

Chronic Student Absenteeism

The Critical Role of School Nurses

Kathleen Jacobsen, MPA, RN Linda Meeder, MS, RN, FNP, NCSN Vicki R. Voskuil, PhD(c), RN, CPNP

Routine school attendance is necessary for youth to develop into well-educated, successful adult citizens who will make significant contributions to society. Yet over 5 million students in the United *States are chronically absent missing* more than 10% of school in a year. The growing problem of chronic absenteeism among youth can be linked to increases in chronic health conditions in childhood such as allergies, asthma, diabetes, and obesity. School nurses are in an ideal position to play a vital role in reducing chronic student absenteeism, enabling youth to achieve their maximum *learning potential. However, the role of* the school nurse has not historically been recognized as a key factor for assisting youth to be present and regularly engaged in school. This feature article *highlights a hospital-funded school nurse* program within the state of Michigan that has reduced chronic absenteeism rates by placing school nurses into schools where previously there were none. The program implemented a number of initiatives that were instrumental in increasing the health and safety of students and provides a unique "before and after" glimpse of how school nursing reduces cbronic student absenteeism rates and

validates the essential role of the nurse within the educational system.

Keywords: attendance; chronic absenteeism; school nursing; student health

egular school attendance for children n is critical for achieving educational Tand health outcomes in school. Routine attendance enables children to acquire important lifelong skills such as problem solving, social competence, and the ability to work with others (Kearney & Graczyk, 2014). Conversely, children who are frequently absent from school are more likely to have lower standardized test scores and lower proficiency in reading and math and are more likely to drop out of school in later grades (Balfanz & Byrnes, 2012). Children who repeatedly miss school in early grades are more likely to continue a pattern of chronic absence in subsequent grades, along with lower academic performance (Gershenson, Jacknowitz, & Brannegan, 2015).

Schools have primarily focused on student attendance rates as an overall measure of school performance, and in many cases high attendance rates assist schools in securing adequate funding (Bruner, Discher, & Chang, 2011). However, the use of attendance rates alone is not a sufficient measure of success and may conceal rates of chronic absence. Balfanz and Byrnes (2012) emphasize that a school may have an average attendance rate of 95%, but because different students will be absent on different days, these same schools may have chronic absence rates as high as 30% to 40%.

Chronic absenteeism has been defined in different ways. The most widely used definition refers to children who miss 10% or more of school in one year, which amounts to approximately 18 or more days of school (Balfanz & Byrnes, 2012). Chronic absenteeism includes all absences, both excused and unexcused. Unexcused absence, also referred to as truancy, underestimates the problem of chronic absenteeism because younger children are not usually absent without their parents' knowledge (Ginsburg, Jordan, & Chang, 2014).

The problem of chronic student absenteeism has largely been overlooked and underdocumented but is detrimental to children as early as kindergarten.

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Gottfried (2014) found that

kindergarteners with high rates of chronic absenteeism demonstrated lower reading and math scores and had the largest declines in educational and social abilities. Chronically absent elementary students living in poverty have an even greater risk for poor educational outcomes (Nauer, Mader, Robinson, & Jacobs, 2014). Chronic absenteeism increases as children age, and chronic absence among middle school students serves as a warning sign for dropping out of high school (Chang, Gomperts, & Boissiere, 2014). Chronic absenteeism rates among high school students have been linked to poorer academic outcomes, increased high school dropout rates, and increased juvenile delinquency (Rumberger, 2011). Approximately 40% of students in 10th grade who miss 10 or more days of school will not graduate from high school (Balfanz & Byrnes, 2012).

Although the actual number of chronically absent students is not fully known, research suggests that more than 5 million children are chronically absent each year (Balfanz & Byrnes, 2012). Factors contributing to chronic absenteeism are numerous and include acute illness, housing instability, unsafe or violent living conditions, avoidance of bullying and harassment, school phobia, and family responsibilities such as caring for younger siblings. (Balfanz & Byrnes, 2013). Absenteeism is also linked to chronic physical and mental health conditions including asthma, allergies, diabetes, obesity, seizure disorders, anxiety, and attention deficit disorder (Grant & Brito, 2010).

