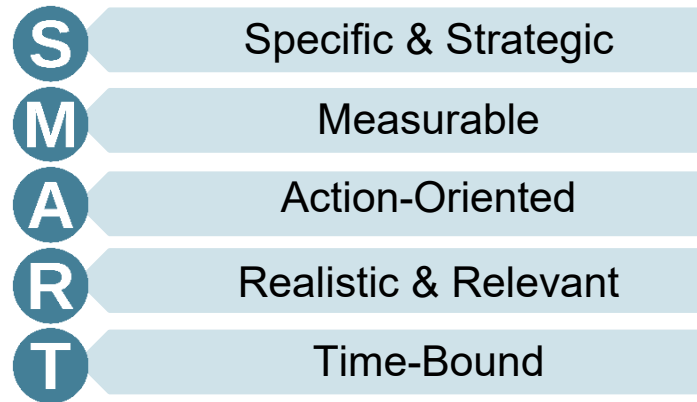
You are almost there! You have explored your context, evaluated your current practices, and identified next steps with strong congruence (“readiness” for implementation). Your next step is to action plan for thoughtful implementation. Before doing so, we want to reinforce a couple of key points:

- Alignment with school and district priorities is a key facilitator to successful implementation and sustainment of whole child initiatives.
- Measuring the process and outcomes of your action plan implementation can help to (1) confirm progress, (2) justify invested resources, (3) inform necessary modifications, and (4) verify if desired results are being achieved.
- Proactively determining the people, resources, and milestones needed for implementation helps to identify potential barriers to success – and to address these ahead of time!
- Progress monitoring implementation helps to ensure milestones are met, any necessary modifications are made, and sustainable implementation occurs!

Next, we share more about creating SMART goals and measuring process and outcomes of action plan implementation. Then, it will be time to action plan!

## Creating SMART Goals

The concept of SMART goals may be familiar to you. The aim in creating SMART goals is to create goals that are:



SMART goals move us from broad or vague goals that are likely to get abandoned when things get busy to action-oriented, measurable, and realistic goals for our setting. SMART goals allow us to envision what success looks like and to plan backwards to reach that endpoint in the specified timeframe. Consider the following potential directions written as SMART goals:

Potential direction (broad idea)	Potential direction (written as a SMART goal)
Conduct staff survey to identify strengths and areas of improvement related to Employee Wellness and collect ideas for initiatives	By March 31, 2026, we will distribute and review the results of an anonymous survey of all faculty & staff to solicit their perspectives on current strengths and ideas for improving Employee Wellness.
Expand membership of district team to include expertise across WSCC domains	We will expand the district wellness team by 4-6 members to ensure team membership includes individuals with expertise across all WSCC domains by February 1, 2026.

Writing SMART goals sets your team up for success in implementing your action plan. As discussed next, measuring the process and outcomes of your action plan implementation can help to confirm your goal has been achieved.

## Measuring Process and Outcomes of Action Plan Implementation

Measuring the process and outcomes of action plan implementation can help to (1) confirm progress towards full implementation, (2) justify invested resources, (3) inform necessary modifications, and (4) verify if desired results are being achieved.

In considering *how* to measure the process and outcomes of your action plan implementation, consider the following question:

*What will we see after you have implemented your action plan?*

Will we see revised curriculum? Will we see new family newsletters? Will we see increased participation in physical education classes? Articulating what we will see after your action plan is implemented helps us to identify the end goal, as well as intermediate milestones we can measure along the way.

We encourage teams to measure both the *process* and *outcomes* of their action plan implementation.

*Process measures* refer to indicators that the action plan is being put into place. These can include meeting notes, lesson plans, or announcements of school events, for example. Measuring *process* helps to show progress towards implementation before outcome data can be collected and can help teams to identify any points where the work gets stalled (e.g., intermediate milestones aren't being met, meeting time to get work done is needed for something else). Process can be measured using meeting notes, drafted materials, or other data documenting the implementation process.

*Outcome measures* refer to indicators of change in student, family, or staff access, participation, performance, or well-being based on the initiative. These might include participation rates, student ratings, or attendance metrics.

