



# Network to Advance State Attendance Policy and Practice



# **AGENDA**

- I. Health Guidance to Support Safe In-Person Learning**
- II. Federal 2021-2022 Chronic Absence Data Debrief**
- III. NASAPP End-of-Year Survey**

# INTRODUCTIONS

## *SHARE in the CHAT*

- **Your name**
- **Agency/State**
- **What's "THE BUZZ"?**

*Are there any emerging policy decisions or current events that have potential to change the landscape for attendance in your state?*

## **New Guidance:**

Considerations when  
a Child has Symptoms of Illness  
in Child Care or School

# Communicable Disease Strategy for Schools & Child Cares

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Getting Vaccinated

Indoor Air Quality

Using Face Masks

Maintaining Good Hygiene

Staying Home When Sick

Disease Reporting

Cleaning Facilities

Getting Tested



[CDPH Guidance 2023-24 School Year \(ca.gov\)](https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/2023-24-School-Year-Guidance.aspx)

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Getting Vaccinated → *CDPH Shots for Schools*

Indoor Air Quality → *CDPH IAQ Recommendations*

Using Face Masks → *CDPH Get the Most Out of Masking*

Maintaining Good Hygiene → *CDC Handwashing*

Staying Home When Sick

Disease Reporting → *Title 17 Regulations*

Cleaning Facilities → *CDPR Healthy Schools Act Training*

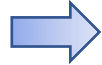
Getting Tested → *CDPH & Federal Resources*

[CDPH Guidance 2023-24 School Year \(ca.gov\)](https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Imz/2023-24/SchoolYear.aspx)

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*CDPH Shots for Schools*

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*CDPH IAQ Recommendations*

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*CDPH Get the Most Out of Masking*

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*CDC Handwashing*

Staying Home When Sick



*CDPH Symptom Guidance*

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*Title 17 Regulations*

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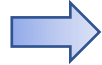
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*CDPH Shots for Schools*

Indoor Air Quality



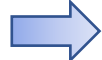
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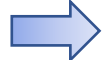
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**COMMUNICABLE DISEASE FRAMEWORK**



**NEW SYMPTOM GUIDANCE**








# Why?

Interest from many in **standardizing the approach** to individuals with symptoms who were COVID-negative (i.e., what do you do with fever, sore throat, runny nose in a child who *doesn't* have COVID?)



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- Interest from many in **standardizing the approach** to individuals with symptoms who were COVID-negative (i.e., what do you do with fever, sore throat, runny nose in a child who *doesn't* have COVID?)
- An ongoing/exacerbated **crisis of absenteeism**, and education is an important determinant of health. School health policies (albeit far from the only factor) can contribute to why children miss school and childcare.

## Please keep me home if . . .

I have a fever.	I am vomiting.	I have diarrhea.	I have a rash.	I have head lice/nits.	I have an eye infection.	I am congested and/or have thick, constant runny nose
						
Temperature of 100°F and sore throat, rash, vomiting, diarrhea, earache, or not feeling well.	Two or more times in 24 hours.	Three or more watery stools in 24 hours.	Body rash with itching or fever.	Itchy scalp.	White part of eye is pink and/or pus is draining from the eye.	Uncomfortable stuffed up feeling and/or runny nose.

## To return to school I need . . .

To be fever free without the assistance of medication for 24 hours. (i.e. Tylenol, Motrin, Advil)	To be free from vomiting for 24 hours.	To be free from diarrhea for 24 hours.		To be brought to the school nurse by my parent/guardian prior to returning to class.	To have clear eyes that are not draining. To have completed 48 hours of treatment.	To be fever free without the assistance of medication for 24 hours. (i.e. Tylenol, Motrin, Advil)
A note from my parent/guardian	A note from my parent/guardian	A note from my parent/guardian	 A doctor's note permitting me to return to school		 A doctor's note permitting me to return to school	A note from my parent/guardian

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- Outpatient providers during last winter's surge were inundated with **requests for clearance notes and asked CDPH to work with schools** to address the swell in demand for documentation

# The challenge before us:



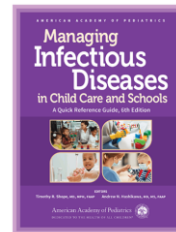
mitigating spread  
of serious, harmful diseases

*and*

avoiding unnecessary or  
excessive absence

# Why?


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- Outpatient providers during last winter's surge were inundated with requests for clearance notes and **asked CDPH to work with schools** to address the swell in demand for documentation
- There is **no readily accessible state or national resource** on this. AAP has an excellent manual, but it is not free, 270 pages long, and written in more technical language. The book's editor, along with AAP-California, are supportive of this guidance.



## Managing Infectious Diseases in Child Care and Schools, 6th Edition [Paperback]

A Quick Reference Guide

Timothy R. Shope, MD, MPH, FAAP and Andrew N. Hashikawa, MD, MS, FAAP

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# Why?

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- **Survey data** underscored a notion to proceed: 556 responses were received from 87% (53/61) of California's local health jurisdictions. 67% of respondents noted that school staff without licensed health training make determinations for temporary exclusion for symptomatic children. 73% of respondents rated potential statewide symptom-based guidance as "very" or "extremely useful". School/childcare lay staff were identified as the primary audience.

