



**Department of
Education &
Workforce**

Supporting Ohio's Students Through Healthy Student Profiles and Attendance Initiatives

School-based Health Centers

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&

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Office of Whole Child Supports

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CME and CE Information

In support of improving patient care, this activity has been planned and implemented by Ohio School-Based Health Alliance and Moses/Weitzman Health System, Inc. and its Weitzman Institute and is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.



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- American Dental Association's Continuing Education Recognition Program (ADA CERP)
- American Psychological Association (APA)
- Association of Social Work Boards (ASWB)
- Commission on Dietetic Registration (CDR)

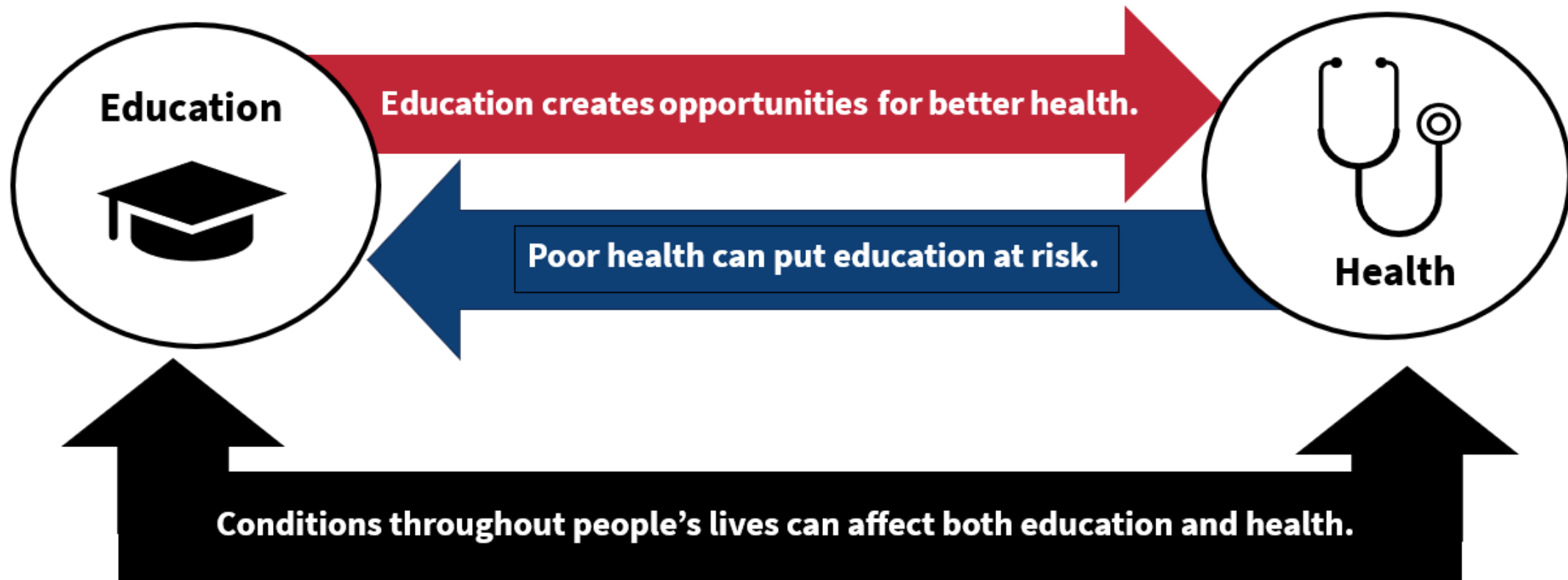
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Objectives

1. Be aware of Ohio's Healthy Student Profiles as a resource
2. Understand how to access and use Ohio's Healthy Student Profiles data and review Ohio attendance data
3. Understand how school-based health centers can improve attendance rates and other metrics

Health and Education



Source:

Virginia Commonwealth University. (2015, Feb. 13). *Why Education Matters to Health: Exploring the Causes*. Center on Society and Health. <https://bit.ly/3LEuLlo>

Healthy Student Profiles

Healthy Student Profiles: A Partnership

- Published annually
- Medicaid claims collected
- Public Schools
- School building level and district level data available
- Data today is for 2021-2022 school year
- 2022-2023 data will be released in the next few months

Healthy Student Profiles Data

- K-12 who participated in Medicaid for at least 3 months
- If enrolled for at least 100 hours
- Building and district level with county and state level comparison data