Consider the following example:

**SMART Goal:** By March 31, 20XX, we will distribute and review the results of an anonymous survey of all faculty & staff to solicit their perspectives on current strengths and ideas for improving Employee Wellness.

Process measures	Outcome measures
<ul style="list-style-type: none"><li>• Google Form <b>survey</b> created with a combination of open-ended and close-ended questions</li><li>• Email <b>distribution</b> to 100% of faculty &amp; staff</li><li>• At least one <b>reminder</b> email sent</li><li>• <b>Response rate</b> of at least 75%</li></ul>	<p><b>Summary</b> of survey results to be shared out at May faculty meeting</p>

There are many ways to measure process and outcomes. Below are some options to consider as you determine how to measure the process and outcomes of your action plan.

Type of Measurement	Example
Frequency of something happening	At least 2 family engagement events; 3 professional learning sessions
Percentage of participation	80% of students; 75% of staff
Percentage of satisfaction	100 students surveyed & 80 were highly satisfied with the initiative
Creation of a material	Revised adaptive PE curriculum for grades 9-10
Distribution of a material	Monthly newsletter sent to all families in home language
Change over time	25% participation at baseline, 55% participation at year-end
Documentation of scope	Launch intramurals program with 3 sports at all elementary schools

Activity 9 – Action Planning prompts teams to write a SMART goal and articulate plans for measuring process and outcomes of action plan implementation. The completed worksheet examples and case studies below also offer additional examples of SMART goals and measuring process and outcomes.



### Activity 9 – Action Plan

Anticipated time needed to complete this activity: 30-45 minutes

It is time to create an action plan! Using [Activity 9 – Action Plan](#), you will plan to implement the practices you have identified in this blueprinting process. **This worksheet should be completed for each practice you decided to pursue (or pursue with modifications) when completing the Confirming Congruence worksheet.**

Part 1 of the action plan provides an overview of the initiative. Page 1 asks teams to record a SMART goal statement, the WSCC domain(s) to be strengthened by the practice, and a brief description of the goal’s alignment with school or district priorities. On page 2, you will determine the key people, resources, and milestones needed for successful implementation. This planning helps you to proactively identify the resources that will be needed for implementation.



## ACTIVITY 9 – ACTION PLAN

**Time to Complete:** 30-45 minutes

**Goal of Activity:** To create an action plan for each practice change you are going to pursue with plans for progress monitoring and optimizing implementation.

### Part 1: Plan Overview

**Goal Statement:**

Enter your SMART goal. (i.e., specific and strategic, measurable, action-oriented, realistic and relevant, and time-bound)

By May 31, 20XX, we will host a 60-minute professional development session for staff in which a financial planner provides guidance on retirement savings, college planning, and other related financial topics.

**WSCC Domain**

Indicate the Whole School, Whole Community, Whole Child model domain to be strengthened through this action plan.

- Behavioral Supports
- Community Involvement
- Employee Wellness
- Family Engagement
- Health Education
- Health Services
- Nutrition Environment
- Physical Education & Physical Activity
- Safe Environment
- Social & Emotional Climate

**Alignment with District Priorities:**

Briefly describe how your goal aligns with the district's priorities.

Employee Wellness has been identified as a key priority in the school's strategic plan.



Next, Part 2 focuses on measurement of impact. Impact can be assessed through both process and outcome measures. *Process measures* refer to indicators that the action plan is being put into place. These can include meeting notes, lesson plans, or announcements of school events. *Outcome measures* refer to indicators of change in student, family, or staff access, participation, performance, or well-being based on the initiative. These might include participation rates, student ratings, or attendance metrics.

### Part 2: Measurement of Impact

Describe how you will measure the impact of this action plan. Include both process and outcome measures. See below for more information.

