



# WSSC Practice Blueprint

## Supplemental Materials

**Purpose:** To consider WSSC practices at each tier of implementation (universal, targeted, select) and strengthen practices in each tier



Suggested Citation: Chafouleas, S. M., Iovino, E. A., & Koslouski, J. B. (2022, September). The WSSC Policy Blueprint: A Guide to Planning Efforts Around the Whole School, Whole Community, Whole Child (WSSC) Model. Storrs, CT: UConn Collaboratory on School and Child Health. Available from: <http://csch.uconn.edu/>.

Copyright © 2022 by the University of Connecticut. All rights reserved. Permission granted to photocopy for personal and educational use as long as the names of the creators and the full copyright notice are included in all copies.

## Appendix C - Evaluating Directions Worksheets

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



# EVALUATING DIRECTIONS FOR SOCIAL AND EMOTIONAL CLIMATE

**Time to Complete:** 20 minutes



**Goal of Activity:** To identify strengths and opportunities for improving practices related to Social and Emotional Climate at each tier of intensity.

---

## Instructions

1. Review the key definitions below to familiarize yourself with terms used in this activity.
2. At the top of page 2, list the programs, strategies, and/or initiatives relevant to this domain that are currently being implemented at each tier.
3. Then, rate the quality of implementation of evidence-informed practices in this domain at each level of resource demand.

1 = strategy is not currently implemented

2 = implementation could be better

3 = strategy/domain is currently implemented well

4. As a team, discuss and record responses to the questions on page 3.

### Key Definitions

**Resource Demand** – the anticipated amount of resources (e.g., funding, time, physical space, training, materials) necessary for implementation.

**Universal** – implemented with all schools, staff, and/or students.

**Targeted** – implemented in small groups with at-risk schools, staff, and/or students.

**Select** – implemented individually with intensive needs schools, staff, and/or students.

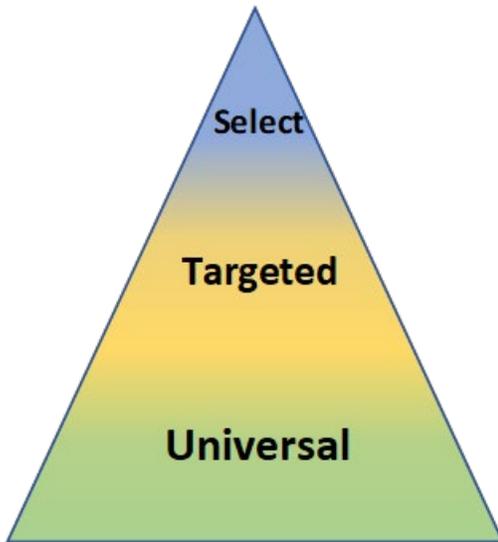
**Access** – connecting to personalized resources (i.e., all invited to the room).

**Diversity** – supporting presence of differences (i.e., all welcomed and represented).

**Inclusion** – participating meaningfully (i.e., all experience belonging and feel valued).



### Current Practices



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

### Recommended Evidence-Informed Practices

Level 1: Low resource demand	Rating			Notes
Improve air quality	1	2	3	
Promote student and staff involvement in the physical environment	1	2	3	
Level 2: Moderate resource demand	Rating			Notes
Change seating options	1	2	3	
Create a school safety team	1	2	3	
Level 3: High resource demand	Rating			Notes
Monitor and respond to the indoor physical environment	1	2	3	
Change playground designs and promote access to green space	1	2	3	
Consider appropriate use of school resource officers (SROs)	1	2	3	
Overall Safe Environment Rating	1	2	3	

How do we prioritize access, diversity, and inclusion within Social and Emotional Climate *at this time*?



Are we committed to prioritizing access, diversity, and inclusion within Social and Emotional Climate moving forward, and if so, how?

What more can we do to strengthen access, diversity, and inclusion within Social and Emotional Climate?

**Access** – connecting to personalized resources (i.e., all invited to the room)  
**Diversity** – supporting presence of differences (i.e., all welcomed and represented)  
**Inclusion** – participating meaningfully (i.e., all experience belonging and feel valued)

# EVALUATING DIRECTIONS FOR SAFE ENVIRONMENT

**Time to Complete:** 20 minutes



**Goal of Activity:** To identify strengths and opportunities for improving practices related to Safe Environment at each tier of intensity.