Healthy Student Profiles Data



Health
Interactions



Health
Condition



Educational
Indicators



Staff
Indicators

Healthcare Interactions

- Comprehensive well-child visit
- Primary care physician visit
- Primary care physician visit, within 2 years
- Dental care visit
- Dental care visit, within 2 years
- Trip to emergency department
- Overnight stay at general hospital



Health Conditions

- Asthma
- Diabetes
- Any behavioral health condition
 - Serious mental illness
 - Autism
 - Major depression
 - Depression (all)
 - Anxiety
 - Attention-deficit/hyperactivity disorder
 - Substance use disorder
 - Severe Emotional Disturbance

District Staff Measures

Counselors

Nurses

Psychologists

Social Workers

- Rates are available at the district level per 100 students
- Rates do not necessarily represent the degree to which schools have regular access to these professionals

Interactive Dashboard

Interactive Dashboard

This information is best viewed on a desktop computer and may require a moment for initial loading.

1. SELECT County Allen	DISPLAYED: .Full District: Bath Local 045765 Grades ***** County/State comparison: All Grades Total head count: 1766 Medicaid participants: 702 39.8%
2. SELECT District Name or School Type Bath Local	
3. SELECT School Name .Full District: Bath Local	

Ohio Healthy Students Profile: 2021-2022 School Year

#	Measure Group	Measure Name	Denom.	Count	Pct.	County	State
1	Overview	Medicaid Rate	1,766	702	39.8	43.9	41

Data Download

- Excel data download for entire state is available under the resources section of webpage.

Resources

- » [Ohio Healthy Student Profiles: 2023 Overview](#) 
- » [Statewide Data File: 2021-2022 School Year](#) 
- » [Statewide Data File: 2020-2021 School Year](#) 
- » [Getting Started Guide](#) 
- » [Frequently Asked Questions](#) 

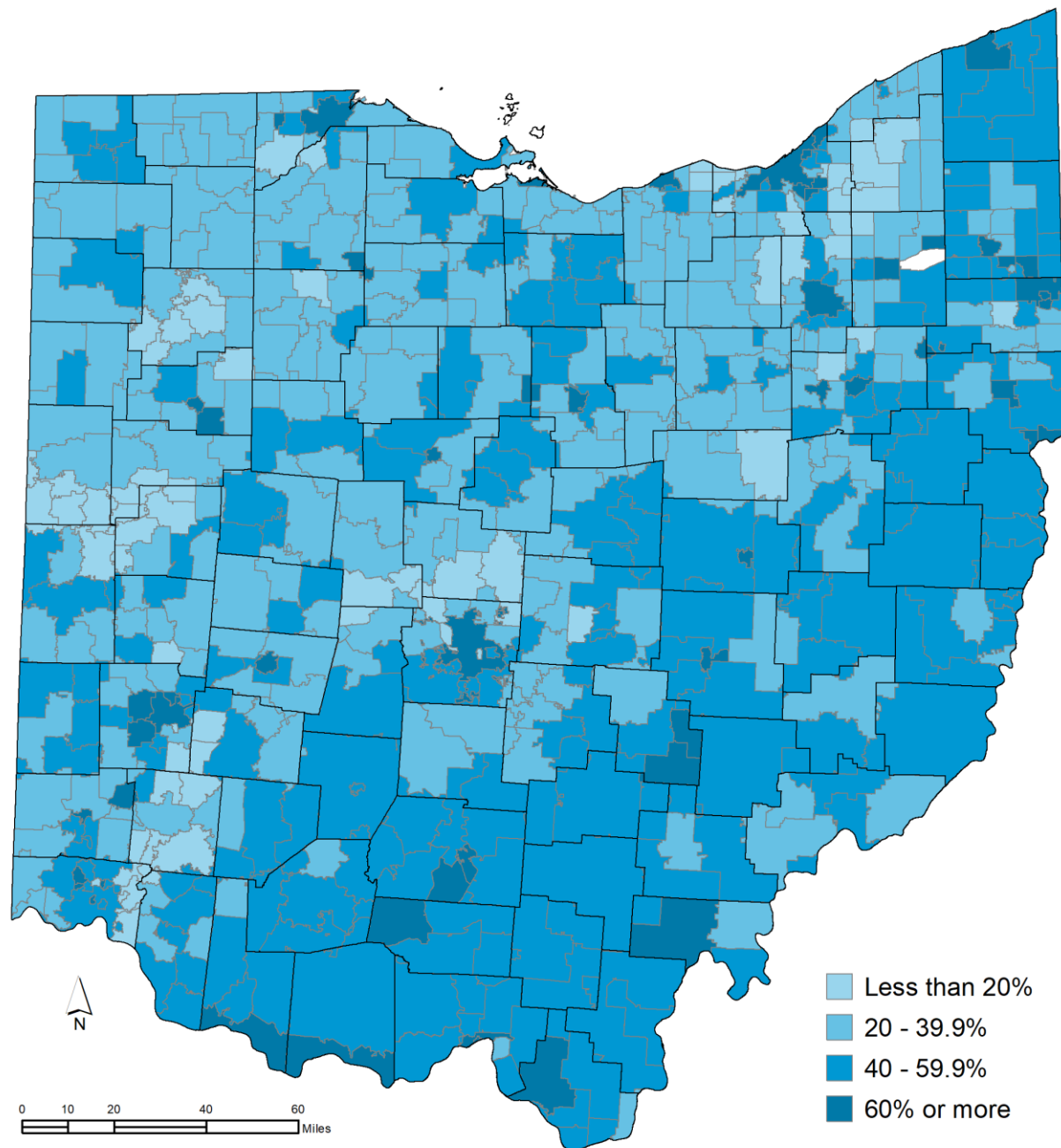
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2021-2022 Healthy Student Profile Data