The number of children with a chronic health condition has increased substantially over the last four decades (Van Cleave, Gortmaker, & Perrin, 2010), contributing to increased rates of chronic absenteeism. Childhood asthma prevalence increased from 2001 to 2010, affecting 7 million children from birth to 17 years of age in the United States (Akinbami et al., 2012). Children with asthma miss school for many reasons including symptoms, doctor visits, sleep deprivation, and hospitalizations (Basch, 2011). The number of children with allergic conditions increased from 1997 to 2011 with food allergy prevalence increasing by 50% during this time frame. Allergies are now considered to be one of the most common medical conditions among children in the United States (Jackson, Howie, & Akinbami, 2013). Rates of obesity among children and adolescents have also increased dramatically with 31.8% of youth overweight or obese and 16.9% obese (Ogden, Carroll, Kit, & Flegal, 2014). Chronic absenteeism has been shown to be higher among obese children than their healthy weight peers (Kersh, Stroup, & Taylor, 2011).

Finding solutions to the problem of chronic absenteeism is critical for enhancing educational outcomes for youth. School nurses are focused on optimizing student health and learning and can make significant contributions to reducing chronic absenteeism. While school nurses are in an ideal position to improve the health and safety of all students, particularly those with chronic conditions, documentation of school nursing interventions specifically targeting chronic absenteeism is lacking (Lineberry & Ickes, 2015). Bergren (2011) has called for the need to use nursesensitive outcomes to validate the role of the school nurse. Chronic student absenteeism is a nurse-sensitive outcome that can provide support for the critical role of the school nurse. The purpose of this article is to demonstrate the impact of school nursing in reducing chronic student absenteeism by highlighting a unique hospital-funded school nurse program in the state of Michigan.

The Role of School Nursing in Reducing Chronic Absenteeism

School nursing and efforts to reduce chronic student absenteeism have a long history beginning in the early 1900s. In 1902, Lina Rogers, a pioneer in school nursing, was able to successfully show the correlation between the reduction in absenteeism and healthy children. Today, the goal of school nurses is the same as it was in 1902: to promote health in school children allowing them to regularly attend school and be in the classroom ready to learn (Schumacher, 2002). Much has changed in school nursing practice from a public health perspective to independent decision making and problem solving. School nurses provide a number of vital services to increase the health of children, including managing chronic conditions, tracking infectious diseases, providing emergency care, and ensuring that children are connected to a health care provider (Institute of Medicine, 2011; NASN, 2012).

School nurses are cost-effective and can save a considerable amount of time for principals, teachers, and clerical staff. In fact, a school nurse in a building can save principals an hour a day, teachers 20 minutes per day, and clerical staff more than 45 minutes a day (Baisch, Lundeen, & Murphy, 2011). Also, school nurses can directly impact a student's ability to succeed in school by increasing time present in the classroom and supporting a safe environment for learning (Baszler et al., 2015). Pennington and Delaney (2008) report that school nurses reduce the number of students who leave school during the day because of illness or injury and improve attendance by students not being sent home unnecessarily. School nurses are at the forefront for reducing chronic absenteeism, and attention devoted by school nurses to track schoolwide chronic absenteeism data is a necessary nursing intervention.

Beginning in the 1970s, a school nurse-to-student ratio of 1:750 in a healthy school population was recommended (NASN, 2015a). The state of Michigan ranks last among all states with a ratio of 1:6,600, leaving schools and families ill equipped to respond to the health needs of students. However, use of a universal ratio for school nurse workload determination fails to address the progressively complicated medical needs of today's students (NASN, 2015a). Safe school nurse staffing requires more than just a recommended ratio and should be based on student acuity as well as the impact of social determinants and health disparities in the community (Centers for Disease Control and Prevention, 2014). Providing adequate

Table 1. Characteristics of Schools Served by the Munson Healthcare Charlevoix Hospital (MHCH) School Nurse Program

School	School Type	Student Enrollment	Free/Reduced Lunch Status (%)	Nurse FTE
MHCH School 1	Public	164	34	0.33
MHCH School 2	Charter	193	16	0.25
MHCH School 3	Public	158	57	0.25
MHCH School 4	Public	312	49	0.33
MHCH School 5	Public	1,137	36	1
MHCH School 6	Public	970	56	1
MHCH School 7	Public	245	57	0.33
MHCH School 8	Charter	96	66	0.25
MHCH School 9	Private	80	Not reported	0.25

Note. MHCH=Munson Healthcare Charlevoix Hospital; YR=Year; *Includes one school not in Intermediate School District; **School nurse program began February 28, 2011. Source: https://www.mischooldata.org

school nurse staffing and case management to reduce chronic student absenteeism may provide a unique solution to advance the health of our nation's children (NASN, 2015b).