To be completed when action plan is written:				To be completed during implementation:		
What will you measure?	Is this measuring process or outcome?	How will you measure it? What tools or methods will you use?	Who will be responsible for measuring it?	Baseline Data	Mid-Year Data	End-of-Year Data
Researching credible financial planners	X Process ___ Outcome	Notes, email inquiries, website descriptions	Mr. Maple			
Confirmed date & time for PD	X Process ___ Outcome	Notes, email announcement to staff	Mr. Maple			
# of staff attending PD session	___ Process X Outcome	Meeting attendance	Mrs. Garcia			
Staff satisfaction w/ PD session	___ Process X Outcome	Google form shared via QR code at end of session	Mr. Maple			
Increased financial literacy	___ Process X Outcome	Stories solicited via staff newsletter	Mrs. Garcia			

Add additional rows to the table as needed

Definitions of Process and Outcome Measures	
 <p><b>Process:</b> Indicators of putting the action plan into place</p> <p>Examples: meeting notes, newsletters sent to families or staff, lesson plans, hosting a training</p>	 <p><b>Outcome:</b> Indicators of change in student, family, or staff access, participation, performance, or well-being based on initiatives</p> <p>Examples: increased participation in physical activity, decreased disciplinary referrals, higher attendance at family events</p>

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Part 3 focuses on action steps to drive implementation. Teams are encouraged to identify the action steps that need to be taken to bring the plan to life. Identifying the specific steps—as well as who will be responsible and when they will be completed—increases accountability and helps to proactively identify barriers (i.e., curriculum won't be ready by specified date, school holidays will interfere with hosting an event). These action steps can be revisited and revised over the course of implementation.

Finally, Part 4, allows for progress monitoring of the action plan. Progress monitoring refers to checking in on how implementation is going, including whether timelines are being met, barriers have been encountered, and how the team can problem solve to move forward.

Again, we suggest creating an action plan for **each** practice change being pursued.

## School Team Case Study:

### Hillside's Action Plans

The Whole Child Team works to create action plans for implementing Hillside's new Employee Wellness practices. They write SMART goals for each of their new Employee Wellness initiatives: (1) soliciting input from staff regarding employee wellness initiatives, (2) providing childcare to teachers during evening parent-teacher conferences, and (3) bringing a financial advisor to a staff professional development session.

The team creates an action plan for each of these areas of focus. For each action plan, they identify roles and responsibilities, milestones, and process and outcome measures. For example, the team maps out milestones for scheduling a financial advisor to speak at a PD session and creates both process and outcome measures for the initiative:

- **Process:** Research credible financial planners and gather information regarding scheduling and cost.
- **Process:** Confirm date and time for selected financial planner to present to staff.
- **Outcome:** Number of staff attending financial planner's PD session.
- **Outcome:** Staff satisfaction with financial planner's PD session.
- **Outcome:** Staff-reports of increased financial literacy or new financial literacy behaviors based on PD session.

The team develops similar action plans for soliciting staff input on employee wellness initiatives twice per year and providing childcare coverage during evening parent-teacher conferences. The team is excited about these directions for their Employee Wellness efforts and hopes to see improvements in morale as a result!

## District Team Case Study:

### Elmwood's Action Plan to Rebuild District-Wide Intramurals

Elmwood's executive council works to create an action plan for rebuilding their district-wide intramurals program. Because of her co-leadership in the initiative, Parks and Recreation Director Ms. Adams joins the team's monthly meetings.

The team maps out milestones for confirming sports, space, and coaches to launch registration for the fall intramurals at both elementary and middle school levels. Mr. Thomas begins recruiting coaches, while Ms. Adams works on reserving fields and establishing the fall schedule. The team identifies opportunities to measure the process and outcomes of their work:

- **Process:** Announcement of fall intramurals to families through school and Parks and Recreation communication forums

- **Process:** Registration system established for families to register their student for a specific sport
- **Process:** Number of registered students in each sport, per school, per season
- **Process:** Percentage of registered students attending practices and games
- **Outcome:** Number of minutes of physical activity offered through intramurals program
- **Outcome:** Student, family, and coach satisfaction (measured through a brief survey) with intramurals program
- **Outcome:** School attendance and office discipline rates for students participating in the intramurals program

The executive council plans to share their action plan with the full district wellness team for feedback at their final quarterly meeting. They will discuss potential roles that wellness team members can take in supporting the initiative as well as a plan for progress monitoring implementation next school year.