Healthy Student Profiles: Medicaid Students

Percentage of students enrolled who were on Medicaid for at least 3 months

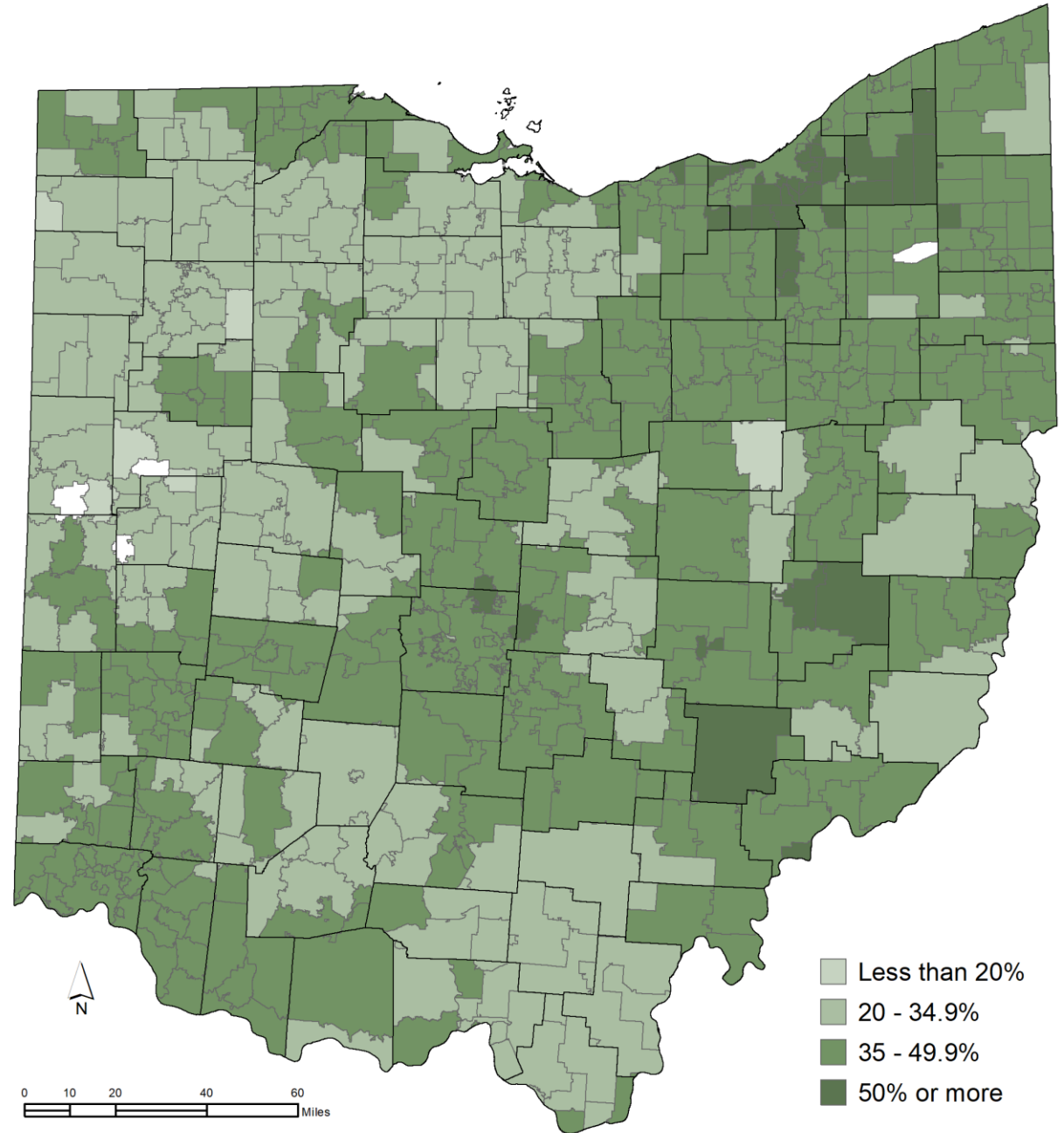
- 57 Districts- 60% or more
- 225 Districts have 40-59%



