NATIONAL STUDENT ATTENDANCE, ENGAGERNENT, AND SUCCESS CENTER

Organizing a School Strategy to Reduce Health-Related Absenteeism

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Heidi Schumacher, Office of the State Superintendent of Education, Washington, DC
Danielle Dooley, Children's National Health System
Annie Reed, Attendance Works







Today's Objectives

- ✓ Understand the link between health and attendance
- ✓ Learn about the role of school nurses in addressing chronic absence
- ✓ Learn about the role of district health staff in addressing chronic absence
- Learn about the role of community health providers in addressing chronic absence
- Consider opportunities, challenges, and next steps



Today's Speakers

Donna Mazyck, MS, RN, NCSN, CAE Executive Director, National Association of School Nurses

Heidi Schumacher, MD Assistant Superintendent, Health & Wellness Office of the State Superintendent of Education (Washington, DC)

Danielle Dooley, MD Medical Director, Community Affairs and Population Health Children's National Health System

Annie Reed Special Projects Manager Attendance Works



- ✓ Name
- ✓ Role
- ✓ Organization

About Us

Attendance Works is a nonprofit initiative that advances student success and closes equity gaps by reducing chronic absence. Since our launch in 2010, we have become the nation's "go-to" resource for student attendance with more than a quarter-million annual users of our website (www.attendanceworks.org).

We work at the local, state, and national levels, with each level of practice informing and influencing the other. Our cross-cutting objectives are to:

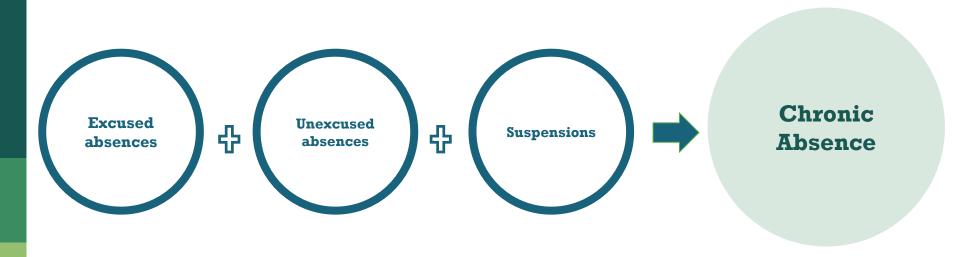
- a. Nurture proven and promising practice
- b. Promote meaningful and effective communications
- c. Advance better policy
- d. Catalyze needed research

Our work began with a focus on elementary schools. We now offer support to K-12 schools and are expanding to address chronic absence starting in preschool.



What is chronic absence?

Chronic absence is missing so much school for any reason that a student is academically at risk. California defines it as missing 10 percent or more of school for any reason.



Chronic absence is different from **truancy** (unexcused absences only) or **average daily attendance** (how many students show up to school each day).



Factors that Contribute to Chronic Absence

Barriers

- Illness, both chronic and acute
- Lack of health, mental health, vision, or dental care
- Trauma
- Unsafe path to/from school
- Poor transportation
- Frequent moves or school changes
- Involvement with child welfare or juvenile justice systems

Negative School Experiences

- Struggling academically or socially
- Bullying
- Suspensions and expulsions
- Negative attitudes of parents due to their own school experience
- Undiagnosed disability
- Lack of appropriate accommodations for disability

Lack of Engagement

- Lack of culturally relevant, engaging instruction
- No meaningful relationships with adults in school
- Stronger ties with peers out of school than in school
- Unwelcoming school climate
- Failure to earn credits/no future plans
- Many teacher absences or long-term substitutes