## REFLECT



1. How did your team address any challenges when completing the Action Plan worksheet?
2. How will you measure both the process and outcomes of your action plan implementation?
3. How often will your team monitor implementation progress?
4. What will your team do if implementation progress is not proceeding as planned for any identified initiatives?

## Celebrating Your Practice Plan

Congratulations – your team has successfully worked through blueprinting for whole child systems implementation! Thank you for your commitment to supporting positive whole child outcomes in your setting. Take some time as a team to celebrate your success!

We know that as the leadership team, each member has contributed effort to this process, and you have solid directions and plans for action. As part of celebrating your success, think about how you might continue to share the work that your leadership team has done with key groups, such as staff, families, administrators, and community partners. Is a representative willing to present at the next faculty meeting?

Can you summarize the steps you've taken into a 1-pager or newsletter to share with families and community partners?

Keeping key groups (e.g., staff, families, administrators, community members) in the loop is an important component of a whole child focus, and your efforts should be known – so be sure to identify what, when, and how often your leadership team will share out updates!

### **School Team Case Study:**

#### **An Update on Hillside's Progress**

Hillside's team capitalizes on their momentum after creating their action plans. They confirm childcare coverage for teachers during parent-teacher conferences and begin publicizing this to staff. Mrs. Wu arranges to borrow some toys from the preschool and elementary schools for the evening, and the National Honor Society advisor provides a list of committed students for the evening.

Mr. Maple also connects with a financial advisor in the community who would be happy to present to teachers at a reduced rate. They schedule the session for an upcoming PD time and begin publicizing to staff, allowing them to submit questions in advance. The team also plans to work with the financial advisor to compile a help document to accompany the PD session (e.g., next steps for verifying beneficiaries on retirement accounts).

Mr. Banerjee sets reminders in his calendar to bring the staff survey back to the team, knowing how important it is to collect staff's feedback and perspectives on Hillside's Employee Wellness efforts. The team tentatively plans to survey staff in October and May of each year to inform their efforts and gain feedback on how things went.

### **District Team Case Study:**

#### **Relaunching Elmwood's District-Wide Intramurals Program!**

Mr. Thomas and Ms. Adams work together to secure space, hire coaches, establish a schedule, and launch registration for fall soccer and lacrosse at both the elementary and middle school levels! Registration numbers are strong and students are abuzz with excitement for the program. Mr. Thomas has enlisted an intern to support the launch of the program and the Parks and Recreation Department was able to co-sponsor the initiative, reducing registration costs for families. Once the fall season is comfortably underway, Mr. Thomas and Ms. Adams turn their attention to planning for the spring season and considering how they might expand the following school year!



## Activity 10 – Advocating for WSCC Policy

Anticipated time needed to complete this activity: 20 minutes

Now that you have completed your blueprinting process for WSCC practices, you may consider shifting to WSCC policy. We recommend completing the blueprinting process for both practice and policy, as this will help paint a picture of the level of coordination across what you are supposed to be doing (policy) and what is actually happening (practice). Ideally, practice and policy changes will occur in parallel.

To help ensure the changes you are making to practices are sustained, you now want to review and update relevant policies to ensure that the messaging is consistent with what you are doing. Remember, documenting these practice changes in policy can also help to encourage use of your new or revised practices, as policy provides structures for accountability. Policy also enhances sustainability of desired practices as new school personnel come into the system.

In this final activity, you will summarize next steps for advocating for WSCC policy changes in your setting.

A completed example of [Activity 10 – Advocating for WSCC Policy](#) is shown below.

### ACTIVITY 10 – ADVOCATING FOR WSCC POLICY

Time to Complete: 20 minutes



**Goal of Activity:** To identify the policy changes that need to be made to align policy with new practices.

#### Instructions:

For each action plan you have created, summarize your system's practice needs and identify potential policy shifts to ensure alignment across practice and policy. Instructions for completing each column are listed in the table below, and the first row provides an example of what information you might choose to include.