# How?

**TO:** All Californians

**SUBJECT:** Considerations when a Child has Symptoms of Illness in Child Care or School

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The guidance has been endorsed by the following California health organizations:

- American Academy of Pediatrics, California
- California Association of Communicable Disease Controllers
- California School Nurses Organization



**This guidance is intended to support decision-making for situations when an individual child has symptoms of illness in child care or school settings. General recommendations and symptom-based considerations are provided.**

Specific  
diagnosis? (e.g.,  
COVID-19,  
pertussis)

**Out of Scope**  
*(Do not use this  
guidance for  
these situations)*

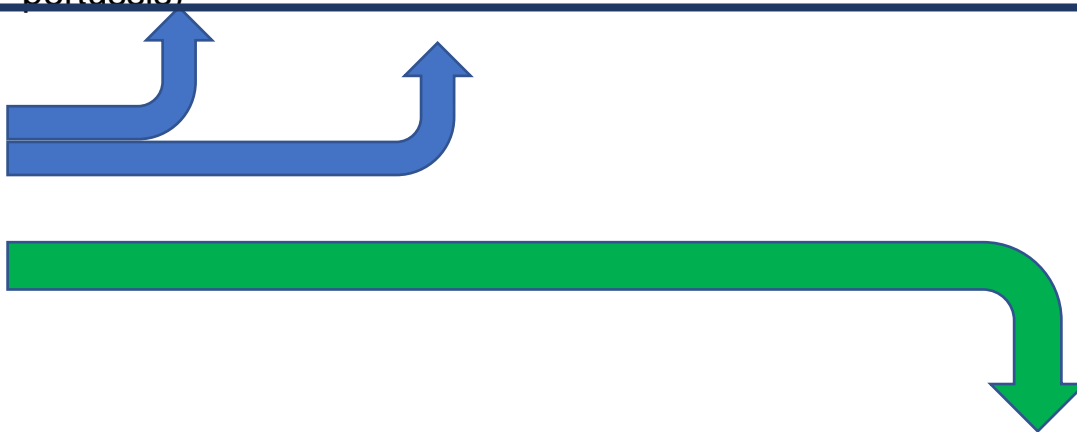


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Individualized assessment by a clinician?

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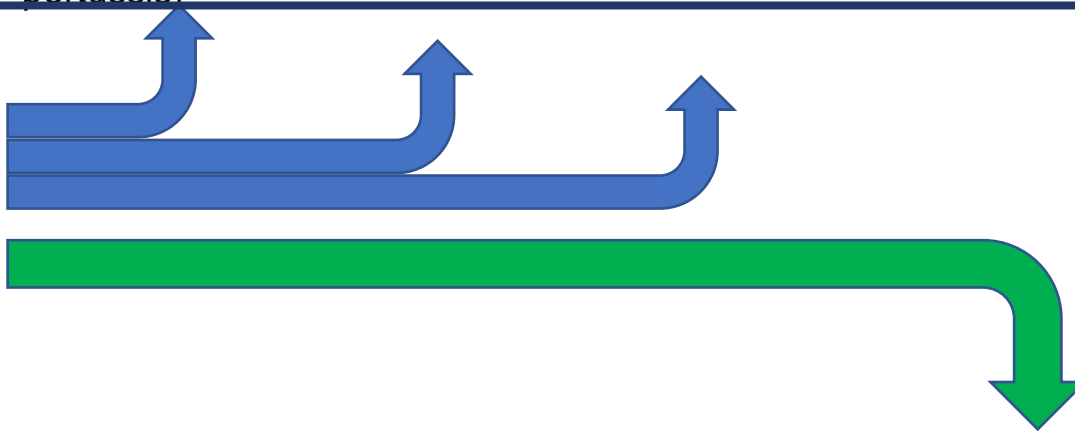


Specific diagnosis? (e.g., COVID-19, pertussis)

Individualized assessment by a clinician?

IEP/504 or existing care plan?

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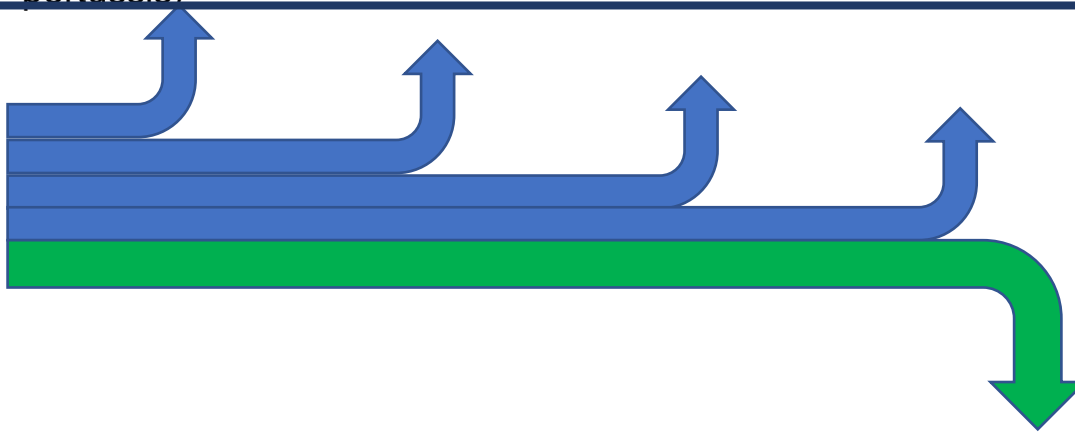
Specific diagnosis? (e.g., COVID-19, pertussis)

Individualized assessment by a clinician?

IEP/504 or existing care plan?

Concern for significant outbreak?

**Out of Scope**  
*(Do not use this guidance for these situations)*



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# Federal 2021-22 Chronic Absence Data Debrief



Data Source: [Ed Data Express](#) released September 15, 2023  
for SY 2021-22 Data + SY 2017-18 Data.

