

Attendance Commission

Meeting Minutes

September 22, 2016

10:00 a.m.

James R. Thompson Center
100 West Randolph Street
Fourteenth Floor, V-Tel Room
Chicago, Illinois 60601



Alzina Building
100 North First Street
Third Floor, V-Tel Room
Springfield, Illinois 62777

I. Roll Call

Present

Karen Hunter Anderson - Springfield (Mackenzie Montgomery, proxy)
Jeff Aranowski - Chicago
Stephanie Bernoteit – Springfield
Karen Fox - telephone
Tiffany Gholson – Chicago
Diane Grigsby-Jackson - telephone (Marie Versher, proxy)
Heidi Grove - telephone
Victoria Jackson - Springfield
Hosanna Jones - telephone
Heidi Grove - telephone
Madelyn James - Chicago
Elizabeth Malik – Chicago
Joseph McMahan - telephone
Melissa Mitchell - telephone
Matthew Rodriguez - telephone
Diane Rutledge- telephone
Deanna Sullivan - Springfield
Harold Sweeney - telephone
Antoinette Taylor – Chicago
Scott Wakeley – telephone

Not Present

Christina Campos
Emily Carroll
Lori Fanello
Jennifer Gill
Crysta Weitekamp
Kevin Westall

II. Welcome and Opening Remarks

Chairperson Antoinette Taylor convened the meeting at 10:02 a. m.

III. Approval of Minutes from July 28, 2016

Ms. Taylor suggested that one word be changed within the minutes on page 3:

*Ms. Taylor said that through the Early Learning Council and ISBE, the commission ~~will~~ **might** have the opportunity to write some language into the preschool grant programs around attendance...*

Madelyn James moved to approve the minutes, and Beth Malik seconded her motion. The minutes were then unanimously approved.

IV. Every Student, Every Day Initiative – Action Guide Toolkit Debrief

Harold Sweeney - Superintendents, Staff, and School Personnel
Victoria Jackson – Health Care, Public Health, and Human Services Agencies and Providers
Karen Fox – Community, Faith-based, and Philanthropic Organizations

Superintendents, Staff, and School Personnel

Harold Sweeney began his presentation by comparing the commonly accepted definition of chronic absenteeism - missing 10% or more school days per year - to chronic truancy which is missing 5% or more of the last 180 school days without valid cause. What these two definitions tell us is that it is possible to be chronically absent without being identified as chronically truant. This is important because there is no program in place to provide interventions for chronic absenteeism. Interventions are activated by reports of truancy.

The academic effects of chronic absenteeism/truancy are great as these students face greater struggles and are more likely to drop out of school. The gaps created by frequent absences become insurmountable to students who may already be frustrated, and when they get old enough they stop attending school altogether. These students are likely to be members of the following subgroups: low income, minorities, homeless, disabled, highly mobile, and involved in the juvenile justice system. The warning signs exhibited by the affected students include depression/anxiety, decreased health/hygiene/nutrition, patterns of absence, decreased interest in schoolwork, and feelings of powerlessness and hopelessness. District personnel must recognize these signs and be aware of patterns to the absences; if a child misses every Thursday, someone should find out what happens on Wednesday evenings.

Staff should be familiar with area resources to provide students with immediate access, not wait to research solutions when faced with a problem. Discipline policies should be reviewed and revised to ensure chronically absent students are supported when in or returning to school. When the student is in school, districts need to provide enrichment and supportive activities in safe, encouraging, supportive environments for learning in response to the student's needs and not according to staff preferences or convenience. Staff must regularly engage with students and families to build trust and discover the underlying reasons for students' absences from school. Positive phone calls home are important because too many times parents only hear the negative. Mr. Sweeney said home visits are important because you will never truly understand a student's situation until you see where he lives.

Attendance must be tracked and monitored on a daily basis. The automated reports must be viewed by someone in real time. Every staff member must have a role in the push to improve student attendance. There must be a system in place to identify students before they become chronically absent. If you wait until the student has accrued the number of absences that can be characterized as chronic, you are way too late.