<b>Identified Area of Need</b> What did WSCC Practice Blueprinting show as areas of need in your system? List one need per row.	<b>Current State of Policy</b> What is the current state of your system's policy in this area? For example, is there an existing policy? What is the current policy language?	<b>Policy Shifts/Changes for Alignment</b> Are changes in policy language needed in this area to reflect planned changes to practice? If so, what changes need to occur to ensure alignment?
<i>Example: Analysis of Behavioral Supports and Social Emotional Climate revealed a need for a universal positive behavioral support system.</i>	<i>Example: Current policy describes responses to challenging behavior such as minor and major office discipline referrals and reasons for suspension and expulsion.</i>	<i>Example: Discipline policy needs to be revised to align with procedures/language used in positive behavioral support system, with emphasis on proactive as opposed to reactive supports.</i>
Analysis of Employee Wellness revealed a need for practice changes that reflect the unique needs of Hillside staff.	Current School Wellness Policy states: "Hillside Academy will support staff wellness initiatives and promote staff self-care."	The Employee Wellness section of the School Wellness Policy should be revised to emphasize the practice of collecting staff input to inform Employee Wellness initiatives. For example, the policy could be updated to read "Employee Wellness initiatives must be based on input and suggestions from district staff. Twice annually, all staff will be invited to provide feedback on current and desired Employee Wellness initiatives (e.g., through a survey or focus groups)."

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Advocating for WSCC Policy |



## School Team Case Study:

### Hillside's Decisions to Advocate for WSCC Policy

The Whole Child Team has been enthusiastic about improving Employee Wellness practices at Hillside Academy throughout the Blueprinting process. They feel they have made progress in incorporating staff voice in Employee Wellness initiatives and do not want this progress to be lost. Mr. Smith also wants to be sure that Hillside's policies and practices are aligned.

The Team completes the Advocating for WSCC Policy worksheet.

The team realizes that the existing Employee Wellness section of their School Wellness Policy is quite vague: "Hillside Academy will support staff wellness initiatives and promote staff self-care." It is clear to everyone on the team that the policy language needs to be updated. They would like the policy to reflect the practice of collecting staff input to inform Employee Wellness initiatives and to include guidelines for evaluating Employee Wellness initiatives. The team spends some time drafting what this language might be and notes it on their Advocating for WSCC Policy worksheet.

The Whole Child Team reflects on how much progress they have made completing the Practice Blueprint and decides to begin exploring the [Policy Blueprint](#) in their next meeting. The meeting concludes with Mr. Smith recognizing everyone on the team for their amazing work!

## District Team Case Study:

### Elmwood's Opportunities to Update WSCC Policy

Elmwood's intramural program has been highly successful! The district wellness team has been sharing out its success with the Board of Education and the intuitive was highlighted with a cover story in the local newspaper. At one of their quarterly meetings, the wellness team discusses how to continue to build and sustain the program as priorities evolve. The team completes the Advocating for WSCC Policy worksheet.

The team recognizes that out-of-school time is not addressed in its wellness policy. The team identifies this as an opportunity to update their policy to include a focus on offering opportunities for students to be physically active before and after school. Assistant Superintendent Taylor takes notes on the Advocating for WSCC Policy worksheet, and she and Superintendent Francis plan to review the notes in greater depth at an upcoming meeting. Assistant Superintendent Taylor and Superintendent Francis agree that the WSCC [Policy Blueprint](#) might provide a strong framework for their summer work to revise policy.

The team concludes by celebrating all of the work they have accomplished this year with a special shout out to Mr. Thomas and Ms. Adams for leading an effort that added thousands of minutes of physical activity to the lives of Elmwood's students!

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Housed within the UConn Institute for Collaboration on Health, Intervention, and Policy, the mission of the Collaboratory on School and Child Health (CSCH) is to facilitate innovative and impactful connections across research, policy, and practice arenas to advance school and child health. CSCH is committed to social responsiveness in creating change. *More information can be found at [csch.uconn.edu](http://csch.uconn.edu).*



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## **LIST OF APPENDICES**

**Appendix A – Additional Resources**

**Appendix B – Activity Sheets**

**Appendix C – Examining Tiered Supports Worksheets**

**Appendix D – De-Implementation**

## APPENDIX A – ADDITIONAL RESOURCES

In creating this blueprint, we drew from multiple sources and across disciplines, modeling the spirit of coordination and integration! Given that the WSCC model is comprehensive, it was important for us to incorporate guidance that could lead to sustainable systems change. Drawing from the rich history of whole child initiatives, ongoing work in tiered systems of service delivery in schools, and implementation was important. In addition, to guide directions for the blueprint, we relied heavily on the historical context of coordinated school health efforts and current WSCC directions in Connecticut through conversations with over 90 stakeholders (school district and building leaders, school staff, community agencies, state education leaders) (see Femc-Bagwell & Chafouleas, 2017).