School Nursing and Chronic Absenteeism: An Exemplar

Munson Healthcare Charlevoix Hospital (MHCH) is a community-based 25-bed critical access hospital located in Michigan's Northern Lower Peninsula. The hospital has served this region for almost 100 years as the primary health care provider for Charlevoix and Antrim Counties and has approximately 1,500 inpatient admissions and 29,100 outpatients per year. In 2010, leaders from MHCH and its foundation recognized a great need for school nurses in area schools. They had long been cut from school budgets, and the medical management of students had fallen to school staff. The hospital met with school administrators and area physicians to discuss a hospital-funded school nurse program. Program approval was granted after the first meeting, and in 2011 MHCH school nurses entered nine area school systems where previously there were none. State and

local grants, as well as hospital fundraising efforts, initially funded four full-time registered nurses for three years to work in area schools (six public, one private, and two charter schools) located in a rural community with approximately 33% of children living in poverty. Recognizing the program's positive impact and measurable outcomes, the hospital reaffirmed its commitment to the community and has integrated all program costs into its annual budget. See Table 1 for characteristics of each school serviced by the school nurse program.

A number of significant educational and health-related improvements have been observed since the program began, contributing to reduced chronic absenteeism among students. Figure 1 illustrates the chronic absenteeism rates in MHCH schools compared to schools without nurses. Due to the numerous vears without school nurses in the MHCH service area, programwide gaps were discovered such as lack of record keeping and missing and outdated student medical management plans. As a result, the first year of the program focused primarily on school staff education. Student medical management plans were either created or revised in

collaboration with area school boards. These initial efforts were the first steps to improve the health and safety of students.

The program works closely with hospital specialists as well as superintendents, principals, teachers, and parents to provide access to care to over 3,300 students annually. Because of the unique nature of the program, the nurses have the ability to utilize hospital resources to manage health concerns arising from chronic conditions. For example, a hospital dietitian can teach carbohydrate counting to school staff and students the same day that the need is identified. In one middle school, the dietician's visit prompted an immediate change of the 4-week cafeteria menu to include carbohydrate counts. This addition to the menu has led to increased accuracy with self-administered insulin and resulted in improved blood glucose levels for the school's diabetics. Similarly, a hospital respiratory therapist can educate staff, students, and families, instruct in tracheostomy care and suctioning in the school setting, evaluate equipment, and provide recommendations. When the nurse requires unexpected medical supplies, a same-day, often same-hour delivery from the hospital can be made to

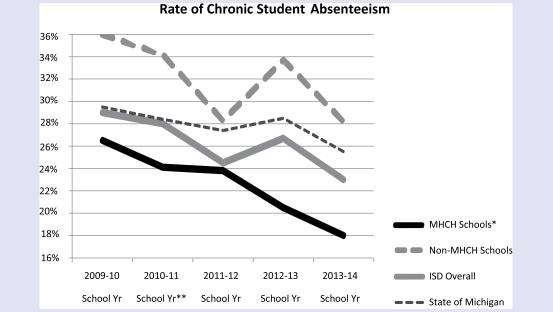


Figure 1. Rate of Chronic Student Absenteeism in Munson Healthcare Charlevoix Hospital School Nurse Program

Note. MHCH=Munson Healthcare Charlevoix Hospital; YR=Year; *Includes one school not in Intermediate School District; **School nurse program began February 28, 2011. Source: https://www.mischooldata.org

expedite the needed care or treatment. It is the school-based program's symbiotic relationship with the community hospital that promptly links key players in students' care, helping to keep children in school.