---

## Instructions

1. Review the key definitions below to familiarize yourself with terms used in this activity.
2. At the top of page 2, list the programs, strategies, and/or initiatives relevant to this domain that are currently being implemented at each tier.
3. Then, rate the quality of implementation of evidence-informed practices in this domain at each level of resource demand.

1 = strategy is not currently implemented

2 = implementation could be better

3 = strategy/domain is currently implemented well

4. As a team, discuss and record responses to the questions on page 3.

### Key Definitions

**Resource Demand** – the anticipated amount of resources (e.g., funding, time, physical space, training, materials) necessary for implementation.

**Universal** – implemented with all schools, staff, and/or students.

**Targeted** – implemented in small groups with at-risk schools, staff, and/or students.

**Select** – implemented individually with intensive needs schools, staff, and/or students.

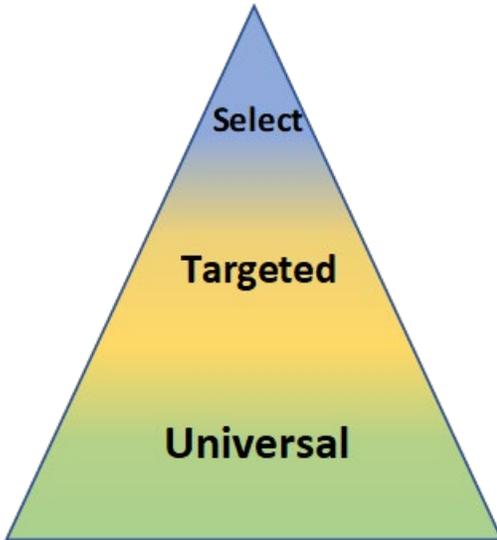
**Access** – connecting to personalized resources (i.e., all invited to the room).

**Diversity** – supporting presence of differences (i.e., all welcomed and represented).

**Inclusion** – participating meaningfully (i.e., all experience belonging and feel valued).



## Current Practices



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

## Recommended Evidence-Informed Practices

Level 1: Low resource demand	Rating			Notes
Improve air quality	1	2	3	
Promote student and staff involvement in the physical environment	1	2	3	
Level 2: Moderate resource demand	Rating			Notes
Change seating options	1	2	3	
Create a school safety team	1	2	3	
Level 3: High resource demand	Rating			Notes
Monitor and respond to the indoor physical environment	1	2	3	
Change playground designs and promote access to green space	1	2	3	
Consider appropriate use of school resource officers (SROs)	1	2	3	
Overall Safe Environment Rating	1	2	3	

How do we prioritize access, diversity, and inclusion within Safe Environment *at this time*?



Are we committed to prioritizing access, diversity, and inclusion within Safe Environment moving forward, and if so, how?

What more can we do to strengthen access, diversity, and inclusion within Safe Environment?

**Access** – connecting to personalized resources (i.e., all invited to the room)  
**Diversity** – supporting presence of differences (i.e., all welcomed and represented)  
**Inclusion** – participating meaningfully (i.e., all experience belonging and feel valued)

# EVALUATING DIRECTIONS FOR PHYSICAL ACTIVITY

**Time to Complete:** 20 minutes



**Goal of Activity:** To identify strengths and opportunities for improving practices related to Physical Activity at each tier of intensity.

---

## Instructions

1. Review the key definitions below to familiarize yourself with terms used in this activity.
2. At the top of page 2, list the programs, strategies, and/or initiatives relevant to this domain that are currently being implemented at each tier.
3. Then, rate the quality of implementation of evidence-informed practices in this domain at each level of resource demand.

1 = strategy is not currently implemented

2 = implementation could be better

3 = strategy/domain is currently implemented well

4. As a team, discuss and record responses to the questions on page 3.

### Key Definitions

**Resource Demand** – the anticipated amount of resources (e.g., funding, time, physical space, training, materials) necessary for implementation.