*Note: School level chronic absence data only available for SY  
2021-22 and SY 2017-18.*

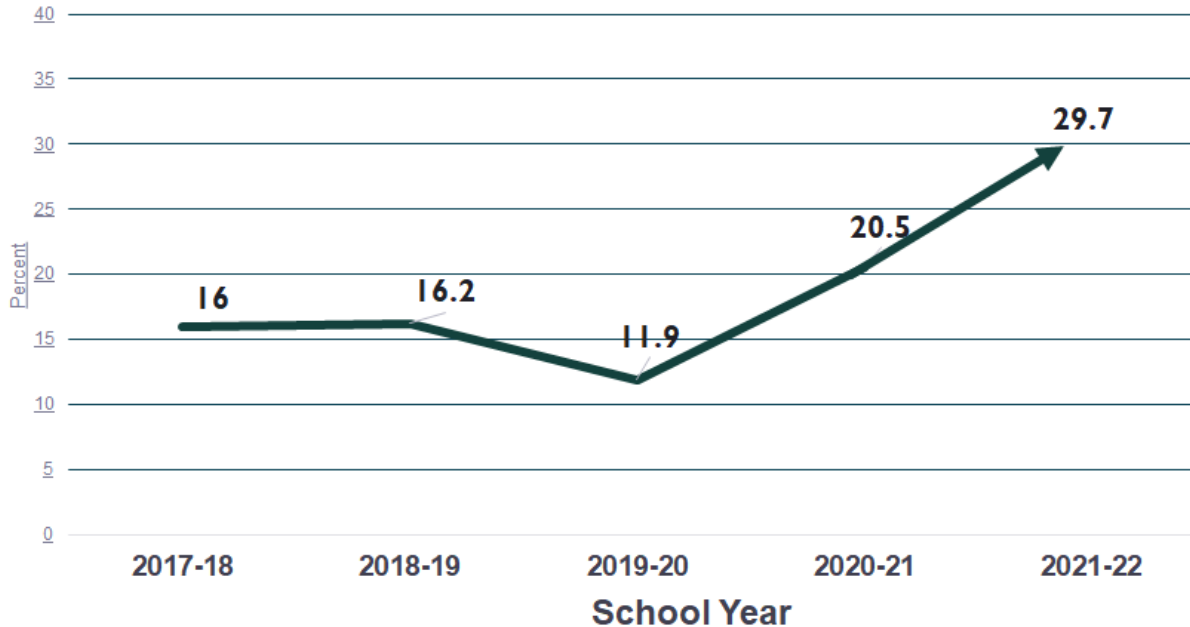


## AW and JHU data analysis and blog series

- [Rising tide of chronic absence challenges schools](#) released October 12. (Focus: Chronic absence affects 2/3rds of students and schools)
- [All Hands On Deck, Today's Chronic Absenteeism Requires a Comprehensive District Response and Strategy](#) released November 17. (Focus: Demographics and Inequity)
- Third Blog, January (3rd week). (Focus: State Reports & Action)

# Chronic absence has nearly doubled

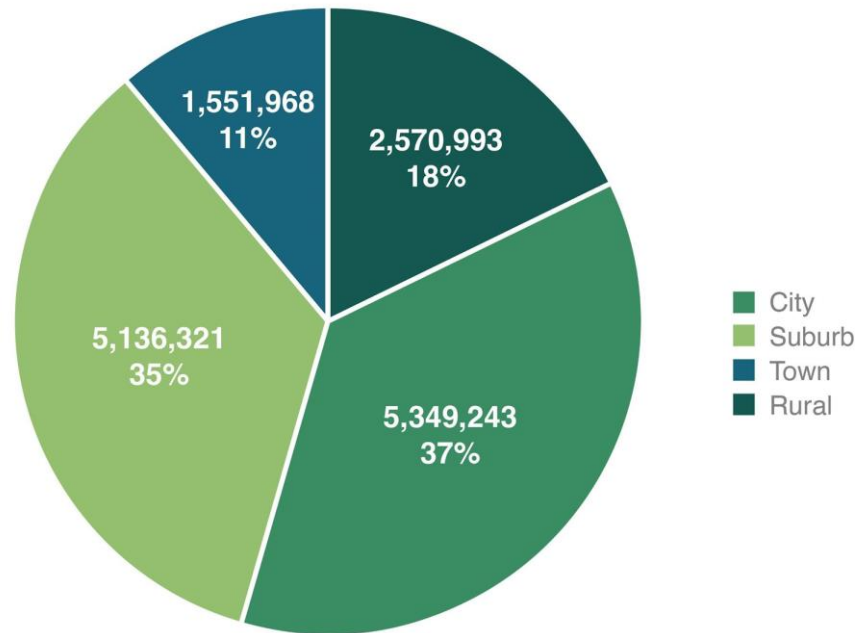
Percentage of Students Chronically Absent Nearly Doubled Nationwide Between SY 2017-18 to SY 2021-22



- ✓ The number of chronically absent students grew from over 8 million to 14.7 million
- ✓ How much chronic absenteeism rose varied by state. See <https://docs.google.com/spreadsheets/d/15yNTUUNwHzhFjQRcYgY5o7KE5pGoVFtk/edit#gid=1137911798>
- ✓ Early data from 2022–23 indicate rates remain high
- ✓ Chronic absence is higher in early elementary, especially kindergarten and high school