Faulty Beliefs

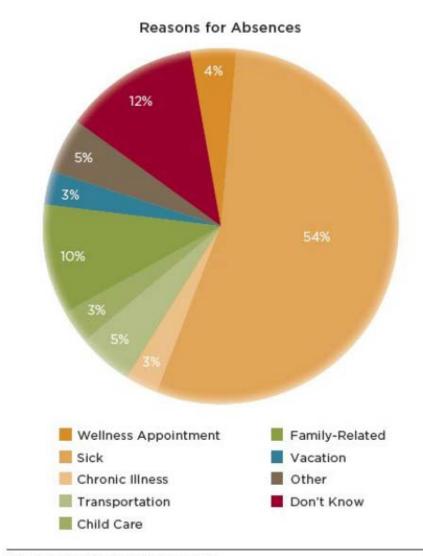
- Absences are only a problem if they are unexcused
- Missing two days per month doesn't affect learning
- Sporadic absences aren't a problem
- Attendance only matters in the older grades



In this Chicago Education Research Consortium study of causes of absenteeism among students missing early education classes, 61 percent of the families reported illness, chronic illness, or a child wellness visit as the cause of absenteeism.

FIGURE 6

Sickness accounts for just over half of all days missed while transportation, child-care, and family-related reasons account for another 18 percent of days missed.



Data Source: Attendance log; n = 1,229



Leading Health-Related Causes

Asthma Bullying Oral Health

Mental Health Nutrition Vision



- ✓ Chronic absence is a warning sign that a health-related condition may need to be addressed.
- ✓ Children with acute and chronic health conditions are more likely to be absent from school.



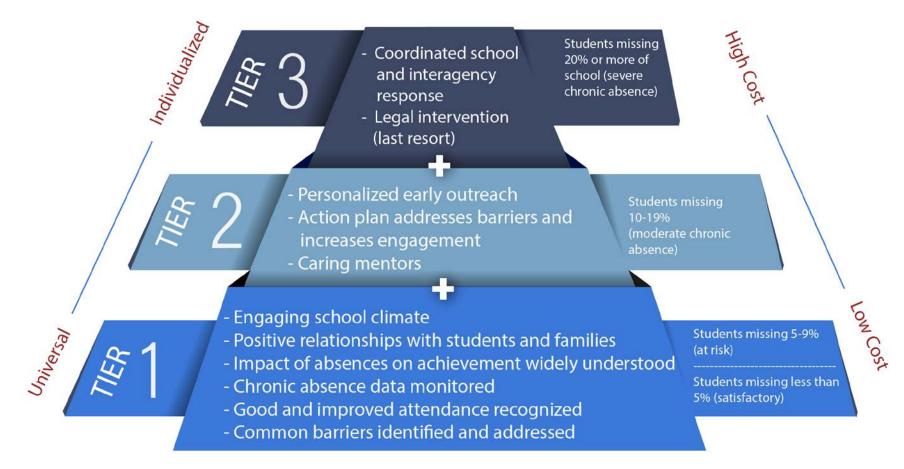


Reciprocal Relationship between Health and Education

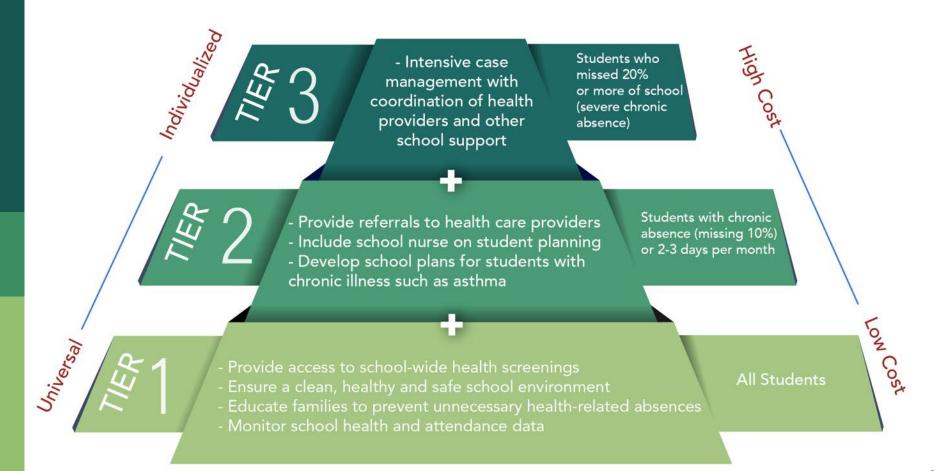




Invest in Prevention and Early Intervention



Health Framework for Chronic Absence





What are the top health-related barriers to attendance at your school/district/county/state?