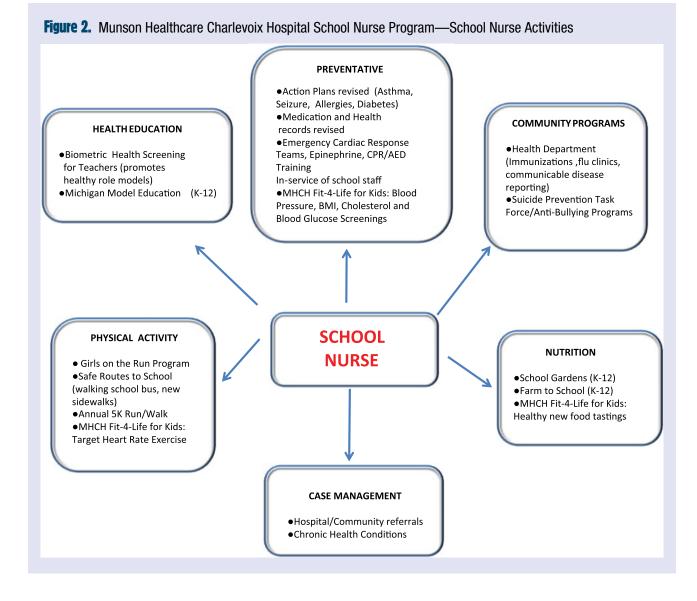
The MHCH School Nurse Program embraces the fact that not all schools are identical and the nurses are encouraged to design programs that meet the individual needs of their specific school. As a result, two MHCH school nurses serve on the intermediate school district's suicide prevention task force and facilitate school and community outreach programs. Another nurse has certified approximately 100 school personnel and over 550 students in cardiopulmonary resuscitation (CPR) and automatic external defibrillator (AED) training. It is a goal of the program for all graduating seniors to be CPR certified.

In addition, one nurse has been awarded school garden and "Farm to School" grants that have transformed the school's lunch menu from "heat and serve" to "farm to table" style. The menu resembles that of a fine restaurant, rather than a school cafeteria, utilizing local farms and orchards. For example, students are still offered pizza every Friday, but it is made with homemade whole wheat crust and healthy toppings. A "Safe Routes to School" grant was also awarded in 2013 from the Center for Safe Routes to School through the Michigan Department of Transportation. As a result, a walking school bus program was established in the community and sidewalks will be added in the spring of 2016, facilitating children safely walking to school. See Figure 2 for a summary of school nurse activities.

While the MHCH School Nurse Program has reduced absenteeism among participating schools, MHCH School 8, a charter school with a 66% free and reduced lunch rate, has seen a dramatic 32% decrease in chronic absenteeism rates, highlighting the vital role nurses have among the most vulnerable children and adolescents. Figure 3 shows the decrease in chronic absenteeism rates from 2009-2010 to 2013-2014 for this charter school.

In this school, the nurse is present only one day per week and focuses on the highest priority needs of students. Basic hygiene such as hand soap in the bathrooms, toothbrushes and toothpaste, deodorant, and other personal care items were identified as a need and are being provided. Winter coats, mittens, hats, snow pants, and boots are supplied for those in need. In many cases, scarce or no parental involvement makes sending a child home with a medical concern difficult as many families have no transportation or identified medical home.

This school has had an increase in community referrals since the arrival of the school nurse. The nurse offers consistency and serves as the case manager for the health care needs of the students. When referrals were initiated previously, there was sporadic follow-up. The nurse not only provides professional assessment skills, but is there to oversee care as the student progresses from one grade to the next. In one instance, the nurse assessed occupational and speech therapy needs which had previously been overlooked. She initiated the referral process, coordinated care conferences, and provided case management. She educated the teachers regarding updated plans of care and student progress, facilitating the transition from one



classroom to the next. All of these efforts have contributed to improved student attendance at this school.

Implications

Solving the problem of chronic student absenteeism is essential to ensure that all children and adolescents reach their full educational potential. The recent establishment of *Every Student, Every Day: A Community Toolkit to Address and Eliminate Chronic Absenteeism* by the U.S. Departments of Education, Health and Human Services, Housing and Urban Development, and Justice (2015) underscores that this is a national priority. This new initiative is also fundamental for the Grad Nation campaign, which has set the goal of increasing high school graduation rates in the United States to 90% by 2020 (www.every1graduates.org).

