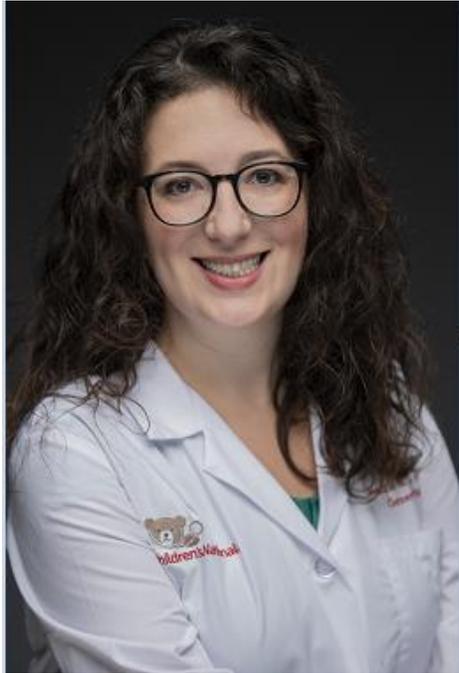




School Attendance as a Vital Sign for Pediatric Health

Introductions



Jessica Weisz, MD, MBA, FAAP

Attending Physician, Children's Health Center at Columbia Heights

Affiliate Faculty, Child Health Advocacy Institute

Associate Professor of Pediatrics, The George Washington University
School of Medicine and Health Sciences

President, DC Chapter of the American Academy of Pediatrics



Abby Lutz, MS

Project Manager, CRISP DC



Chronic Absenteeism



- Chronic absenteeism broadly refers to missing too much school for any reason, including excused and unexcused absences as well as suspensions.
- The US Department of Education's Office of Civil Rights defines this as missing 15 or more days over the course of a school year.
- Some organizations suggest using 10% (DCPS), because it promotes earlier identification of poor attendance throughout the school year.
 - For example, identifying students who have missed just 2 days in the first month of school predicts chronic absence throughout the year.



Why Chronic Absenteeism Matters

- Studies have shown chronic absenteeism is associated with:
 - Grade retention
 - Poor academic achievement
 - **Example:** National studies have shown that absences in pre-kindergarten and kindergarten are associated with weaker reading proficiency in the third grade and poorer social skills. By middle school, absenteeism becomes a leading indicator that students will drop out of high school.
 - Engaging in health risk behaviors can include smoking cigarettes or marijuana, alcohol and other drug use, and risky sexual behavior
 - Juvenile delinquency
 - **Example:** In a study of youth in Mississippi from 2003 to 2013, authors found that those with chronic absenteeism had 3.5-times higher odds of being arrested or referred to the juvenile justice system



Factors that Contribute to Chronic Absenteeism

Social Factors

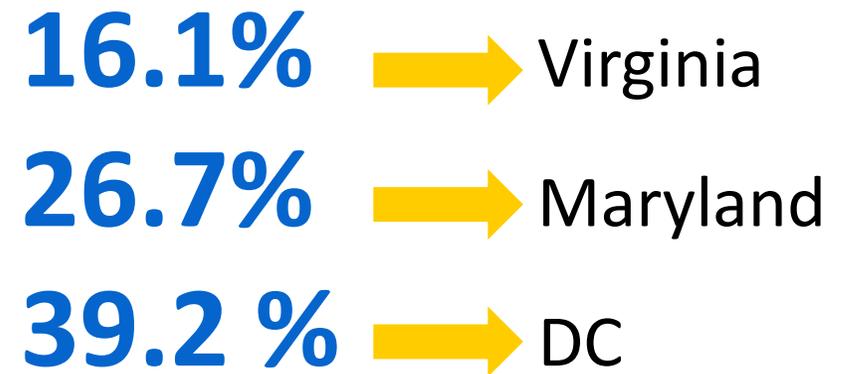
- Exposure to trauma
- Poverty
- Safety concerns
- Housing instability
- Access to:
 - Food
 - Transport
 - Healthcare

Health factors

- Parental physical or mental health issues
- Type I and II Diabetes Mellitus
- Seizure disorders
- Obesity
- Asthma
- Oral health and dental pain
- Influenza
- Anxiety
- Depression

School Absenteeism in the District and Beyond

- **Region:** During the 2023-2024 school year, the following percentage of all public school students were chronically absent:
- **The District:** According to The Office of the State Superintendent's (OSSE) finds that **one in four** kids in DC are chronically absent from school – which means missing 10 percent or more of the school year. At some DCPS high schools, **three out of four** students are chronically absent.