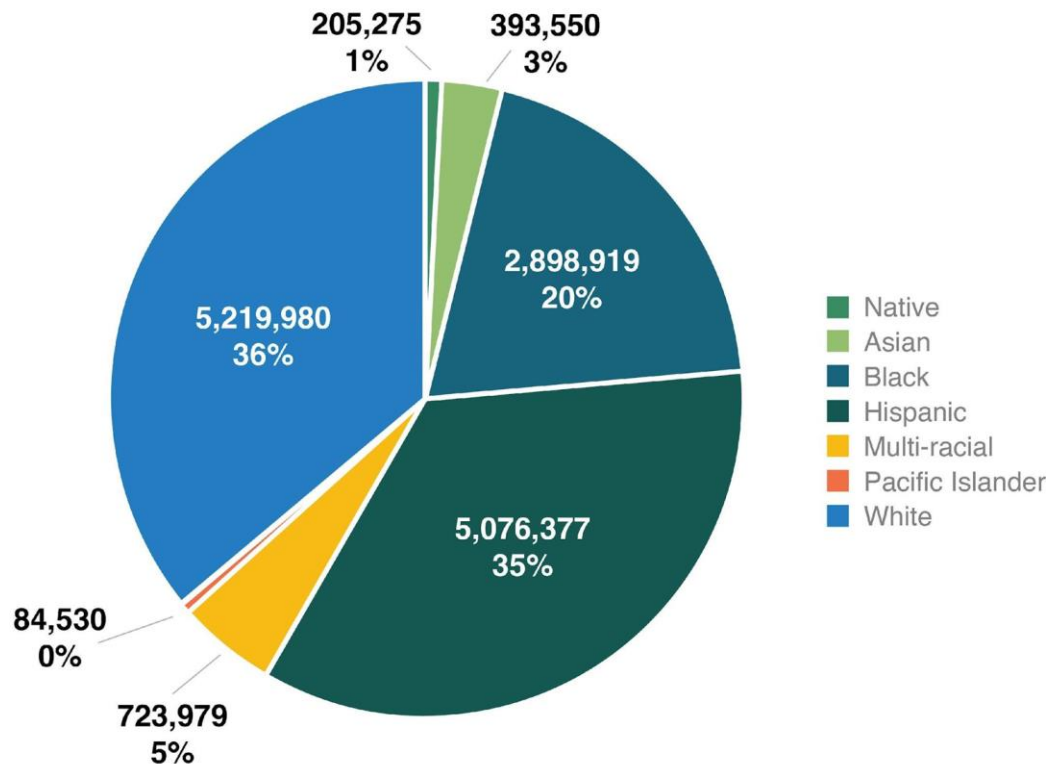
# Chronically absent students are found in every locality – with about a third in cities and a third in suburbs

2021-22 Chronically Absent Students by School Locale

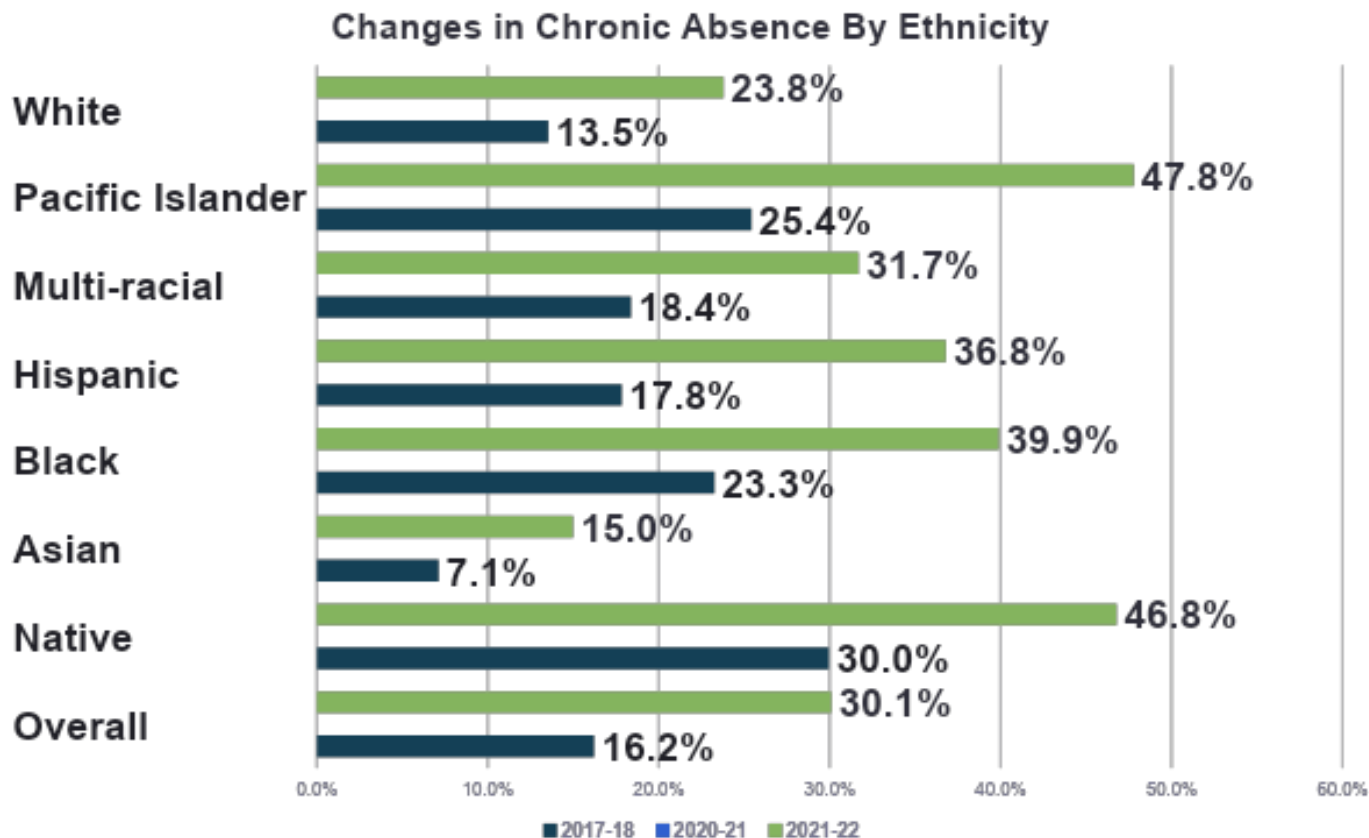


# Chronically absent students are of every ethnicity with White, Hispanic/Latino and Black students making up the largest numbers

2021-22 Chronically Absent Students by Demographic Background



## Some student groups are disproportionately affected





## ➤ **Majority of Students**

*In SY 2021-22, the majority of students (66.5% vs 25% pre-pandemic) attended a school in which 20% or more of its students were chronically absent.*

## ➤ **Majority of Schools**

*In SY 2021-22, the majority of schools (65% vs 28% pre-pandemic) were challenged by high (20-30%) and extreme (30% or more) rates of chronic absence.*

The vast majority of schools experience high chronic absence.  
 The largest increase has occurred among elementary schools.  
 Nearly 20,000 have extreme chronic absence.