Health Interventions

Asthma

- Asthma-friendly schools
- Environmental assessments
- Asthma-friendly homes

Oral Health

- Community-based oral health programs
- School-based sealant programs
- Mobile clinics

Nutrition

- Community eligibility
- Universal breakfast
- Food backpack programs
- Farm-to-school programs

Bullying

- Safe routes to schools
- Bullying education programs
- Support groups

Mental Health

- School-based mental health programs
- Universal interventions
- Screening, brief intervention and referral to treatment

Vision

 School-based vision screening programs



Opportunities for Health and Attendance

- ✓ ESSA
 - Chronic absence as accountability metric
 - Needs assessment
- ✓ Building momentum
 - American Academy of Pediatrics
 - National Association of School Nurses
 - Campaign for Grade-Level Reading
 - School-Based Health Alliance
- ✓ Promising practices



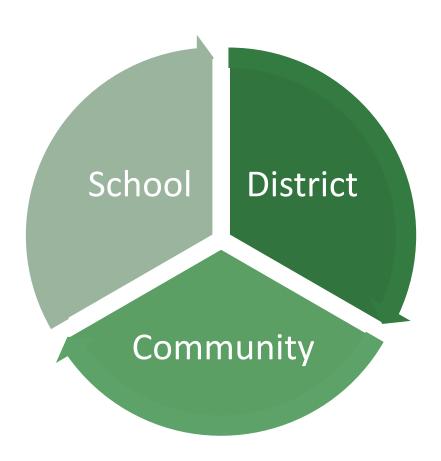
Challenges for Health and Attendance

- ✓ Data Sharing
 - o HIPAA/FERPA
 - Consent
- ✓ Siloed systems
 - Data availability and use
 - Accountability
 - Funding and resources





Coordinated Approach to Addressing Health-Related Barriers to Attendance



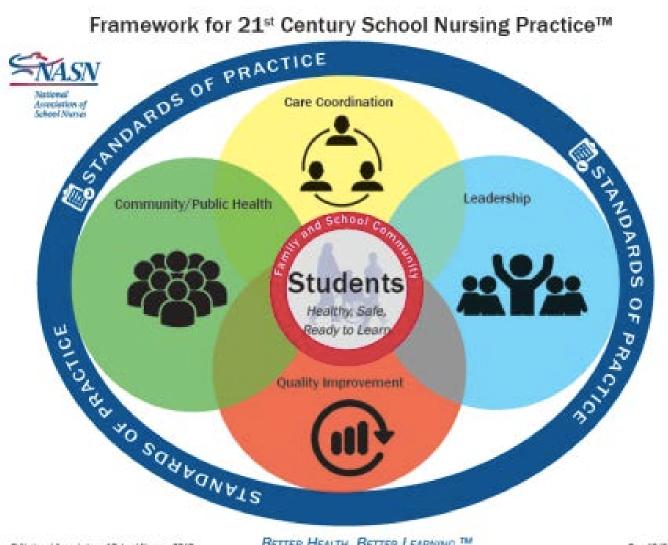
NSAESC 2018 National Convening

Donna Mazyck, MS, RN, NCSN, CAE

Executive Director

National Association of School Nurses

Framework for 21st Century School Nursing Practice™



21st-Century School Nursing Framework



Standards of Practice

- Clinical Competence
- · Clinical Guidelines
- · Code of Ethics
- Critical Thinking
- Evidence-based Practice
- NASN Position Statements
- Nurse Practice Acts
- Scope and Standards of Practice



Care Coordination

- Case Management
- Chronic Disease
 Management
- Collaborative
 Communication
- Direct Care
- Education
- Interdisciplinary
 Teams
- Motivational Interviewing/ Counseling
- Nursing Delegation
- Student Care Plans
- Student-centered Care
- Student Selfempowerment
- · Transition Planning