Student attendance has to be the responsibility of every person working within a school: cafeteria workers, custodians, librarians, school bus personnel, etc. Never underestimate the contributions of the non-teaching staff as they can connect with students and have a profound influence on a chronically absent student.

Health Care, Public Health, and Human Services Agencies and Providers

Ms. Taylor read Victoria Jackson's summary of the Every Student, Every Day suggested action steps for health care, public health agencies, and providers to help eliminate chronic absenteeism:

1. Understand the relationship between chronic absenteeism and unmet health and behavioral health needs of children and youth in the local community that affect students' daily school attendance.
2. Ask about school and school attendance in a positive way at every health care visit. Encourage families to develop strategies that allow children to attend school on a regular basis. Work in partnership with school staff to support attendance of your patient-students.

3. Partner with local school districts and schools to support school health improvement plans to improve access to necessary and preventative health and behavioral health services for children and youth.
4. Promote school-based mental health and behavioral health services that support children's unique social emotional needs.
5. Ensure that physical and mental health needs of children and youth are reflected in local nonprofit hospital community needs assessments as per the Affordable Care Act community benefit provision.
(For more information, visit https://www.nlm.nih.gov/hsrinfo/community_benefit.html).
6. Learn from successful public health and health provider collaborations with school districts to inform local partnerships and action plans.

Ms. Jackson explained this portion of the toolkit reviews the common causes of chronic absenteeism, including respiratory illness (asthma), dental pain, hunger, abuse and neglect, economic insecurity, fear of bullying, and unmet mental health needs. It encourages medical providers to ask about school and school attendance during patient visits and to be involved with school wellness teams, supports school-based mental health services, and also provides seven pages of broad range of resources that can be used to inform community partners and educate parents.

One of these resources is *Bright Futures: Guidelines for Health Supervision of Infants, Children and Adolescents* developed by the American Academy of Pediatrics for use by providers when completing child and adolescent well-child visits. Areas assessed include nutrition, physical activity, dental health, school performance, family peer relationships, risk of violence, tobacco use, alcohol and drug use, sexual health (i.e. partners, use of condoms, birth control, sexually transmitted infections, coercion), and mental health (i.e. bullying, anxiety, depression, suicidal ideation). Many, actually most, of these risk behaviors interfere with school attendance and school performance. Surprisingly, students are very open with their responses. A determination of risk triggers the provision of related education, treatments, or referrals based on those findings. There are 66 certified School Health Centers (SHCs) monitored by the Illinois Department of Public Health (IDPH) across the state that complete age appropriate assessments of risk according to *Bright Futures* guidelines.

Ms. Jackson posed a question for commission members: ***“Should risk assessment be required with mandated school physicals?”*** She said the state should consider formalizing a partnership with the Illinois Chapter of American Academy of Pediatrics to broaden the use of *Bright Futures* tools by all health providers.

Ms. Jackson posed another question for commission members: ***“What message do we need to get out to school nurses about the role they can play?”*** School nurses can play a significant role in eliminating chronic absenteeism through the following actions:

1. Promote good health through education - one-on-one, newsletter, bulletin boards, and daily announcements. Topics may include handwashing, flu shots, nutrition tips, resources, etc.
2. Monitor absences - contact parents and students, identify issues, and provide resources.
3. Work with those absent for medical reasons, and work with parent to develop individual IHPs. Maintain ongoing communication with the parent and child as well as the health care provider regarding disease management.
4. Open lines of communication with students. Ask and listen. As a school nurse for 26 years, Ms. Jackson said she can assure everyone that the student who comes in every day with a minor complaint has something else going on.

IDPH holds School Health Days in 5 locations with 1,000 attendees and has an email list of 2,300 school health personnel. Ms. Jackson said the commission should consider a partnership with the Illinois Association of School Nurses to identify best practices training for school nurses using IDPH resources. Ms. Jackson posed a final question for consideration by the commission: ***“Should we share these resources with healthcare providers, health departments, etc. and formally ask that they identify and adopt strategies they can implement to reduce absenteeism?”***

Community, Faith-based, and Philanthropic Organizations

Karen Fox explained the toolkit offers information, suggests action steps, and lists existing tools and resources—including evidence-based resources—for individuals, leaders, and systems to begin or enhance the work of effective, coordinated community actions to address and eliminate chronic absenteeism, including action steps for groups.