Impact of AAP Policy Statement on School Attendance

- In February 2019 , AAP released a policy statement regarding the important role pediatric providers play in addressing school attendance.
- **AAP Recommendation:** Pediatricians could address school attendance in their office-based practices and communities and/or states or nationally as advocates using a tiered approach. The office-based approaches could include members of the health care team, such as front office staff, medical assistants, nurses, or care coordinators, to reduce the burden on the pediatrician.

American Academy
of Pediatrics



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The Link Between School Attendance and Good Health

Mandy A. Allison, MD, MSPH, FAAP,^a Elliott Attisha, DO, FAAP,^b COUNCIL ON SCHOOL HEALTH

Leveraging the HIE



1. **CEND (CRISP Event Notification Delivery) Solution:** Backend logic that supports matching patients on the pediatrician's patient panel, to the students who have consented to having their attendance data shared.
2. **Direct:** Files are delivered directly to the Children's care team at the specific participating practice on a weekly basis via Direct, the national standard for secure email.



Absenteeism Data in the HIE

HIE InContext GILBERT GRAPE
Male | Jan 1, 1984

HEALTH RECORDS ENCOUNTERS PROBLEMS VISIT SUMMARIES IMMUNIZATIONS ALLERGIES VITALS PROCEDURES

School Attendance Data SCHOOL: DC Local School 10032 TOTAL DAYS MISSED: 138 TOTAL DAYS MISSED LAST 30 DAYS: 4 TOTAL DAYS OF SCHOOL: 180
PERCENTAGE OF DAYS MISSED: 77%

ALL LABORATORY RADIOLOGY CLINICAL NOTES

Health Records

Date Collected (ET) ↓	Source	Category	Description	Provider
2025-10-07	St. Agnes Hospital	Laboratory	URINALYSIS WITH MICROSCOPIC	KOWDLEGOP GOPAL KOWDLEY
2025-09-17	Maternal Opioid Misuse Care Plan	Clinical Notes	MOM Care Plan Substantive Outreach	Maternal Opioid Misuse Care Plan
2025-09-17	Maternal Opioid Misuse Care Plan	Clinical Notes	MOM Care Plan Ongoing	Maternal Opioid Misuse Care Plan

School

Name of school associated with each student

Total Days Missed

A tally of the absences for each student in the current school year

Total Days Missed in Last 30 Days

Running Total of absences in the past 30 days

Total Days of School

Running total of school days in the current year

Percentage of Days Missed

Current percentage of days missed out of total school days up until the current date



CARE-H: Case Study Use

- CARE-H is a data sharing partnership between DC Public Schools (DCPS), CRISP DC, and Children's National that leverages existing CRISP DC HIE services to deliver weekly absentee data to providers.
- Students who are healthy are better able to come to school and learn. As a result, parents or guardians who consent to sharing attendance information will allow their child's care team to provide special outreach and medical attention to children that might be missing school and their families.
- **Year 1: SY 21-22**
 - Six School Pilot
- **Year 2: SY 22-23**
 - 14 School Pilot
- **Year 3 to present: SY 23-24, 24-25, 25-26**
 - All DCPS schools eligible
- **2 goals:**
 - Conduct outreach to children with the highest number of absent days to identify any underlying and related health issues
 - Align resources and support to students to improve long-term academic and health outcomes



CARE-H: Case Study Use

How does this help students in the District?

- Doctors, nurses, and their staff can provide special outreach and medical attention if the student might be missing school.
 - For example, the pediatric provider may be able to recommend a new or different medication to help make the student feel better and to better control the student's asthma, allergies, or other condition. The medical care team may also be able to support other common issues for attending school, such as transportation or childcare needs.



FERPA and Required Consent



FERPA

- The Family Educational Rights and Privacy Act prohibits educational institutions from disclosing “personally identifiable information in education records” without the written consent of an eligible student, or if the student is a minor, the student’s parents.
- FERPA covers attendance data and CARE program participation requires individual opt-in student/guardian consent before the data can be shared with the HIE.
- The consent permits the sharing of the child’s absenteeism record to their providers and other members of their care team and continues through the child’s enrollment at DCPS unless consent is withdrawn in writing. Consent can be withdrawn at any time.