Leadership

- Advocacy
- Change Agents
- · Education Reform
- Funding and Reimbursement
- Healthcare Reform
- Lifelong Learner
- · Models of Practice
- Technology
- Policy Development and Implementation
- Professionalism
- Systems-level Leadership



- Continuous Quality Improvement
- Documentation/Data Collection
- Evaluation
- Meaningful Health/ Academic Outcomes
- Performance Appraisal
- Research
- Uniform Data Set



- Access to Care
- Cultural Competency
- Disease Prevention
- Environmental Health
- · Health Education
- Health Equity
- Healthy People 2020
- Health Promotion
- Outreach
- Population-based Care
- Risk Reduction
- Screenings/Referral/ Follow-up
- Social Determinants of Health
- Surveillance

School Nurses Influence Student Attendance

- Identify students missing required immunizations
- Assess students for health concerns that require care coordination
- Identify undetected health concerns
- Participate on teams that collaborate to support students at risk for chronic absenteeism
- Promote healthy habits
- Identify social factors that adversely impact student attendance and wellbeing



District and School Level

Strategies for school nurses



- Participate on Attendance Committee
- Ask students coming to the health room about their attendance
- Consult with the school team when students have health barriers or social determinants that impact attendance
- Connect students and families to community resources to address social factors
- Coordinate care with community care providers, students, families, and other agencies
- Collect, analyze, and monitor student health data that may affect attendance



Who in your school/district/county/state can support efforts to address health-related barriers to attendance?

NSAESC 2018 National Convening

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Disclosures

No relevant financial relationships to disclose.

K-12 Public Education in Washington, DC

Office of the State
Superintendent of Education

SY17-18: 92,245 students 68 local education agencies (LEAs) 264 schools

DC Public Schools

SY17-18: 48,622 students

DC Public Charter Schools

SY17-18: 43,623 students





Children's National Health System

Serving children and families in DC for nearly 150 years

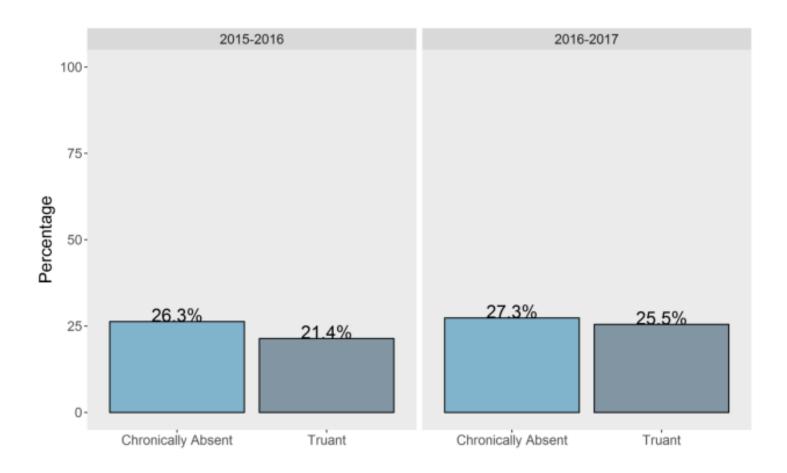
313 inpatient beds, 6 primary care centers in the DC community, Mobile Health Units

Through funding and partnership with DC Health, operates Children's School Services, the school nurse program, and 3 school-based health centers