**Universal** – implemented with all schools, staff, and/or students.

**Targeted** – implemented in small groups with at-risk schools, staff, and/or students.

**Select** – implemented individually with intensive needs schools, staff, and/or students.

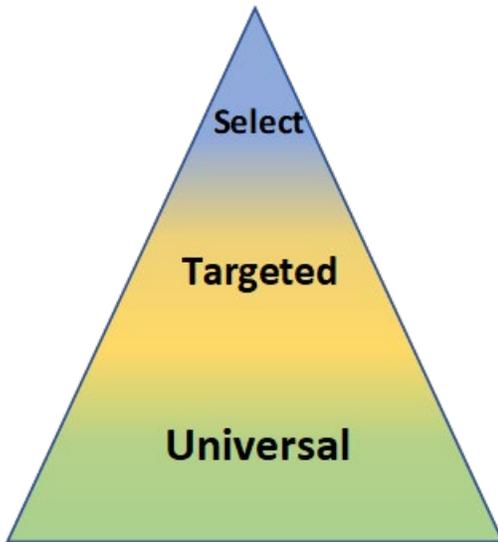
**Access** – connecting to personalized resources (i.e., all invited to the room).

**Diversity** – supporting presence of differences (i.e., all welcomed and represented).

**Inclusion** – participating meaningfully (i.e., all experience belonging and feel valued).



## Current Practices



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

## Recommended Evidence-Informed Practices

Level 1: Low resource demand	Rating			Notes
Avoid physical activity as a disciplinary consequence	1	2	3	
Promote employee involvement in physical activity	1	2	3	
Level 2: Moderate resource demand	Rating			Notes
Encourage family involvement in physical activity	1	2	3	
Incorporate physical activity into existing curricula	1	2	3	
Level 3: High resource demand	Rating			Notes
Provide opportunities for and choices of physical activity throughout the day	1	2	3	
Develop a Comprehensive School Physical Activity Program (CSPAP) plan	1	2	3	
Overall Physical Activity Rating	1	2	3	

How do we prioritize access, diversity, and inclusion within Physical Activity at *this time*?



Are we committed to prioritizing access, diversity, and inclusion within Physical Activity moving forward, and if so, how?

What more can we do to strengthen access, diversity, and inclusion within Physical Activity?

**Access** – connecting to personalized resources (i.e., all invited to the room)  
**Diversity** – supporting presence of differences (i.e., all welcomed and represented)  
**Inclusion** – participating meaningfully (i.e., all experience belonging and feel valued)

# EVALUATING DIRECTIONS FOR NUTRITION ENVIRONMENT

**Time to Complete:** 20 minutes



**Goal of Activity:** To identify strengths and opportunities for improving practices related to Nutrition Environment at each tier of intensity.

---

## Instructions

1. Review the key definitions below to familiarize yourself with terms used in this activity.
2. At the top of page 2, list the programs, strategies, and/or initiatives relevant to this domain that are currently being implemented at each tier.
3. Then, rate the quality of implementation of evidence-informed practices in this domain at each level of resource demand.

1 = strategy is not currently implemented

2 = implementation could be better

3 = strategy/domain is currently implemented well

4. As a team, discuss and record responses to the questions on page 3.

### Key Definitions

**Resource Demand** – the anticipated amount of resources (e.g., funding, time, physical space, training, materials) necessary for implementation.

**Universal** – implemented with all schools, staff, and/or students.

**Targeted** – implemented in small groups with at-risk schools, staff, and/or students.

**Select** – implemented individually with intensive needs schools, staff, and/or students.

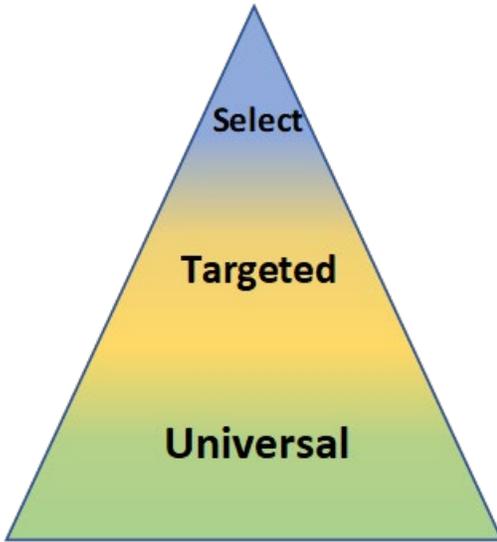
**Access** – connecting to personalized resources (i.e., all invited to the room).