According to the toolkit, community, faith-based, and philanthropic organizations should -

1. Learn about what chronic absenteeism is and promote efforts to raise awareness among local stakeholders, especially youth and families.
2. Organize your congregation or community to take action within your own community to support students and families in achieving 100% daily attendance.
3. Encourage the local community to convene a taskforce with representatives from different constituencies and organizations—including education, health, public housing, and justice agencies as well as youth, families, faith, community, and child welfare agency representatives—that can research the root causes of chronic absenteeism among local youth and recommend research and evidence-based solutions for those youth.
4. Partner with schools and school districts and your organizations—in a manner consistent with applicable State law and the Family Educational Rights and Privacy Act (FERPA)—in order to provide additional support services to students who are chronically absent and their families.

Good resources to learn how to enhance the participation of community, faith-based, and philanthropic organizations include the Center for Faith-based and Neighborhood Partnerships, the U.S. Department of Education’s Family Policy Compliance Office (FPCO), Attendance Works, and the Campaign for Grade-Level Reading

Community, faith-based and philanthropic organizations are very different from one another. For example, a United Way agency, a church congregation, and a family foundation all have different interests and goals, but they represent the types of groups in any community that can help inform, advocate, and “raise awareness about and support the implementation of solutions to chronic absenteeism in local communities.” The suggested actions include a call to action to “learn, encourage, and partner.”

Jeff Aranowski commented on the home visits that had been referred to by Harold Sweeney because of the delicate balance between a family’s right to privacy and the school district’s need to know why a child is not attending a school. Mr. Aranowski also drew attention to the inclusion of a line of inquiry about school attendance habits during a physical examination by medical professionals which he thinks would be extremely helpful but may also dissuade people in a fluid housing situation from accessing healthcare in order to avoid that level of scrutiny.

There was a discussion of the need to integrate health and education since health is a primary reason for absence for so many children. Health care providers could also seize the opportunity to encourage regular school attendance as part of a larger public relations effort. Chairperson Taylor concurred and added that such an external partnership is advantageous to create additional awareness of the importance of school attendance. Melissa Mitchell said engaging the health community on this issue in a strategic way makes a lot of sense. Medical offices are good places to disseminate information and doctors and clinical staff would be very useful in asking the right questions and reinforcing the importance of regular school attendance

Madelyn James said the IDPH has an interactive map that shows physician coverage across the state and reflects an uneven distribution of medical personnel in many areas. She suggested we let The Children Cabinet (Governor Rauner's initiative to coordinate services to Illinois children) know of this issue as they are mapping inter-departmental goals. Illinois is home to twenty of the school districts that are included in the four percent of districts nationally with the highest rates of chronic absenteeism. We have to look for the intersections of insufficient health care and heightened rates of chronic absenteeism.

Ms. Taylor asked Ms. James to reach out to a contact she has at the Illinois Academy of Pediatrics to begin a discussion about collaboration. She also requested that Ms. Jackson reach out to the 66 Student Health Centers across the state to initiate the conversation about their participation in efforts to reduce chronic absenteeism among students as the commission needs as many external partners as possible. Ms. Jackson informed the commission she has a contact at the Illinois Chapter of the American Academy of Pediatrics that she will contact reach out to.

Ms. Taylor summarized by saying the commission's study of the toolkit has enabled the group to understand the toolkit's directives and apply them locally.

V. Attendance Works Survey on Survey Monkey

Thirteen commission members have participated in the survey. The other members were asked to please participate in the survey.

VI. Public Comment

There was no public comment.

VII. Ethics and Open Meetings Act Requirements

There are still nine commission members who have not completed the Open Meetings Act training and ten who have not completed their 2016 Ethics Training.

VIII. New Business and Open Discussion

HB 3199 was based on recommendations from the Truancy in the Chicago Public Schools Task. It was introduced by State Representative Linda Chapa LaVia in February 2015 and was signed into law by Governor Rauner on July 22, 2016. This act requires a charter school to comply with all applicable absenteeism and truancy policies and requirements applicable to public schools under the laws of the State of Illinois and sets forth how a charter school must define a truant, chronic or habitual truant, truant minor, and dropout.