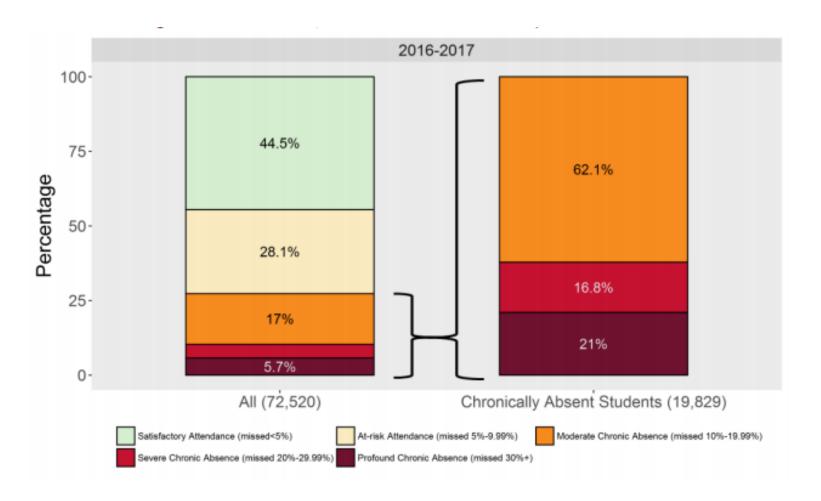
Chronic Absenteeism in Washington, DC



Source: District of Columbia Attendance Report, SY 2016-17 https://osse.dc.gov/sites/default/files/dc/sites/osse/publication/attach ments/SY16-17AttendanceReport.FINAL .pdf



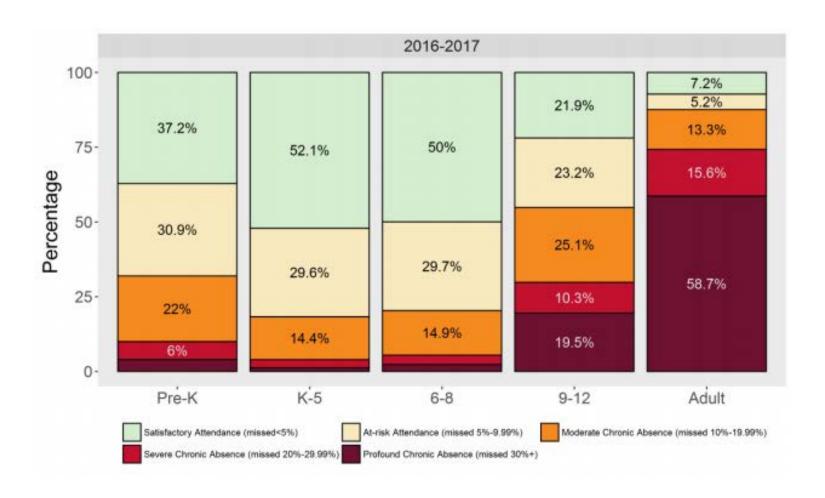
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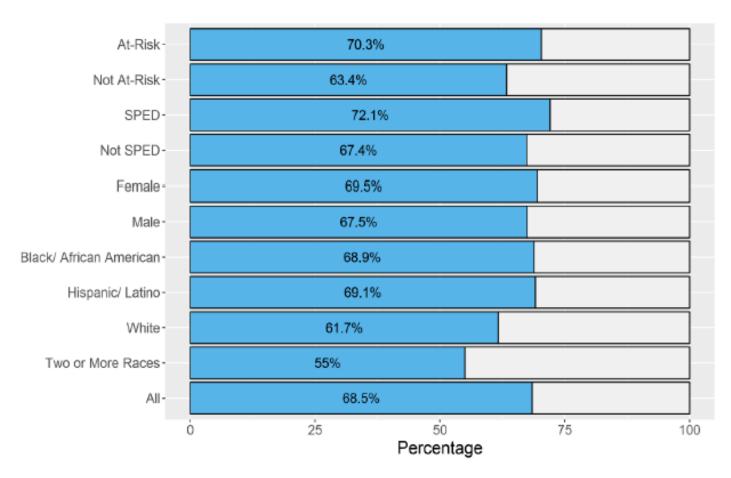
Chronic Absenteeism by Grade Band



Source: District of Columbia Attendance Report, SY 2016-17 https://osse.dc.gov/sites/default/files/dc/sites/osse/publication/attach ments/SY16-17AttendanceReport.FINAL_.pdf