**Diversity** – supporting presence of differences (i.e., all welcomed and represented).

**Inclusion** – participating meaningfully (i.e., all experience belonging and feel valued).



### Current Practices



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

### Recommended Evidence-Informed Practices

Level 1: Low resource demand	Rating			Notes
Ensure adequate time to eat	1	2	3	
Promote school personnel involvement in a healthy nutrition environment	1	2	3	
Level 2: Moderate resource demand	Rating			Notes
Incorporate student choice and hands-on learning activities	1	2	3	
Collaborate with families and community organizations	1	2	3	
Target multiple health behaviors when addressing nutrition	1	2	3	
Level 3: High resource demand	Rating			Notes
Improve the school nutrition environment	1	2	3	
Provide competitive pricing for healthy foods	1	2	3	
Overall Nutrition Environment Rating	1	2	3	

How do we prioritize access, diversity, and inclusion within Nutrition Environment *at this time*?



Are we committed to prioritizing access, diversity, and inclusion within Nutrition Environment moving forward, and if so, how?

What more can we do to strengthen access, diversity, and inclusion within Nutrition Environment?

**Access** – connecting to personalized resources (i.e., all invited to the room)  
**Diversity** – supporting presence of differences (i.e., all welcomed and represented)  
**Inclusion** – participating meaningfully (i.e., all experience belonging and feel valued)

# EVALUATING DIRECTIONS FOR HEALTH SERVICES

**Time to Complete:** 20 minutes



**Goal of Activity:** To identify strengths and opportunities for improving practices related to Health Services at each tier of intensity.

---

## Instructions

1. Review the key definitions below to familiarize yourself with terms used in this activity.
2. At the top of page 2, list the programs, strategies, and/or initiatives relevant to this domain that are currently being implemented at each tier.
3. Then, rate the quality of implementation of evidence-informed practices in this domain at each level of resource demand.

1 = strategy is not currently implemented

2 = implementation could be better

3 = strategy/domain is currently implemented well

4. As a team, discuss and record responses to the questions on page 3.

### Key Definitions

**Resource Demand** – the anticipated amount of resources (e.g., funding, time, physical space, training, materials) necessary for implementation.

**Universal** – implemented with all schools, staff, and/or students.

**Targeted** – implemented in small groups with at-risk schools, staff, and/or students.

**Select** – implemented individually with intensive needs schools, staff, and/or students.

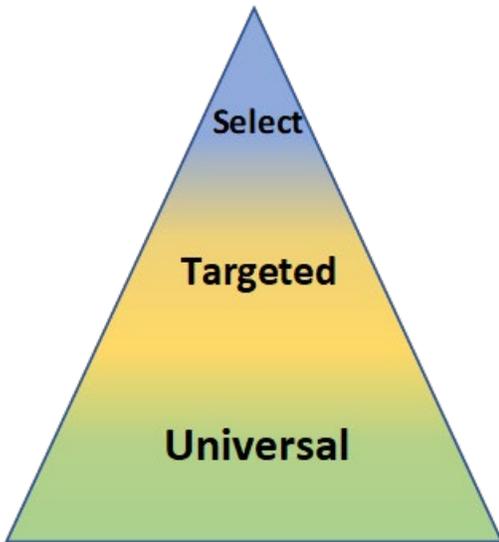
**Access** – connecting to personalized resources (i.e., all invited to the room).

**Diversity** – supporting presence of differences (i.e., all welcomed and represented).

**Inclusion** – participating meaningfully (i.e., all experience belonging and feel valued).



### Current Practices



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

### Recommended Evidence-Informed Practices

Level 1: Low resource demand	Rating			Notes
Utilize the Health Services Assessment Tool for Schools (HATS)	1	2	3	
Disseminate health information resources to students and families	1	2	3	
Level 2: Moderate resource demand	Rating			Notes
Assess and plan for chronic health condition management	1	2	3	
Develop relationships with a diverse group of community stakeholders	1	2	3	
Level 3: High resource demand	Rating			Notes
Provide behavioral health training for school health service providers (SHSP)	1	2	3	
Implement multicomponent school-based prevention programs	1	2	3	
Develop a school-based health center (SBHC)	1	2	3	
Overall Health Services Rating	1	2	3	



How do we prioritize access, diversity, and inclusion within Health Services *at this time*?