2021-22 School Year	Elementary Schools		Middle Schools		High Schools		All Schools	
	2017-18	2021-22	2017-18	2021-22	2017-18	2021-22	2017-18	2021-22
Number of Schools with 30% or more students Chronically Absent	3,550	19,828	1,353	6,430	6,433	11,778	12,493	39,890
Number of Schools with 20% or more students Chronically Absent	9,233	31,362	3,640	10,541	10,474	16,126	24,912	60,379

For more information, see: <https://www.attendanceworks.org/rising-tide-of-chronic-absence-challenges-schools/>

# Inequities are widening

The % of schools with extreme chronic absence increased dramatically in schools with higher levels of poverty.

Chart 5 - SY 21-22 School Chronic Absence Levels by Concentration of Poverty\*

\*Defined as percent of students eligible for free- or reduced-price meals

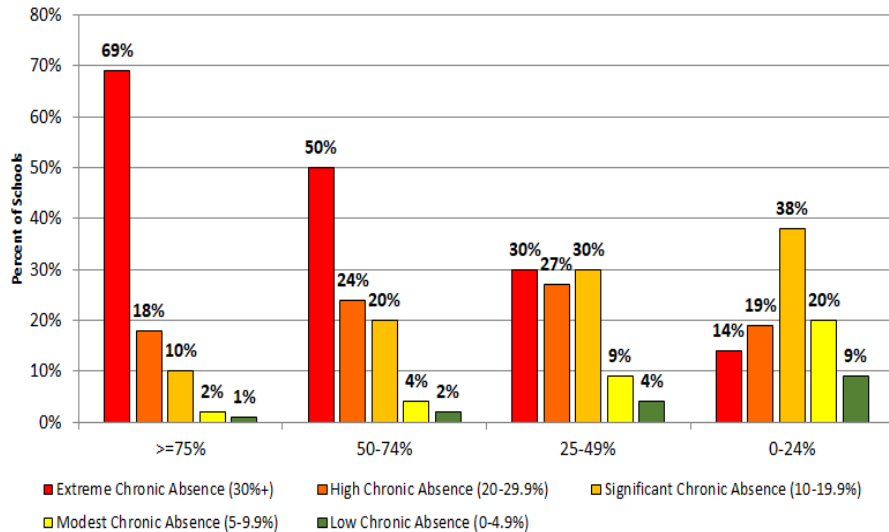
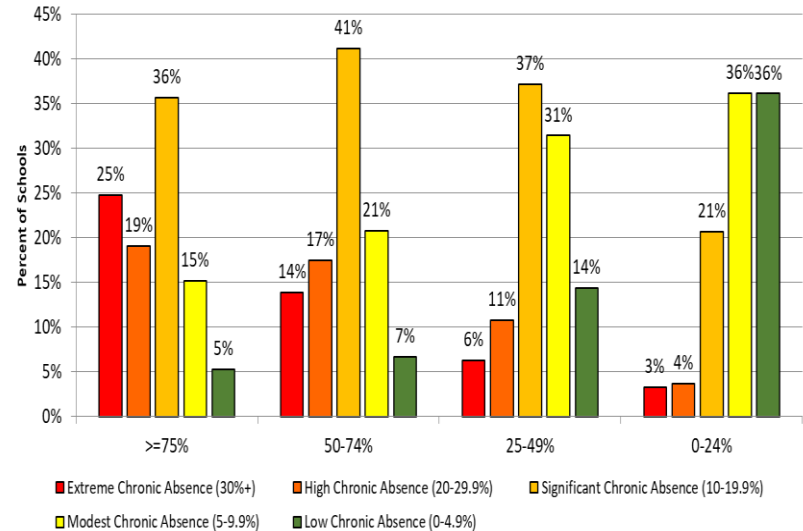


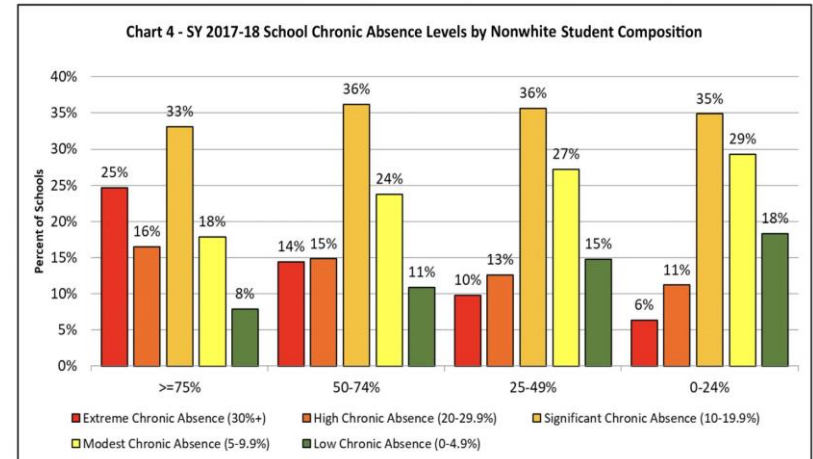
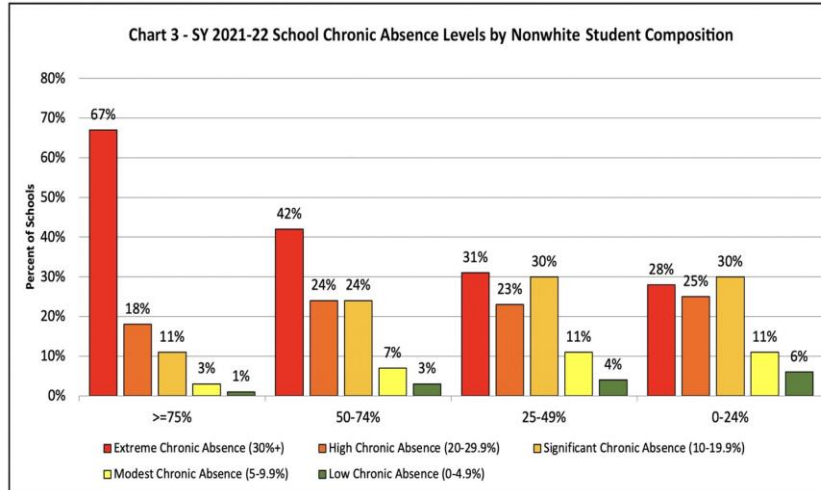
Chart 5 - SY 17-18 School Chronic Absence Levels by Concentration of Poverty\*