CARE Project Consent for Students Over 18 Years of Age

Health is important to success in school. My school is partnering with local doctors and nurses through the Chronic Absenteeism Reduction Effort (CARE) Project to help keep our students healthy and successful at school. Please complete the form below to give consent to participate.

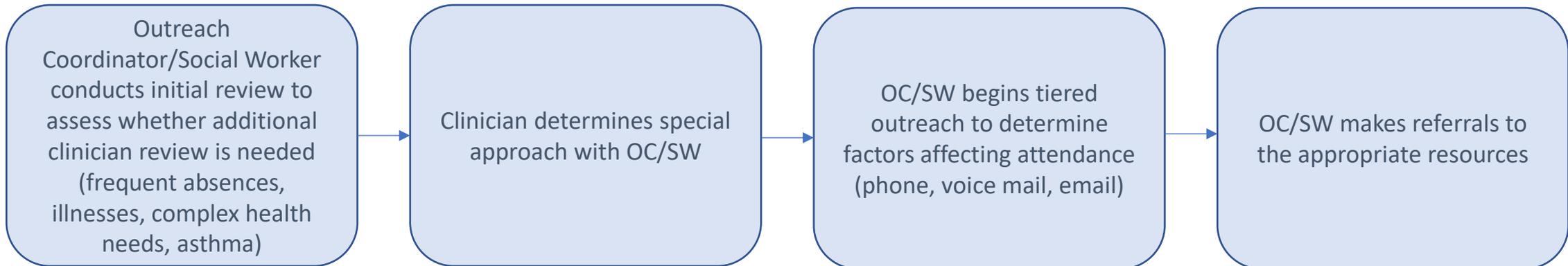
I am _____.
(Student’s Name and Date of Birth)

By signing below, I give permission to participate in the CARE Project, and I give consent to my school or others at DCPS to share and discuss my attendance records with my doctor, nurse, and medical office staff. This will allow DCPS to work with these health care professionals to keep me healthy and successful at school.



Case Study: Addressing Chronic Absenteeism in Primary Care

- Once the Children's team receives the attendance report, they categorize the students by tiers
 - **Definition of each tier changed with PDSA cycles**
 - **Priority outreach:** recent hospitalization or ED visit
 - Additional outreach based on number of absences in last month
- The categorization into tiers assists with understanding the needs of students within each tier and making sure additional outreach is given where needed





Case Study: Addressing Chronic Absenteeism through Referrals

Internal

- Triage to internal resources such as parent navigators or the dental clinic

External

- Refer to external socioeconomic resources (federal programs, city agencies, medico-legal partnerships, non-profits, and FindHelp)
- Refer to external health or education resources (dental, behavioral health, school IEP team, school 504 coordinator)

Clinical

- Schedule in-person or telehealth follow-up with PCP (ex: further assistance with managing an acute or chronic illness)



Case Study: CARE-H Outreach Success Stories

- **9-year-old:** COVID-related hospitalization, poorly controlled asthma– connected with primary care for asthma control visit; back in school no longer on absence list
- **6-year-old:** Disengaged from virtual learning – social worker working with family and school to determine eligibility and establish a plan for return to in-person instruction
- **7-year-old:** Returning to in-person instruction, needed Epi-Pen and Allergy Action Plan– coordinated with PCP and child to make them ready for return to school

Other Outcomes:

- *Connections to legal aid, housing assistance, WIC, DC CARES*
- *Scheduled well child visits*
- *Fielded COVID Vaccine Questions– developed protocol for routing these to telehealth encounters so families can speak with the pediatrician*
- *Bi-directional partnership – HS involved with the pilot reached out to Children’s Outreach Coordinator to connect student struggling with mental health with support*



CRISP DC related inquiries please contact outreach at dcoutreach@crisphealth.org.

For support contact support@crisphealth.org or call 833.580.4646.

800 Maine Ave SW, 2nd Floor
Washington, DC 20024
833.580.4646 | www.crispdc.org
dcoutreach@crisphealth.org