Are we committed to prioritizing access, diversity, and inclusion within Health Services moving forward, and if so, how?

What more can we do to strengthen access, diversity, and inclusion within Health Services?

**Access** – connecting to personalized resources (i.e., all invited to the room)  
**Diversity** – supporting presence of differences (i.e., all welcomed and represented)  
**Inclusion** – participating meaningfully (i.e., all experience belonging and feel valued)

# EVALUATING DIRECTIONS FOR FAMILY ENGAGEMENT

**Time to Complete:** 20 minutes



**Goal of Activity:** To identify strengths and opportunities for improving practices related to Family Engagement at each tier of intensity.

---

## Instructions

1. Review the key definitions below to familiarize yourself with terms used in this activity.
2. At the top of page 2, list the programs, strategies, and/or initiatives relevant to this domain that are currently being implemented at each tier.
3. Then, rate the quality of implementation of evidence-informed practices in this domain at each level of resource demand.

1 = strategy is not currently implemented

2 = implementation could be better

3 = strategy/domain is currently implemented well

4. As a team, discuss and record responses to the questions on page 3.

### Key Definitions

**Resource Demand** – the anticipated amount of resources (e.g., funding, time, physical space, training, materials) necessary for implementation.

**Universal** – implemented with all schools, staff, and/or students.

**Targeted** – implemented in small groups with at-risk schools, staff, and/or students.

**Select** – implemented individually with intensive needs schools, staff, and/or students.

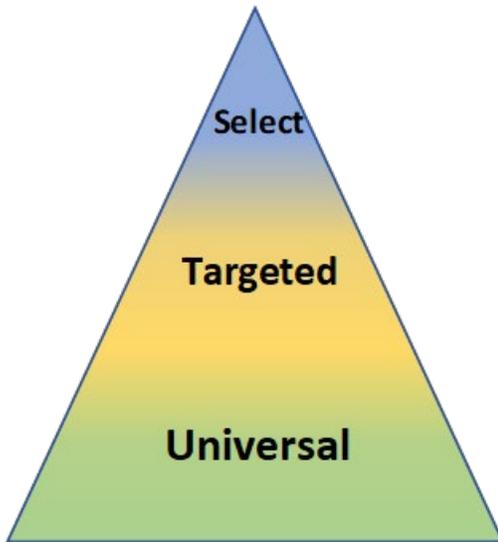
**Access** – connecting to personalized resources (i.e., all invited to the room).

**Diversity** – supporting presence of differences (i.e., all welcomed and represented).

**Inclusion** – participating meaningfully (i.e., all experience belonging and feel valued).



## Current Practices



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

## Recommended Evidence-Informed Practices

Level 1: Low resource demand	Rating			Notes
Engage in ongoing communication between schools and families	1	2	3	
Evaluate existing family engagement initiatives	1	2	3	
Level 2: Moderate resource demand	Rating			Notes
Provide opportunities for ongoing family engagement	1	2	3	
Strengthen family access and inclusion within the school environment	1	2	3	
Level 3: High resource demand	Rating			Notes
Prioritize family engagement in district and building level initiatives	1	2	3	
Empower families to take meaningful leadership roles in school and community	1	2	3	
Overall Family Engagement Rating	1	2	3	

How do we prioritize access, diversity, and inclusion within Family Engagement *at this time*?



Are we committed to prioritizing access, diversity, and inclusion within Family Engagement moving forward, and if so, how?

What more can we do to strengthen access, diversity, and inclusion within Family Engagement?

**Access** – connecting to personalized resources (i.e., all invited to the room)  
**Diversity** – supporting presence of differences (i.e., all welcomed and represented)  
**Inclusion** – participating meaningfully (i.e., all experience belonging and feel valued)

# EVALUATING DIRECTIONS FOR HEALTH EDUCATION

**Time to Complete:** 20 minutes



**Goal of Activity:** To identify strengths and opportunities for improving practices related to Health Education at each tier of intensity.

---

## Instructions

1. Review the key definitions below to familiarize yourself with terms used in this activity.
2. At the top of page 2, list the programs, strategies, and/or initiatives relevant to this domain that are currently being implemented at each tier.
3. Then, rate the quality of implementation of evidence-informed practices in this domain at each level of resource demand.