Recurrence of Chronic Absenteeism



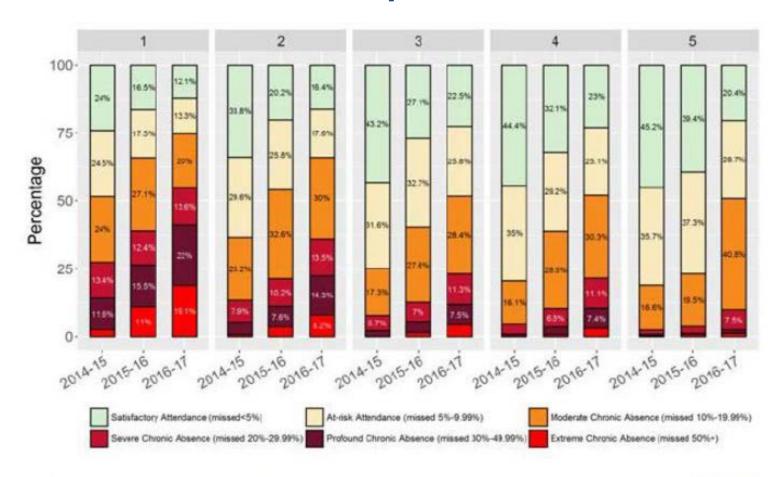
On average, 68.5% of students who were chronically absent in School Year 2015-2016 were chronically absent again the following year, in School Year 2016-2017.

Source: District of Columbia Attendance Report, SY 2016-17 https://osse.dc.gov/sites/default/files/dc/sites/osse/publication/attach ments/SY16-17AttendanceReport.FINAL_.pdf





Absenteeism by PARCC Score



Lower chronic absenteeism (higher attendance) is associated with a higher score on PARCC ELA and Math. However, all students demonstrate greater absenteeism in later years of high school.

Source: Analysis of Attendance and Graduation Outcomes in Public High Schools in the District of Columbia

https://osse.dc.gov/sites/default/files/dc/sites/osse/release_content/attachments/Analysis of Attendance and Graduation Outcomes at Public High Schools in DC - Jan 16 2018 - sm 0.pdf





"You cannot educate a child who is not healthy, and you cannot keep a child healthy who is not educated."

- Dr. Joycelyn Elders



Role of Social Determinants

Health disparities

Poverty

Availability of and access to resources

Physical environment

Family engagement

Institutional racism

Parental educational attainment

Educational disparities





Poverty and Chronic Absenteeism in Washington, DC

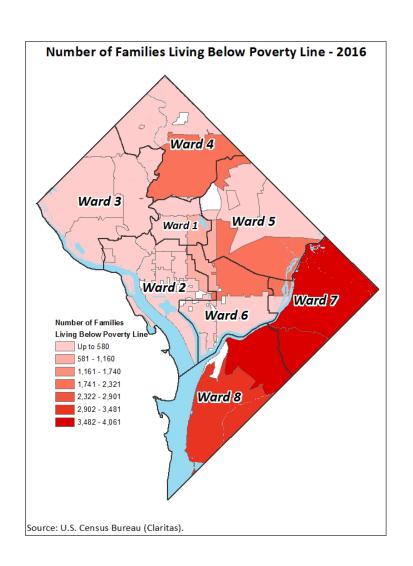




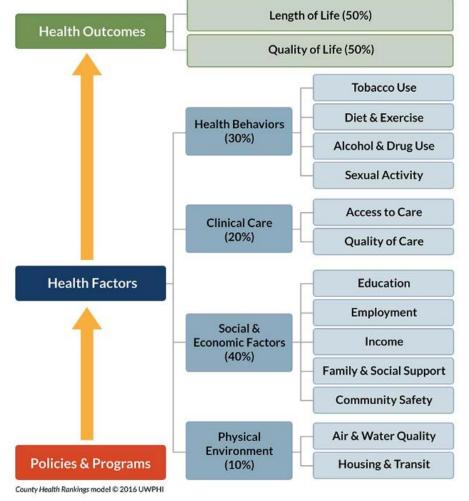
Figure 3 provides a map of DC students color-coded according to their levels of absenteeism, with darker shades of red indicating more severe chronic absence. High levels of chronic absence are observed throughout Wards 1, 4, 5, 7 and 8 with Wards 7 and 8 home to both the greatest number of students who are chronically absent and students with the greatest severity in chronic absence level.

