Example Potential Partners to Engage in the Implementation of the Whole School, Whole Community, Whole Child (WSCC) Model at the School District or School Level

The roles listed below align with the components of the WSCC model and exemplify a range of possible health and education partners to engage. The list is neither exhaustive nor definitive. Partners will vary depending on the needs of a particular school district or school. Many of these examples (e.g., students, parents/guardians, community members) can reflect more than one WSCC component, as appropriate.

Coordinating Policy, Process, and Practice
- School board members
- Superintendents and other central office administrators
- Principals and assistant principals
- School health coordinators
- Members of school health advisory councils/WSCC team (e.g., school personnel, parents/guardians, community members)
- Students
- Regional and local health department staff
- Education service centers
- State health and education department staff
- State health and education organization staff, including obesity prevention/healthy communities coalitions and state affiliates of national non-governmental organizations

Physical education & physical activity
- Physical education directors or other administrators (e.g., athletic directors)
- Physical education teachers
- Athletic coaches
- Classroom teachers
- Recess monitors
- Afterschool coordinators and staff members
- Community-based organizations supporting out-of-school time physical activity (e.g., Boys & Girls Clubs, Special Olympics, YMCA)

Nutrition environment & services
- School nutrition/food services directors or other administrators
- Nutrition/food services staff members
- School food vendors
- Farmers and local food producers
- Parents (e.g., Parent Teacher Association (PTA)) for healthy snacks and fundraisers
- Afterschool coordinators and staff
- Community food banks

Health services
- School health services directors
- School nurses
- School-based health care clinic personnel
- School-linked health care providers (e.g., physicians, nurse practitioners) and dentists
- Unlicensed assistive personnel
- Local health department staff
- Community health care providers
- Community dentists
- Community health educators and allied health personnel
Health education
- Health education teachers
- Physical education teachers
- Classroom teachers
- Community health educators and allied health personnel

Counseling, psychological, and social services
- School counselors, psychologists or social workers
- Community health care and social service providers
- School nurses and school health services personnel

Physical environment
- School security personnel
- City/county/state law enforcement
- Facility and maintenance staff
- Janitors/custodial workers
- Pest management service providers

Employee wellness
- Human resources and employee benefit administrators
- School employee wellness leaders (e.g., health educators, nurses, counselors, psychologists, or other member of the school staff)
- School district health insurance providers
- Fitness center staff

Community involvement
Representation from:
- Local health departments
- Local community-based organizations
- Hospitals and health systems
- Physician practices
- Local government
- Churches and faith community
- Private foundations
- Business sector

Social and emotional climate
- Student services administrators
- School counselors, psychologists or social workers
- Equity coordinators
- Homeless liaisons
- Bus drivers
- Classroom teachers and other school staff across the school environment

Family engagement
- Parents/guardians
- Other family members
- Parent Teacher Association and Parent Teacher Organization members
- Volunteer coordinators