\*Defined as percent of students eligible for free- or reduced-price meals



# Inequities are widening

The pattern is similar for schools with 75% non-white students.



# Extreme chronic absence concentrated in districts with higher poverty

**Districts with  $\geq 75\%$  of students eligible for free/reduced lunch program & 3 or more schools**

% of Schools with Extreme Chronic Absence	# of Districts	% of Districts
0%	167	15%
0-25%	115	10%
26-50%	200	17%
51-75%	197	17%
76-100%	472	41%
	1151	

**Districts with  $\geq 25\%$  of students eligible for free/reduced lunch program & 3 or more schools**

% of Schools with Extreme Chronic Absence	# of Districts	% of Districts
0%	960	65%
0-25%	222	15%
26-50%	153	10%
51-75%	73	5%
76-100%	68	5%
	1476	

**Only shared at NASAPP meeting  
since data hasn't been released.**

*Note: Data for Idaho and WA are not included due to concerns about accuracy given state reported data and national trends.*

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**DO NOT SHARE/DISTRIBUTE - Yet to be released analysis of ED FACTS data for SY 2021-**

Questions? Observations?



# Causes & Solutions

# The key to reducing chronic absence is addressing what causes students to miss too much school

## Barriers

- Chronic and acute illness
- Family responsibilities or home situation
- Trauma
- Poor transportation
- Housing and food insecurity
- Inequitable access to needed services (including health)
- System involvement
- Lack of predictable schedules for learning
- Lack of access to technology
- Community violence

## Aversion

- Struggling academically and/or behaviorally
- Unwelcoming school climate
- Social and peer challenges
- Anxiety
- Biased disciplinary and suspension practices
- Undiagnosed disability and/or lack of disability accommodations
- Caregivers had negative educational experiences

## Disengagements

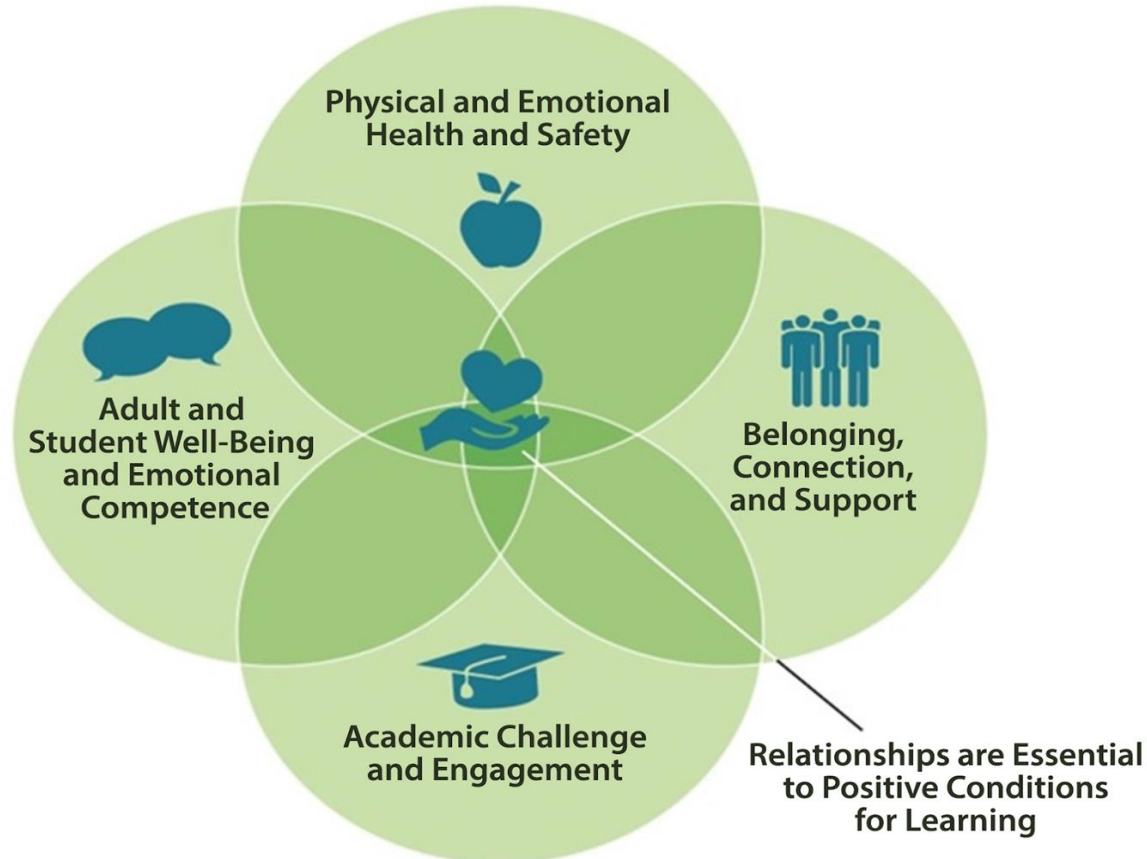
- Lack of challenging, culturally responsive instruction
- Bored
- No meaningful relationships to adults in the school (especially given staff shortages)
- Lack of enrichment opportunities
- Lack of academic and behavioral support
- Failure to earn credits
- Need to work conflicts with being in high school