Here, we provide some of the resources that we found most helpful to guide our thinking. We emphasize those that are freely accessible to enable your ability to dive further into various topics.

### WSCC MODEL

[Center for Disease Control WSCC Website](#)

Explains the WSCC model and provides resources.

[2015 Special Issue of the \*Journal of School Health: The Whole School, Whole Community, Whole Child Model\*](#)

Multiple articles collectively provided important lessons learned from the initial work in coordinated school health and whole child initiatives and offered directions for next steps as the WSCC model is advanced.

### WHOLE CHILD

[Engaging a Whole Child, School, and Community Lens in Positive Education to Advance Equity in Schools \(Article\)](#)

Provides an overview of schools as a context to serve as assets or risks to equity, discusses theory and science using a WSCC lens and provides directions for science and practice in advancing a positive education approach.

[Comer School Development Program](#)

Describes the origins and success of the School Development Program.

[Learning Policy Institute: Educating the Whole Child: Improving School Climate to Support Student Success](#)

Reviews research demonstrating that student learning and development depend on affirming relationships operating within a positive school climate.



### [Whole Child Alabama](#)

Provides resources and professional development for practitioners, families and policymakers looking to focus on Whole Child systems.

## **MTSS**

### [Comprehensive, Integrated, Three-Tiered Model of Prevention \(Ci3T\)](#)

Assists schools in creating a comprehensive systems-oriented approach to integrate efforts to support students; provides data-informed professional learning.

### [OSEP Technical Assistance Center on Positive Behavioral Interventions and Supports](#)

PBIS offers practical resources related to implementation in education settings, with tremendous examples that provide both the detailed framing within multi-tiered models (prevention through intensive intervention strategies) and the widespread familiarity among educators nationally.

### [Center on Multi-Tiered Systems of Supports](#) (from the American Institutes for Research)

Supports states, districts, and schools across the country in implementing an MTSS framework.

## **IMPLEMENTATION**

### [Sustain Collaborative](#)

Group that supports sustained, effective practices that promote equitable outcomes for students and educators through collaboration, interdisciplinary research, and resource sharing.

### [EPIS Framework website](#)

The EPIS model, developed by Dr. Greg Arons and colleagues, was created with the intent to identify and improve system, organization, and individual factors related to implementation of evidence-based practices and care quality in health care and public sector settings.

### [National Implementation Research Network](#)

Offers critical tools for developing thinking about initial stages of implementation for WSCC, and activities to structure team decision making.

## APPENDIX B – ACTIVITY SHEETS

### List of Sheets



- Activity 1 – [Constructing an Effective Whole Child Leadership Team](#)
- Activity 2 – [Build and Map WSCC Knowledge](#)
- Activity 3 – [Taking Inventory of Your Resources](#)
- Activity 4 – [Exploring WSCC Practices in Context](#)
- Activity 5 – [Big Picture WSCC SWOT Analysis](#)
- Activity 6 – [WellSAT WSCC in Practice and Identifying Potential Directions](#)
- Activity 7 – [Gathering Information to Prioritize Potential Directions](#)
- Activity 8 – [Confirming Congruence](#)
- Activity 9 – [Action Plan](#)
- Activity 10 – [Advocating for WSCC Policy](#)

## APPENDIX C – EXAMINING TIERED SUPPORTS

Activity 6 – WellSAT WSCC in Practice and Identifying Potential Directions focuses on WSCC practices broadly. Use the Examining Tiered Supports worksheets linked in this Appendix to consider WSCC practices at each tier of implementation (universal, targeted, select). This will give you an opportunity to consider WSCC practices at each tier of implementation and opportunities for strengthening practices in each tier. You might complete all worksheets or choose to focus on a specific domain.