Ms. Taylor acknowledged the fact that the Illinois Network of Charter Schools (INCS) and the Illinois Charter School Commission did not oppose this bill or any of its provisions and expressed her appreciation for the fact that everyone is on the same page insofar as wanting children in school so learning can occur.

In June 2016, the University of Chicago Urban Attendance Lab held a forum in downtown Chicago. Ms. Taylor said their message is so important for people engaged in the effort to boost school attendance, they will present a condensed version of the forum at the December 15 Attendance Commission meeting which will necessitate extending the meeting by a half an hour as they require one hour for their presentation.

Ms. Taylor introduced Sam Nelson of the Illinois Student Assistance Commission (ISAC) which sponsors the College Changes Everything (CCE) initiative. On November 3, CCE is sponsoring an event entitled *Continuing the Conversation ... A Learning Community Focused on Student College and Career Readiness and Success* to discuss the importance and the impact of attendance. This event will take place between the hours of 8:30 a.m. – 12:00 p.m. at ISAC's Deerfield office at 1755 Lake Cook Road.

Mr. Nelson referenced the 60 by 25 goal of the P-20 Council to have 60 percent of our young adult population have a degree or some other working credential by 2025. CCE was started in support of this goal, and Mr. Nelson explained the term 'college' is used to refer to any postsecondary schooling or training. He said employers look for students with 'soft' skills such as showing up for work each day on time. Mr. Nelson said this work ethic derives from good attendance while in school. Scattered throughout the state are over 80 members of the ISAC Corps, young people who are recent college graduates who are helping students and families navigate academic and training opportunities for postsecondary students. Stephanie Bernoteit thanked Mr. Nelson for his external partnership with the commission by convening a conversation on the importance of school attendance. She said ISAC is one of those organizations that bridges people with common goals who operate in different circles.

Deanna Sullivan requested a brief on the public hearing held by Illinois State Senator Jacqueline Collins at St. Sabina Church on September 13. She also reminded the commission about the public hearing the commission will hold at the joint annual conference of the Illinois Association of School Boards, Illinois Association of School Administrators, and Illinois Association of School Business Officials to be held on November 18 at the Hyatt Regency Chicago. She is interested in any materials the commission may have to share with conference attendees prior to the public hearing so they can be prepared with some observations and suggestions. Ms. Sullivan also said she would like to involve Jennifer Gill, Diane Rutledge, and Scott Wakeley in the public hearing as their advisory roles with district administrators render them great sources of information.

Ms. Mitchell said the commission has a role to play in addressing comments about the Every Student Succeeds Act (ESSA) to ISBE as this legislation emphasizes school attendance and climate. The commission can support ISBE with recommendations for strategies in the state implementation plan.

Mr. Aranowski said ISBE is on the second round of listening tours and a draft version of ISBE's implementation plan is available online at isbe.net/essa. The plan will go to the governor in January, the board in February, and to the federal government in March. Ms. Taylor asked that commission members review the implementation plan in preparation for the October meeting at which time members can discuss if the commission as a body wishes to formally provide its input. There is also a reader's guide on the ISBE/ESSA webpage.

Ms. Mitchell informed the commission that Attendance Works compiled a brief in which the organization advocates for the choice of the chronic absence rate as a primary indicator to measure school quality or student success.

Ms. James asked about the possibility of the commission drafting a strategic plan for future activities. Mr. Aranowski advocated for the development of both short- and long-term plans after the annual report is submitted to the legislature in December. Ms. Taylor said the first foundational year was necessary to explore the landscape and determine priorities. She said one of most critical aspects that became apparent through discussion and the input of people at the two public hearings which had been held was the family engagement piece. Some people need all the help they can get to parent well and properly guide their children. Some parents are unaware of the law or the resources out there for them. Ms. Taylor said if something is not accessible, it is not actionable.

IX. Adjournment

Ms. Bernoteit moved to adjourn, and Mr. Aranowski seconded the motion. The meeting was adjourned at 11:32 a.m.