1 = strategy is not currently implemented

2 = implementation could be better

3 = strategy/domain is currently implemented well

4. As a team, discuss and record responses to the questions on page 3.

### Key Definitions

**Resource Demand** – the anticipated amount of resources (e.g., funding, time, physical space, training, materials) necessary for implementation.

**Universal** – implemented with all schools, staff, and/or students.

**Targeted** – implemented in small groups with at-risk schools, staff, and/or students.

**Select** – implemented individually with intensive needs schools, staff, and/or students.

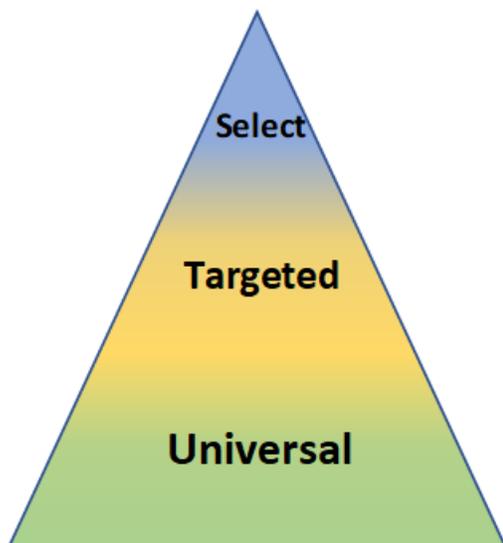
**Access** – connecting to personalized resources (i.e., all invited to the room).

**Diversity** – supporting presence of differences (i.e., all welcomed and represented).

**Inclusion** – participating meaningfully (i.e., all experience belonging and feel valued).



## Current Practices



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

## Recommended Evidence-Informed Practices

Level 1: Low resource demand	Rating			Notes
Utilize the Health Education Curriculum Analysis Tool (HECAT)	1	2	3	
Align health education curricula with community needs and student interests	1	2	3	
Level 2: Moderate resource demand	Rating			Notes
Promote family involvement in health education	1	2	3	
Use multiple active-learning components in teaching health education	1	2	3	
Level 3: High resource demand	Rating			Notes
Incorporate social learning approaches into health education activities	1	2	3	
Integrate health education across grade levels and subject areas	1	2	3	
Overall Health Education Rating	1	2	3	

How do we prioritize access, diversity, and inclusion within Health Education *at this time*?



Are we committed to prioritizing access, diversity, and inclusion within Health Education moving forward, and if so, how?

What more can we do to strengthen access, diversity, and inclusion within Health Education?

**Access** – connecting to personalized resources (i.e., all invited to the room)  
**Diversity** – supporting presence of differences (i.e., all welcomed and represented)  
**Inclusion** – participating meaningfully (i.e., all experience belonging and feel valued)

# EVALUATING DIRECTIONS FOR EMPLOYEE WELLNESS

**Time to Complete:** 20 minutes



**Goal of Activity:** To identify strengths and opportunities for improving practices related to Employee Wellness at each tier of intensity.

---

## Instructions

1. Review the key definitions below to familiarize yourself with terms used in this activity.
2. At the top of page 2, list the programs, strategies, and/or initiatives relevant to this domain that are currently being implemented at each tier.
3. Then, rate the quality of implementation of evidence-informed practices in this domain at each level of resource demand.

1 = strategy is not currently implemented

2 = implementation could be better

3 = strategy/domain is currently implemented well

4. As a team, discuss and record responses to the questions on page 3.

### Key Definitions

**Resource Demand** – the anticipated amount of resources (e.g., funding, time, physical space, training, materials) necessary for implementation.

**Universal** – implemented with all schools, staff, and/or students.

**Targeted** – implemented in small groups with at-risk schools, staff, and/or students.

**Select** – implemented individually with intensive needs schools, staff, and/or students.

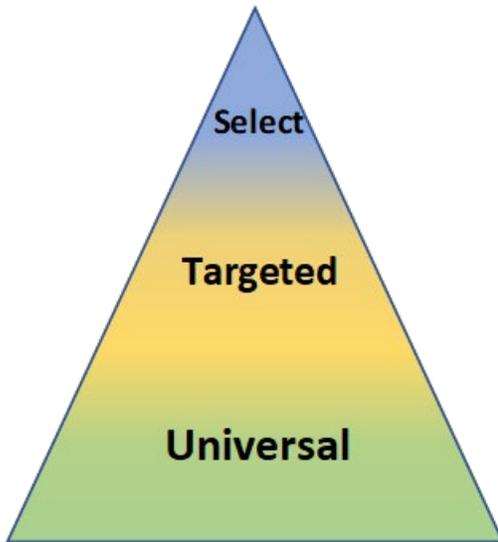
**Access** – connecting to personalized resources (i.e., all invited to the room).