You can then use these worksheets to identify potential directions and continue your blueprinting work.

As part of the Exploring Your Context section, you already identified the WSCC domains that your school or district needs to prioritize as part of your whole child systems implementation efforts. You can now organize practices within these domains into MTSS tiers.

This Appendix includes an example grid organizing student-focused social, emotional, and behavioral services across increasing levels of intensity. Then, the Examining Tiered Supports Worksheets follow.

## Example Grid for Student-Focused Services in Social, Emotional, and Behavioral Domains Organized Across Tiers of Intensity

**Population Target:** Student

**Service Type:** Practices

**Domains:** Social, Emotional, Behavioral

Universal	Targeted	Select
<p><b>Fostering a safe and engaging environment for all through active teaching of and responding to displays of prosocial skills</b></p> <ul style="list-style-type: none"> <li>• SEL curriculum – RULER, Second Step</li> <li>• Schoolwide Positive Behavioral Supports (SWPBIS)</li> <li>• Restorative circles</li> <li>• Brain breaks</li> <li>• Mindfulness activities</li> <li>• Calming area</li> <li>• Developmental guidance curriculum</li> <li>• Trauma-sensitive language and actions</li> <li>• Fostering positive relationships (adult-child, child-child)</li> <li>• Systems for early identification of potential risk</li> <li>• Family-school collaboration</li> </ul>	<p><b>Strengthening skills in areas of self-regulation, attachment, and competency through small group and individual supports</b></p> <ul style="list-style-type: none"> <li>• Check in – Check out</li> <li>• Cognitive-behavioral interventions (CBITS, Bounce Back, CFTSI)</li> <li>• Superflex</li> <li>• Social skills groups</li> <li>• Connecting peer and adult support networks</li> <li>• Psychoeducation (knowledge about developmentally appropriate reactions to a stressor)</li> <li>• Systems for monitoring risk and response to supports</li> <li>• Formative family-school communication systems</li> </ul>	<p><b>Providing intensive, individualized supports for significant social, emotional, and behavioral challenges</b></p> <ul style="list-style-type: none"> <li>• Cognitive-behavioral interventions (MATCH-ADTC, TF-CBT, DBT, Coping Cat)</li> <li>• Functional behavioral assessment and behavior intervention plans</li> <li>• Social stories</li> <li>• Visual schedules</li> <li>• 1:1 adult support</li> <li>• Day treatment programming</li> <li>• Ongoing communication and coordination with community behavioral health providers (Wraparound)</li> <li>• Frequent and intensive family communication supports and education</li> </ul>

*Note: The focus of this table and provided examples are on social, emotional, and behavioral domains of child functioning, in acknowledgement that a full continuum of services addresses the needs of the whole child (i.e., human needs are interdependent with critical importance of meeting basic needs to successfully address higher needs).*

## Examining Tiered Supports Worksheets

After organizing current practices into MTSS tiers within your priority domains, you can transfer this information to the top of the appropriate Examining Tiered Supports worksheet linked in this Appendix. Then, you will rate the quality of implementation of evidence-informed practices at each level of resource demand, or the anticipated amount of resources (e.g., funding, time, physical space, training, materials) necessary for implementation based on your current practices. You will then use these ratings to rate the overall quality of implementation for the WSCC domain.

On this section of the worksheet, there are spaces to record notes. For tracking purposes, it may help to record what current practices you consider fitting within the scope of each evidence-informed practice. It is recommended that you also provide a justification for your ratings in this space.



**Current Practices**

<u>Select:</u>
<u>Targeted:</u>
<u>Universal:</u>

- 30 min of team building activities at PD 1x/month
- Admin-led staff appreciation potlucks 2-3x/year

**Recommended Evidence-Informed Practices**

Level 1: Low resource demand	Rating			Notes
Establish an employee wellness committee	0	1	2	Considering as potential direction
Support positive workplace climate	0	1	2	Informal efforts and team building activities
Level 2: Moderate resource demand	Rating			Notes
Implement environmental changes to support healthy lifestyle habits	0	1	2	Could see if other schools are doing this to gather ideas
Encourage participation in online health and wellness promotion	0	1	2	We provide some online resource links in employee handbook
Level 3: High resource demand	Rating			Notes
Provide supports to prevent and respond to employee mental health needs	0	1	2	Would staff have confidentiality concerns?
Provide coaching and ongoing professional learning	0	1	2	PD currently focused on academic initiatives
<b>Overall Employee Wellness Rating</b>	0	1	2	

