

Overview of Whole School, Whole Community, Whole Child Model

A Coordinated School Health Program (CSH) model approach has been credited with promoting the maximum physical, social, emotional, and educational growth of children through health-related support services and health education. The original eight-component CSH model has been further expanded into a 10-component Whole School, Whole Community, Whole Child Model (WSCC). The newer model continues interlocking physical, mental, social, emotional, and intellectual aspects that are addressed by a systematic, planned approach.

The 10 components of the WSCC model include:

1. **Health Services** – Health Service activities are aimed at determining the individual health status of students and school staff, referral for personal health services and correction measures, individual protective services such as emergency first aid and immunization programs, and health promotion. School nurses play a prominent role in planning and providing health promotion, early intervention, and care coordination services.

School Nurse Role: Assessing student health status, providing emergency care, ensuring access to health care, coordinating multidisciplinary care, and identifying and managing barriers to student learning.

2. **Health Education** – School health education is a multidimensional process associated with health activities designed to favorably influence the health knowledge, attitudes, and behaviors of individuals in school settings. It addresses the physical, emotional, mental and social aspects of health. The education is designed to help students improve health, prevent illness and reduce risky behaviors, thus influencing students' present and future health needs.

School Nurse Role: Providing resources and expertise in developing health curricula and providing health information.

3. **Physical Environment** – The health of the students and school personnel is affected by their environment. Because the environment influences the habits, health, attitudes, comfort, safety and working efficiency of both students and staff, it needs to be, and feel, physically safe. Creating and maintaining this supportive environment for learning is the responsibility of the school administration, with the help of all school personnel. Inspecting environmental deficiencies is the statutory responsibility of the local department of health.

School Nurse Role: Monitoring, reporting, and intervening to correct hazards, collaborating to develop a crisis intervention plan, and providing adaptations for students with special needs.

4. **Physical Education and Physical Activity** – The physical education program stresses regular and frequent fitness activities that promote the development of lifelong fitness habits. Students learn to assess their fitness status, set goals, and design personal activities.

School Nurse Role: Collaborating with physical educators to meet physical education goals, providing information to students about physical activity, and helping to design appropriate programs for students with special health concerns.

5. **Social and Emotional School Climate** – The psychosocial components of student education

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influence social and emotional development and impact student engagement, student relationships and academic performance.

School Nurse Role: Collaborating with school staff to create a positive social and emotional school climate that is safe and supportive.

6. **Nutrition Environment and Services** – School nutrition environment and services refer to the foods and beverages that are available to students throughout the school day as well as information and messages about food, beverages, and nutrition that students encounter on school grounds.

School Nurse Role: Providing education about nutritious foods, monitoring menus and food preparation, and encouraging the inclusion of healthier foods on menus and for ala carte sales, in vending machines, and for classroom snacks.

7. **Employee Wellness** – School personnel organize and implement a wide variety of health and wellness activities. Faculty and staff involvement in health promotion activities provides positive role models, reinforces the school health message, and increases job satisfaction.

School Nurse Role: Providing health information and health promotion activities, monitoring chronic conditions when included in job description, and maintaining records.

8. **Community Involvement** – The success of the school health program depends upon the support of the community. Joint school and community partnerships use community resources for health instruction, school-site health promotion programs, health services and referrals. They seek to involve parents, health professionals, and a cross-section of the community in decisions regarding school health programs.

School Nurse Role: Taking a leadership role in collaborating with community agencies to identify and provide programs to meet the physical and mental health needs of children and families.

9. **Family Engagement** – Learning, development and student health are positively impacted when families and school staff work together. A relationship between families and school staff reinforces student health and learning at home, in schools, in out-of-school programs, and in the community.

School Nurse Role: Facilitating interaction, communication, and relationship between families and school staff. Helping families to feel included as part of the school community.

10. **Counseling, Psychological, and Social Services** – Counselors, psychologists, and social workers are an important link in the school site health promotion program, providing individual and group assessments, interventions, and referrals. The goal is to prevent problems early and to enhance health development.

School Nurse Role: Collaborating with student services staff to identify student psychosocial problems and to provide input and intervention.

Many people are involved in planning, implementing and evaluating a school health program.

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They include school administrators, teachers, school nurses, physical educators, health educators, school social workers, school counselors, psychologists, health and teacher aides, and parents and students. They also include community professionals, such as local health department administrators, environmental health specialists, physicians, dentists and registered dental hygienists. Also involved are specialists in educational support services such as audiologists, physical therapists, and rehabilitation and occupational therapists.



Resource: CDC. (2018). WSCC Model [Image]. Retrieved from <https://www.cdc.gov/whole-school-community-child/about/index.html>

Additional Resources

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

<https://files.ascd.org/staticfiles/ascd/pdf/siteASCD/publications/wholechild/wsc-a-collaborative-approach.pdf>

[NASN \(2021,5-31\) Using the WSCC Model. Using the WSCC Model to Implement Wellness Policies and Sustain Chronic Health Condition Management in Schools.](#)

Shannon, R., & Yonkaitis, C. F. (2025). School Nursing: A Comprehensive Text, (4th ed.). The Specialty Practice of School Nursing, Chapter 3. F. A. Davis Company.