Section Two

Taking action to address health-related chronic absenteeism can have a powerful impact on students’ academic success and well-being for a lifetime. This document focuses on preparing educators—particularly school district decision-makers—with knowledge and practical guidance for creating such meaningful change.

This section focuses on identifying key issues and tailoring your strategy to address the factors that are having the biggest impact on attendance.

To access the full toolkit, please visit: healthyschoolscampaign.org/chronic-absenteeism
Identifying Health Issues in Your Community

Students are absent for many different reasons, and no two communities are alike. Even more so than with other issues, it is important to identify what is happening in your community and tailor your strategy to address the factors that are having the biggest impact on student attendance.

A key step toward addressing the health-related causes of chronic absenteeism is understanding children’s health needs in your community. This understanding can play an important role in informing the types of services and programs you and your partners implement in schools and in the community to support better attendance. This review of health needs can focus on the prevalence of health conditions such as childhood asthma and tooth decay.

It is also critical to consider social, economic and environmental factors in the community and school to understand the full scope of children’s health needs within your community and intervene accordingly. These factors could include:

- Rates of access to clinical care, and where children access that care
- Unemployment rates
- Rates of violent crime
- Air pollution levels
- Housing trends
- Rates of food insecurity

Factors you identify in any of these areas may lead you to additional relevant data points.

Key Data Sources

Key sources of public data can shed light on the issues affecting students and their health. These sources of data include:

School health information cards. Students across the country are required to submit health cards to the school they are enrolled in at the start of each school year. These cards include key information regarding student health conditions, immunizations and medications. Compiling and examining this data can provide valuable information regarding the health of students in a given school and can be used to inform the delivery of school health services and programming.

Public health data systems. City and county departments of public health track and share data regarding the health of their residents. This data can typically be broken down by age group, race, gender and ZIP code and can serve as an important tool in identifying the primary health conditions among children in a given area. Contact your local public health department to see what children’s health data they collect and are able to share.

Hospital community health needs assessments. Non-profit hospitals are required to conduct community health needs assessments once every three years in order to maintain their non-profit status. These assessments are used to guide their investment in the communities they serve. As a result, non-profit hospitals serving a given school district have data that can help schools better understand the health needs of their students. Reach out to the community benefit director of your local non-profit hospital to see if they are able to share the most recent results of their community health needs assessments.

County Health Rankings & Roadmaps. County Health Rankings & Roadmaps is a tool developed by the Robert Wood Johnson Foundation that measures the health of nearly all counties in the nation and ranks each county within its state. The rankings are based on a model of population health that emphasizes the many factors that, if improved, can help make communities healthier places to live, learn, work and play. Key measures included in the County Health Rankings & Roadmaps are health outcomes, health behaviors, access to clinical care, social and economic factors and measures of the physical environment. You can access this tool at www.countyhealthrankings.org.
Youth Risk Behavior Survey. The CDC’s Youth Risk Behavior Survey, while focused primarily on risky behavior rather than underlying health issues, includes valuable data such as rates of asthma and obesity. Depending on your location, the survey data may be available at a county or district level.

State-level surveys. Surveys such as the California Healthy Kids Survey, are a valuable resource in states where they are available.

In addition to understanding the student health needs in your community, this data can be used to make the case to both the health and education sectors about the need to work together to support student health and success. Once you have developed a better understanding of student health needs, this information can be shared with key decision makers and used to inform the services and programs that are implemented to address chronic absenteeism.
Case Study: Unique Partnership Ensures Austin Students Have Access to School Health Services

When a budget crisis in the late 1990s forced the Austin Independent School District (AISD) to look at cutting all school nurse and health positions in the district, local health care providers came together with district leadership to find a solution.

That solution was for AISD to partner with Dell Children’s, the pediatric center for Seton Family of Hospitals, to provide school nurses and health staff in AISD schools.

“They understood that if you didn’t have school nurses, kids would be showing up in the emergency room,” says Sally Freeman, the director of the Children’s/Austin ISD Student Health Services program.

Initially, the entire program, including staff, was funded by the hospital, but the burden shifted back to the district within just a few years as the district got back on its feet financially. Today, the district pays for the full cost of the nurses’ and health staff’s salaries, while the hospital contributes about $650,000 worth of in-kind support, including human resources and legal services, management and oversight and continuing education for the health staff.

The program includes both school nurses and health assistants. More than 75 school nurses, covering about four schools each, provide care to the district’s more than 80,000 students.

“School nurses serve as a triage person,” Freeman says. “They help families to determine what level of care their child would need, whether that’s going to the hospital or waiting to see their pediatrician.”

From the start, Freeman says, the hospital kept detailed data on cost and outcomes, which allows the program to track its success. One of the focuses has been to prevent hospitalization, especially when it comes to students dealing with complex medical conditions.

“One of the things we’ve been able to do is help coordinate the specialist kinds of care that helps that child be healthy in the school setting,” Freeman says.

Another factor that allows this program to tailor itself is the model it uses to determine the needs of each school, called an acuity model. Every year, the program does an acuity analysis which looks at school enrollment; rates of free and reduced price lunch, which helps estimate insurance coverage and access; the number of illness or injury contacts for the previous year; and the number of students who received case management due to chronic conditions such as asthma and diabetes. All of those factors are weighted, and an analysis determines how many hours of a school nurse’s and a health assistant’s time a school might need.

This type of analysis is gaining traction in the school nursing world, Freeman says.

“This allows us to address the needs of each school in a fair and equitable manner,” she says.

In addition to constantly evaluating the needs of each school, the program also responds to changing needs within the district as a whole. One issue that has come to the forefront in recent years is behavioral health. To respond to that concern, the program developed a pilot program that contracted licensed social workers to see students during the day. The school nurses act as a referral coordinator. The students with behavioral health issues who receive counseling have fewer discipline referrals and are more likely to pass their classes and move on to the next grade.

This amazing partnership is just one example of how a forward-thinking health system and a school district can partner together to ensure that students are getting the health care they need.
Stay connected!

We invite you to learn more, access resources and lend your voice to the dialogue about healthy schools.

For questions or to discuss this issue, please contact Alex Mays, National Program Director, at alex@healthyschoolscampaign.org.

Learn more and sign up for updates from HSC at healthyschoolscampaign.org.

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