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Now, we look to identify possible barriers to and facilitators of implementation within your context, assess needs for adapting levels of your context and/or practices, and develop a plan to address identified barriers. On page three of each Examining Tiered Supports worksheet, you will answer questions about areas of strength, opportunities for improvement, and potential next steps.



**Within Employee Wellness, what strengths do we have in providing tiered supports? (e.g., strength in specific tiers of intensity or specific types of support)**

We are strongest with universal Employee Wellness supports (e.g., links to resources, team building activities). We are also considering the development of an employee wellness committee.

**Within Employee Wellness, what opportunities do we have to improve our tiered supports?**

There are opportunities across all three tiers, with specific need for targeted and select supports. As a starting place, we are also exploring opportunities for employee childcare during parent-teacher conferences, which would support a subset of employees. We are also trying to strengthen our universal supports by soliciting input from staff about desired Employee Wellness supports.

**What next steps do we need to take to explore these opportunities for improvement?**

Collect input from staff regarding desired Employee Wellness initiatives. See if staff would be interested in serving on an Employee Wellness committee. Explore feasibility of providing childcare coverage for teachers during parent-teacher conferences.

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You can choose to use the Examining Tiered Supports worksheet to focus in on a specific domain (e.g., Employee Wellness), or complete all 10 to build a strong picture of how you are doing in each domain across the three tiers of intensity.

## List of Examining Tiered Supports Worksheets

- [Behavioral Supports](#)
- [Community Involvement](#)
- [Employee Wellness](#)
- [Family Engagement](#)
- [Health Education](#)
- [Health Services](#)
- [Nutrition Environment](#)
- [Physical Activity](#)
- [Safe Environment](#)
- [Social and Emotional Climate](#)

## APPENDIX D – TYPES OF DE-IMPLEMENTATION

Type	How is it working?	Examples/Actions/Consideration
<b>Reverse</b>	It is not working anywhere	<p><b>Example:</b> Exclusionary discipline practices (office discipline referrals, suspensions, and expulsions) are not improving student behavior or increasing school safety. These practices are also disproportionately used in response to Black students, males, and students with disabilities.</p> <p><b>Action:</b> Support administrators and staff to unlearn the practices, including why they are ineffective.</p> <p><b>Consideration:</b> The reversal of these practices may require something to take its place. See: Replace.</p>
<b>Reduce</b>	It is working in some schools within the district but not all, or for some sub-groups (e.g., teachers) but not all	<p><b>Example:</b> A social emotional curriculum that had been identified for K-8 students has been found to be more developmentally appropriate for K-5 students.</p> <p><b>Action:</b> The curriculum is only delivered to K-5 students and a replacement curriculum is identified for students in grades 6-8. Staff who implement in grades 6-8 should be supported to learn the new curriculum and unlearn the previous curriculum.</p>
<b>Replace</b>	It is not working, but the problem that it is aiming to improve still exists	<p><b>Example:</b> District offers 30-minute yoga session at the start of monthly professional development, but teachers and staff are still reporting high levels of stress and burnout.</p> <p><b>Action:</b> Survey staff to identify their thoughts and preferences around staff wellness activities that would be beneficial and select a new initiative from those data to replace the monthly yoga sessions.</p>
<b>Rethink</b>	It is not working or has achieved its desired outcome and should be de-implemented to make room for something else	<p><b>Example:</b> All elementary schools in the district provide awards and incentives to students based on school attendance, which has not been associated with improvements in student attendance.</p> <p><b>Action:</b> De-implement and make decisions about whether these awards and incentives can be incorporated into another initiative.</p> <p><b>Consideration:</b> This may free up resources (e.g., a person's time) that can be re-allocated.</p>

Note. Adapted from Evidence for Learning, 2020.