Healthy Student Profiles: Well-child Visits

Percent of Medicaid students who received well-child exams in last year

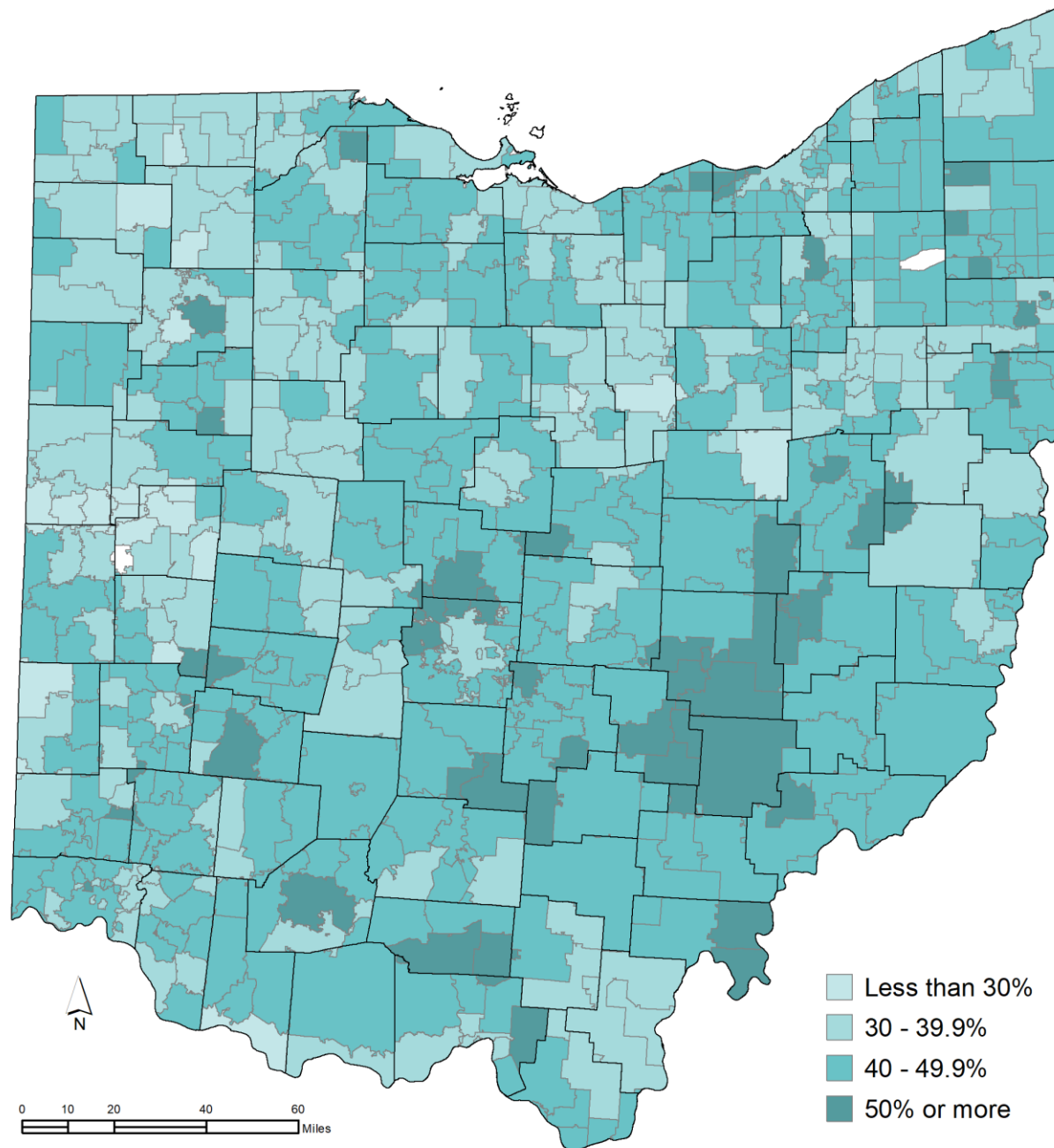
- 37 Districts- 50% or above
- 377 Districts- 35-49%