Source: District of Columbia Attendance Report, SY 2015-16 https://attendance.dc.gov/sites/default/files/dc/sites/attendance/publication/attachments/OSSE-State-of-Attendance-15-16-Report.pdf



Clinical Care Accounts for 20 Percent of Outcomes

Education is a determinant of long-term health, financial and employment outcomes.







Health and Educational Outcomes are Intertwined

Higher educational achievement is associated with better health throughout the lifespan

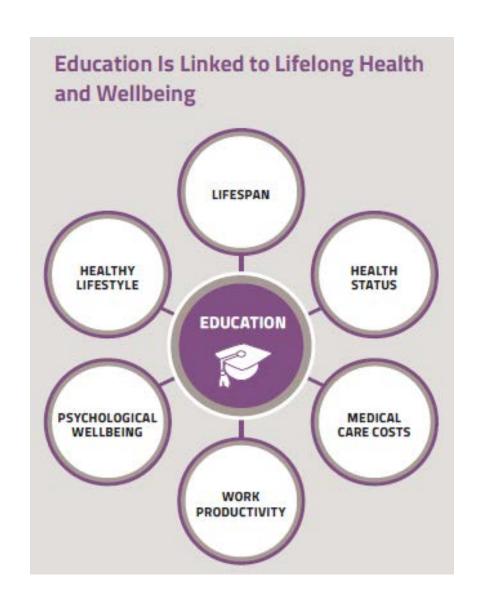


Healthier students, families & communities have higher educational achievement





Education is a Social Determinant of Health



Source: "Education: It Matters More to Health than Ever Before," Center for Society and Health, January 2014. http://societyhealth.vcu.edu/med ia/society-health/pdf/testfolder/CSH-EHI-Issue-Brief-1.pdf



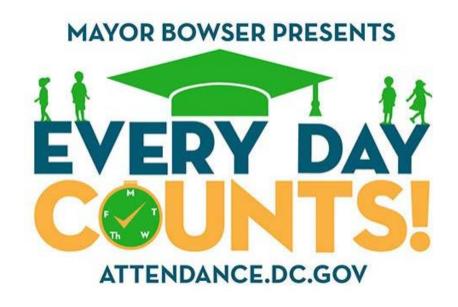
Why Do Children Miss School?

- Chronic Illness
 - Asthma accounts for 1/3 of all missed school days
 - Dental caries
- Mental Health
 - Student
 - Parent
- Political Climate
 - Fear of deportation
- Acute Illness and Misunderstood Medical Reasons
- School Climate
- Barriers
 - Transportation
 - Homelessness
 - Food Insecurity



Why Focus on Chronic Absenteeism?

- Chronic absenteeism is strongly predictive of ultimate academic achievement
- Citywide campaign and metrics





Alignment with Community Health Needs Assessment

The 2016 DC Community Health Needs Assessment (CHNA), conducted by Children's National Health System (CNHS) as part of the DC Healthy Communities Collaborative, identified four top priority areas:



Mental Health



prevention and treatment of psychological, emotional and relational issues that lead to higher quality of life

Place-based Care

care options that are convenient and culturally sensitive



Care Coordination

deliberate organization of patient care activities & info sharing protocols to achieve safer, more effective care