School nurses are in an ideal position to be at the forefront of these initiatives. School nurses already decrease chronic student absenteeism in a variety of ways such as assisting families to access health care providers and educating parents, students, and staff on health issues (NASN, 2015b). Although there is some evidence that school nursing contributes to lower absenteeism rates, support for interventions specifically targeting chronic absenteeism by school nurses is lacking (Lineberry & Ickes, 2015). This feature article has contributed to the evidence that demonstrates the importance of the school nurse in reducing chronic student absenteeism by providing an example of a hospital-funded school nurse program.

Development of community partnerships, such as the hospital-funded school nursing program highlighted here, not only can contribute to reduced chronic absenteeism rates among students, but also can provide a way for hospital systems to validate their efforts aimed at improving community health. Recent mandates from the Affordable Care Act (ACA) of 2010 require nonprofit hospitals to demonstrate that they are improving the health of their communities to avoid stiff penalties. The

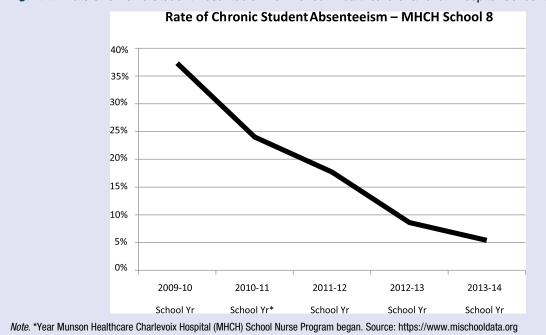


Figure 3. Rate of Chronic Student Absenteeism for Munson Healthcare Charlevoix Hospital School 8

MHCH school nurse program has proven to be a valuable community benefit, while at the same time helping to fulfill ACA requirements. The focus of ACA on preventative health has the potential to benefit current students and fits well with the mandate of school nursing (Mattey, 2015). Increasing the number of partnerships between schools and hospital systems may prove to be a useful method to demonstrate positive, sustainable outcomes that ultimately benefit children, families, and the community as a whole.

Limitations

This article has some limitations. First, while evidence suggests a link between reduced chronic absenteeism rates and the MHCH School Nurse Program, this conclusion needs to be replicated in future studies. Second, results of the MHCH School Nurse program are limited in generalizability given that they are from a rural area in the state of Michigan. Third, there may have been community programs and services that were not accounted for that contributed to reduced chronic absenteeism rates in addition to the MHCH School Nurse Program.

Conclusion

Reduced chronic absenteeism is a prime example of a sensitive outcome measure that has the potential to validate the vital role of school nurses. particularly as school systems move away from attendance rates and increase their focus on absenteeism. Simply focusing on student attendance does not provide a complete picture of which students and how many are frequently missing school. Moving forward, school nurses should develop innovative interventions for targeting, tracking, and measuring chronic absenteeism rates to build the evidence for their role. When available. school nurses can utilize state level data to examine the rates of chronic absenteeism in the schools they serve compared to those without a school nurse. School nurses should partner with pediatricians, community politicians, and local employers to create and implement strategies to eliminate chronic absenteeism. Communities, schools, and nurses, working together on this problem, can enhance health and

learning among youth. Our nation's school children deserve nothing less. ■

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Kathleen Jacobsen, MPA, RN Munson Health Care Charlevoix Hospital Charlevoix, MI

Kathleen is the Director of Community Health Education for Munson Healthcare Charlevoix Hospital. She is responsible for the design and implementation of the award-winning Munson Healthcare Charlevoix Hospital School Nurse Program. She also manages other health and wellness initiatives within Northern Michigan.

Linda Meeder, MS, RN, FNP, NCSN Michigan Department of Health and Human Services Lansing, MI

Linda is the Michigan State School Nurse Consultant for the Departments of Education and Health and Human Services. She is a consultant for several state-funded School Wellness Programs which provide school nursing and behavior health services to local schools.

Vicki R. Voskuil, PhD(c), RN, CPNP Michigan State University East Lansing, MI

Vicki is a PhD candidate and Jonas Nurse Scholar at Michigan State University College of Nursing. She is also an Assistant Professor of Nursing and the Curriculum and Program Director for the Hope College Nursing Department in Holland, Michigan.