## Misconceptions

- Absences are only a problem if they are unexcused
- Missing 2 days per month doesn't affect learning
- Lose track and underestimate TOTAL absences
- Assume students must stay home for any symptom of illness
- Attendance only matters in the older grades
- Suspensions don't count as absence

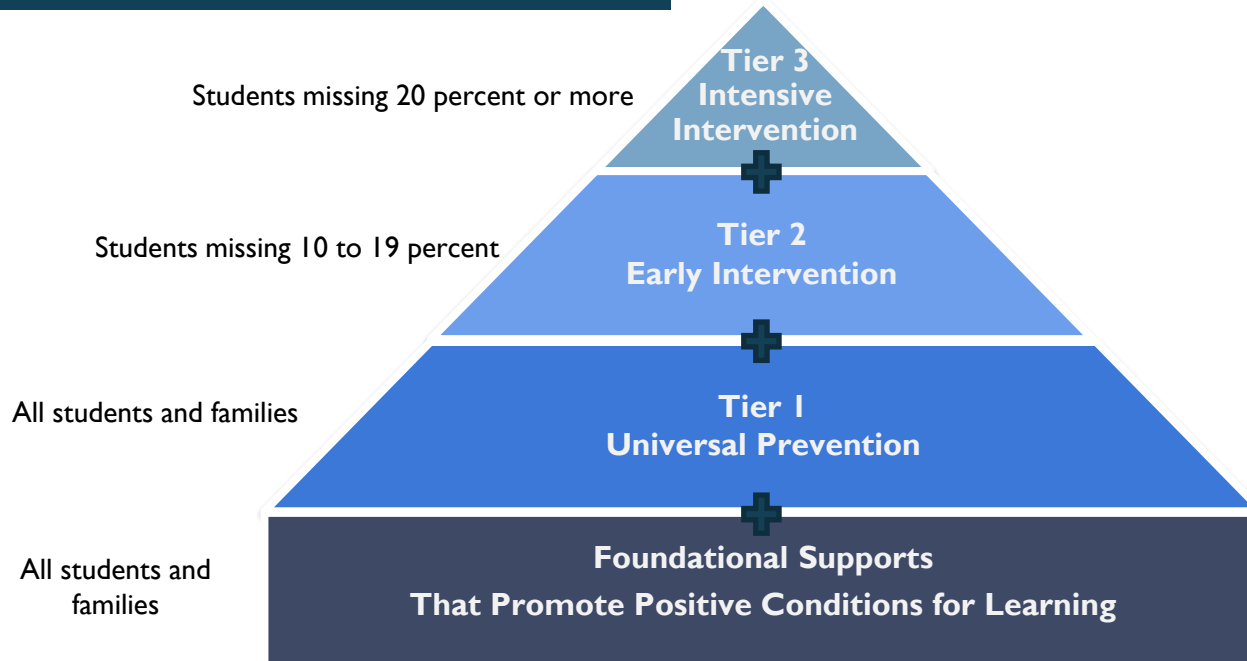
<https://www.attendanceworks.org/chronic-absence/addressing-chronic-absence/3-tiers-of-intervention/root-causes/>