**Diversity** – supporting presence of differences (i.e., all welcomed and represented).

**Inclusion** – participating meaningfully (i.e., all experience belonging and feel valued).



## Current Practices



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

## Recommended Evidence-Informed Practices

Level 1: Low resource demand	Rating			Notes
Establish an employee wellness committee	1	2	3	
Support positive workplace climate	1	2	3	
Level 2: Moderate resource demand	Rating			Notes
Implement environmental changes to support healthy lifestyle habits	1	2	3	
Encourage participation in online health and wellness promotion	1	2	3	
Level 3: High resource demand	Rating			Notes
Provide supports to prevent and respond to employee mental health needs	1	2	3	
Provide coaching and ongoing professional development	1	2	3	
Overall Employee Wellness Rating	1	2	3	

How do we prioritize access, diversity, and inclusion within Employee Wellness *at this time*?



Are we committed to prioritizing access, diversity, and inclusion within Employee Wellness moving forward, and if so, how?

What more can we do to strengthen access, diversity, and inclusion within Employee Wellness?

**Access** – connecting to personalized resources (i.e., all invited to the room)  
**Diversity** – supporting presence of differences (i.e., all welcomed and represented)  
**Inclusion** – participating meaningfully (i.e., all experience belonging and feel valued)

# EVALUATING DIRECTIONS FOR BEHAVIORAL SUPPORTS

**Time to Complete:** 20 minutes



**Goal of Activity:** To identify strengths and opportunities for improving practices related to Behavioral Supports at each tier of intensity.

---

## Instructions

1. Review the key definitions below to familiarize yourself with terms used in this activity.
2. At the top of page 2, list the programs, strategies, and/or initiatives relevant to this domain that are currently being implemented at each tier.
3. Then, rate the quality of implementation of evidence-informed practices in this domain at each level of resource demand.

1 = strategy is not currently implemented

2 = implementation could be better

3 = strategy/domain is currently implemented well

4. As a team, discuss and record responses to the questions on page 3.

### Key Definitions

**Resource Demand** – the anticipated amount of resources (e.g., funding, time, physical space, training, materials) necessary for implementation.

**Universal** – implemented with all schools, staff, and/or students.

**Targeted** – implemented in small groups with at-risk schools, staff, and/or students.

**Select** – implemented individually with intensive needs schools, staff, and/or students.

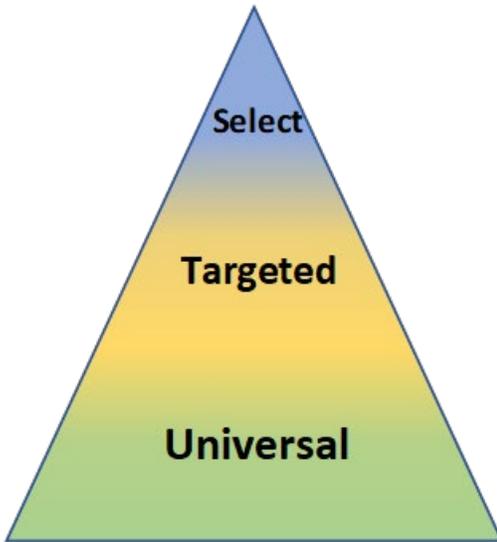
**Access** – connecting to personalized resources (i.e., all invited to the room).

**Diversity** – supporting presence of differences (i.e., all welcomed and represented).

**Inclusion** – participating meaningfully (i.e., all experience belonging and feel valued).



## Current Practices



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

## Recommended Evidence-Informed Practices

Level 1: Low resource demand	Rating			Notes
Promote use of positive behavior support practices	1	2	3	
Strengthen universal school-based mental health promotion	1	2	3	
Level 2: Moderate resource demand	Rating			Notes
Establish a process for identifying need and matching to appropriate behavioral supports	1	2	3	
Implement targeted behavioral interventions	1	2	3	
Level 3: High resource demand	Rating			Notes
Offer cognitive-behavioral therapy (CBT) based interventions	1	2	3	
Utilize function-based interventions	1	2	3	
Overall Behavioral Supports Rating	1	2	3	

How do we prioritize access, diversity, and inclusion within Behavioral Supports *at this time*?