Health Literacy

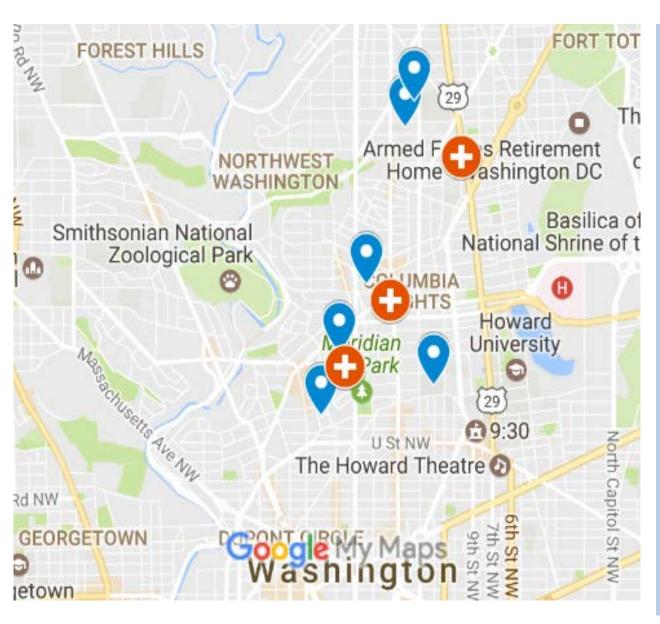
ability to obtain, process, and understand basic health information to make appropriate health decisions

Chronic Absenteeism Reduction Effort (CARE)

- Washington, DC and Baltimore City, MD are working to implement a pilot to share school attendance data with child health providers via an electronic health information exchange – CRISP
- Regular data feed to practices
- Physician and practice training
- Attendance Toolkit
- Development of response protocols in pediatric practices



CARE Pilot Sites - DC



Clinics

- Children's National –
 Adams Morgan
- Mary's Center
- UHC Upper Cardozo

Schools

- Bancroft Elementary
- Cardozo Education
 Campus
- Columbia Heights
 Education Campus
- Marie Reed Elementary
- H.D. Cooke
 Elementary
- Powell Elementary

Consent & Process

- Intensive engagement with staff, parent teacher advisory groups
- Letter and consent form included in school enrollment package
 - Consent obtained from families of more than 2300 students (~80 percent enrollment at pilot schools)
- Memorandum of Understanding and data linkage between Student Information System and Health Information Exchange



Pilot Evaluation: Process Measures

- # families consented in school and practice settings
- # students who have data in Health Information Exchange on attendance
- # protocols developed to address attendance data
- Formation of collaborative working group representing health department, school system, clinical providers, community-based organizations that serve youth



CARE Vision

- Long-term vision:
 - Decrease chronic absenteeism
 - Align resources and supports for students
 - Improve long-term academic and health outcomes
 - Seamless data flow with clear protocols for communication
 - Data flow does not depend on individual leadership but is part of public health structure



Collaborative Benefits for Children

- Better integration of care, services and supports to improve child health outcomes, which are impacted by academic achievement
- Moving resources and programs out of silos



Collaborative Benefits for Education and Health Departments

- Providing value-based care that is cost-effective and does not duplicate services or resources
- Creating a business case to invest in health and education coordination
- Demonstrating innovative approach to improving child health



Collaborative Benefits for Health Systems

Clinical Care

- Engage children in clinical care
- Address clinical issues that impact school attendance
- Transition to value-based care and population-based payments

Research

- Collaborative metrics
- Large-scale data sharing and evaluation with CRISP
- Grant funding
- Publications

Advocacy

 Develop joint legislative advocacy priorities, such as increased mental health services in schools, Medicaid funding for children

Education

Develop joint curriculums in school health for trainees, faculty, staff



Questions from the Audience



TEAM UP FOR ATTENDANCE:

Attendance Awareness Campaign 2018



Proposed Webinars and Schedule for 2018



- **Leadership Matters (3/28)** will show the crucial role leaders play in mobilizing their communities to action.
- Working Together Matters (5/8) will focus on building and training teams in schools with robust participation from community partners.
- Community Matters (8/15) will focus on the role that a variety of key community partners can play in helping to reduce chronic absence.
- **September Brief (9/12)** will showcase our brief highlighting bright spots where successful strategies to address health barriers have reduced chronic absenteeism

Next Steps

What is one action you're going to take to address health-related barriers to attendance at your school/district/county/state?





Organizations that we work with:

Everyone Graduates Center: http://new.every1graduates.org

Attendance Works: http://www.attendanceworks.org

MENTOR: http://www.mentoring.org

My Brother's Keeper Alliance: https://www.mbkalliance.org

Jobs for the Future: http://jff.org

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