# High levels of absence reflect an erosion in positive conditions for learning

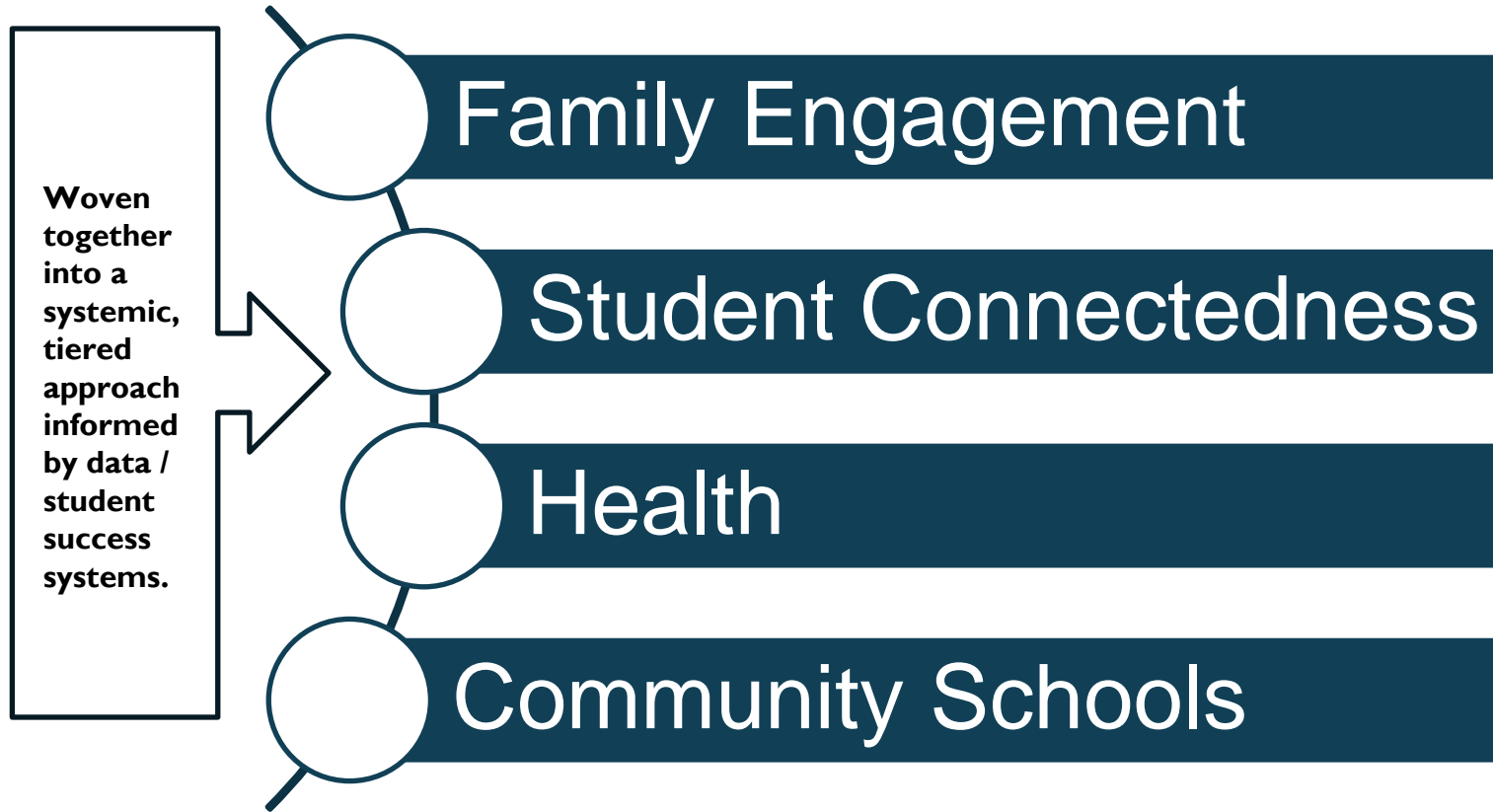




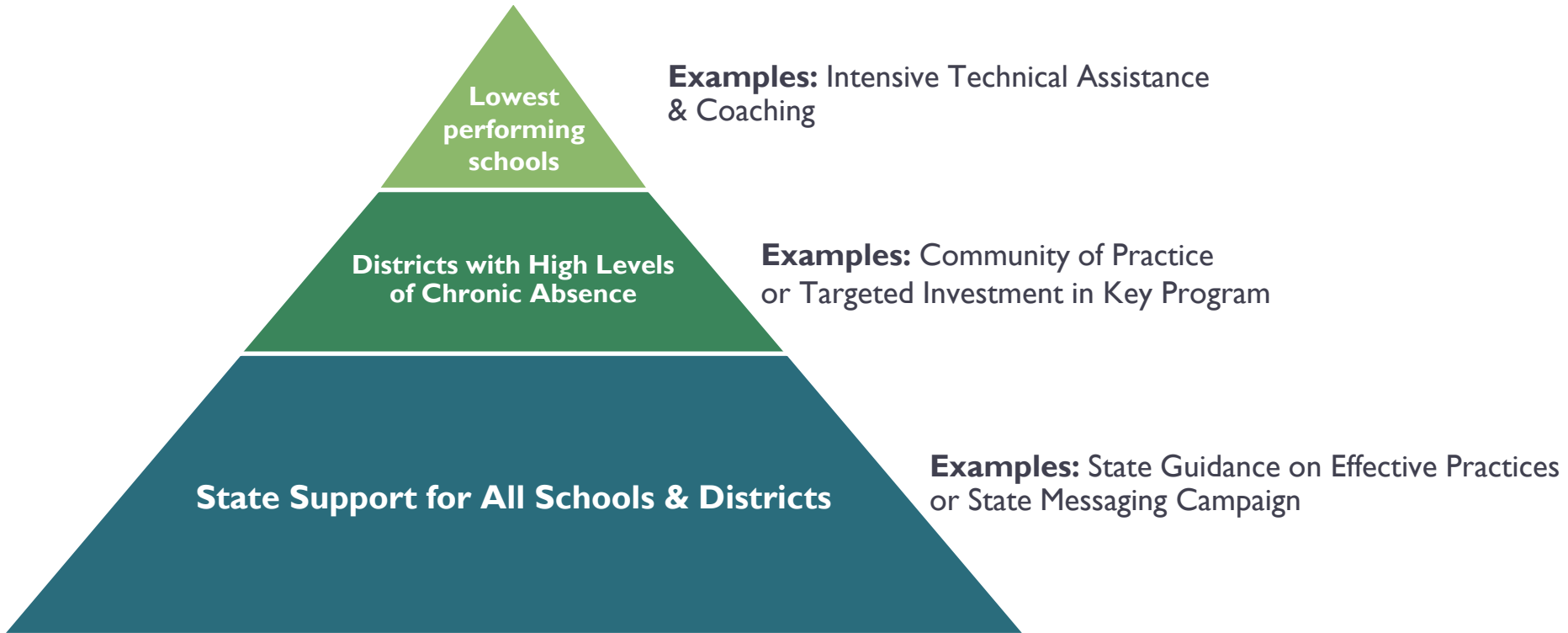
## Multi-tiered support systems that begin with prevention are essential



## Especially critical strategies



# States must be prepared to address chronic absence that is both widespread and concentrated



How do we support whole school approaches to reducing chronic absence?

What are the implications for action for states?



# Questions?







## Evaluation

### ✓ Complete the End-of-Year NASAPP Survey

<https://www.surveymonkey.com/r/NASAPP2024>