Are we committed to prioritizing access, diversity, and inclusion within Behavioral Supports moving forward, and if so, how?

What more can we do to strengthen access, diversity, and inclusion within Behavioral Supports?

**Access** – connecting to personalized resources (i.e., all invited to the room)  
**Diversity** – supporting presence of differences (i.e., all welcomed and represented)  
**Inclusion** – participating meaningfully (i.e., all experience belonging and feel valued)

# EVALUATING DIRECTIONS FOR COMMUNITY INVOLVEMENT

**Time to Complete:** 20 minutes



**Goal of Activity:** To identify strengths and opportunities for improving practices related to Community Involvement at each tier of intensity.

---

## Instructions

1. Review the key definitions below to familiarize yourself with terms used in this activity.
2. At the top of page 2, list the programs, strategies, and/or initiatives relevant to this domain that are currently being implemented at each tier.
3. Then, rate the quality of implementation of evidence-informed practices in this domain at each level of resource demand.

1 = strategy is not currently implemented

2 = implementation could be better

3 = strategy/domain is currently implemented well

4. As a team, discuss and record responses to the questions on page 3.

### Key Definitions

**Resource Demand** – the anticipated amount of resources (e.g., funding, time, physical space, training, materials) necessary for implementation.

**Universal** – implemented with all schools, staff, and/or students.

**Targeted** – implemented in small groups with at-risk schools, staff, and/or students.

**Select** – implemented individually with intensive needs schools, staff, and/or students.

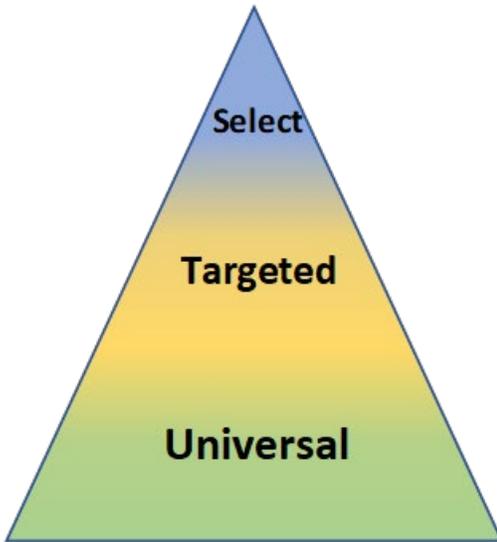
**Access** – connecting to personalized resources (i.e., all invited to the room).

**Diversity** – supporting presence of differences (i.e., all welcomed and represented).

**Inclusion** – participating meaningfully (i.e., all experience belonging and feel valued).



## Current Practices



<b>Select:</b>
<b>Targeted:</b>
<b>Universal:</b>

## Recommended Evidence-Informed Practices

Level 1: Low resource demand	Rating			Notes
Involve community members in existing prevention efforts	1	2	3	
Evaluate existing community involvement initiatives	1	2	3	
Level 2: Moderate resource demand	Rating			Notes
Invest in building relationships with cultural brokers and translators	1	2	3	
Incorporate service learning into curricula	1	2	3	
Establish shared-use agreements for school and community spaces	1	2	3	
Level 3: High resource demand	Rating			Notes
Implement a school-based mentoring or volunteer tutoring program	1	2	3	
Establish after-school programs in collaboration with community partners	1	2	3	
Overall Community Involvement Rating	1	2	3	



How do we prioritize access, diversity, and inclusion within Community Involvement *at this time*?

Are we committed to prioritizing access, diversity, and inclusion within Community Involvement moving forward, and if so, how?

What more can we do to strengthen access, diversity, and inclusion within Community Involvement?

**Access** – connecting to personalized resources (i.e., all invited to the room)  
**Diversity** – supporting presence of differences (i.e., all welcomed and represented)  
**Inclusion** – participating meaningfully (i.e., all experience belonging and feel valued)