Healthy Student Profiles: Dental Visits

Percent of Medicaid students who had a dental exams in last year

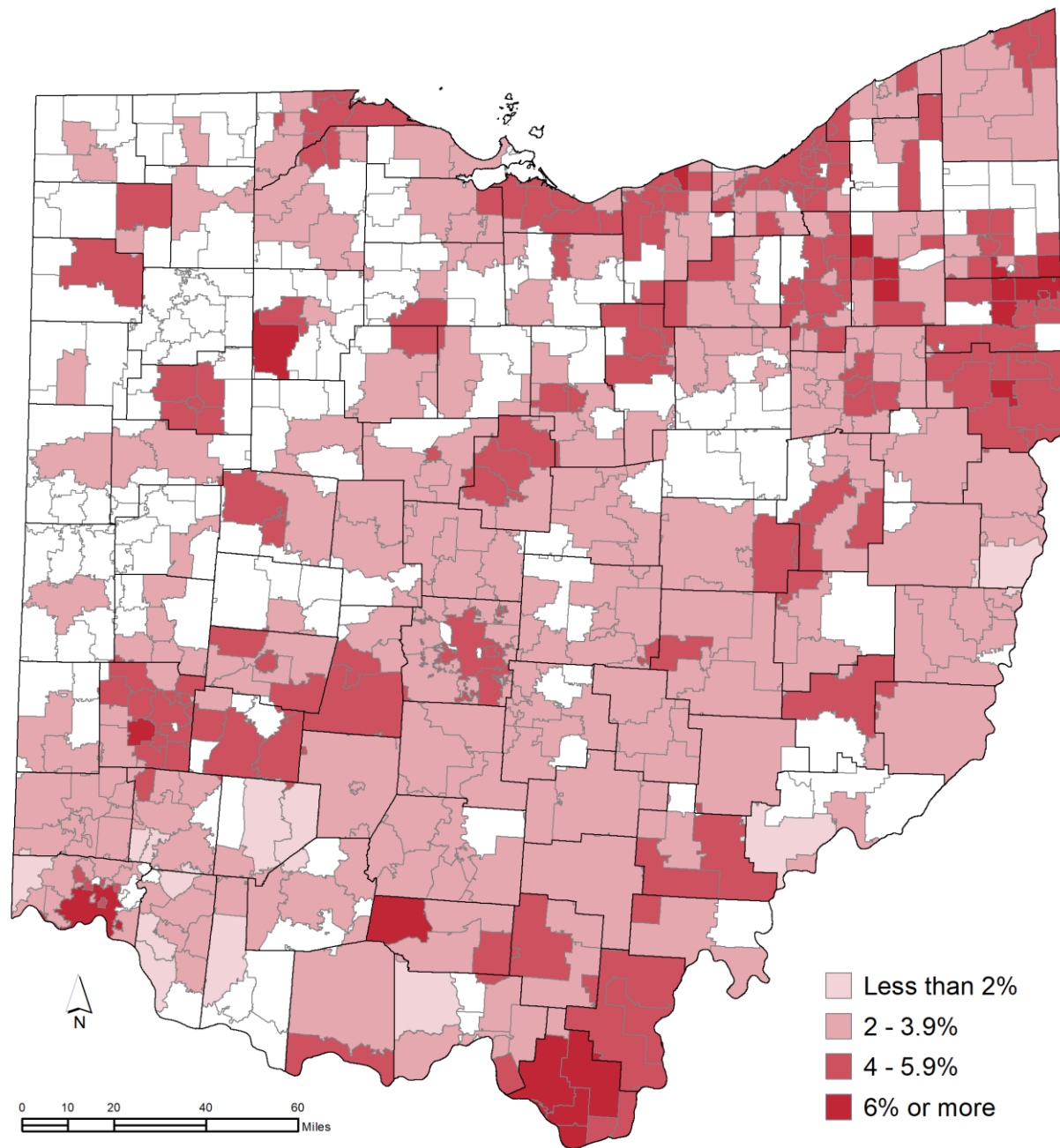
- 56 Districts- 50% or above
- 339 Districts- 35-49%



Healthy Student Profiles: Asthma

Percent of Medicaid students with a diagnosis of Asthma

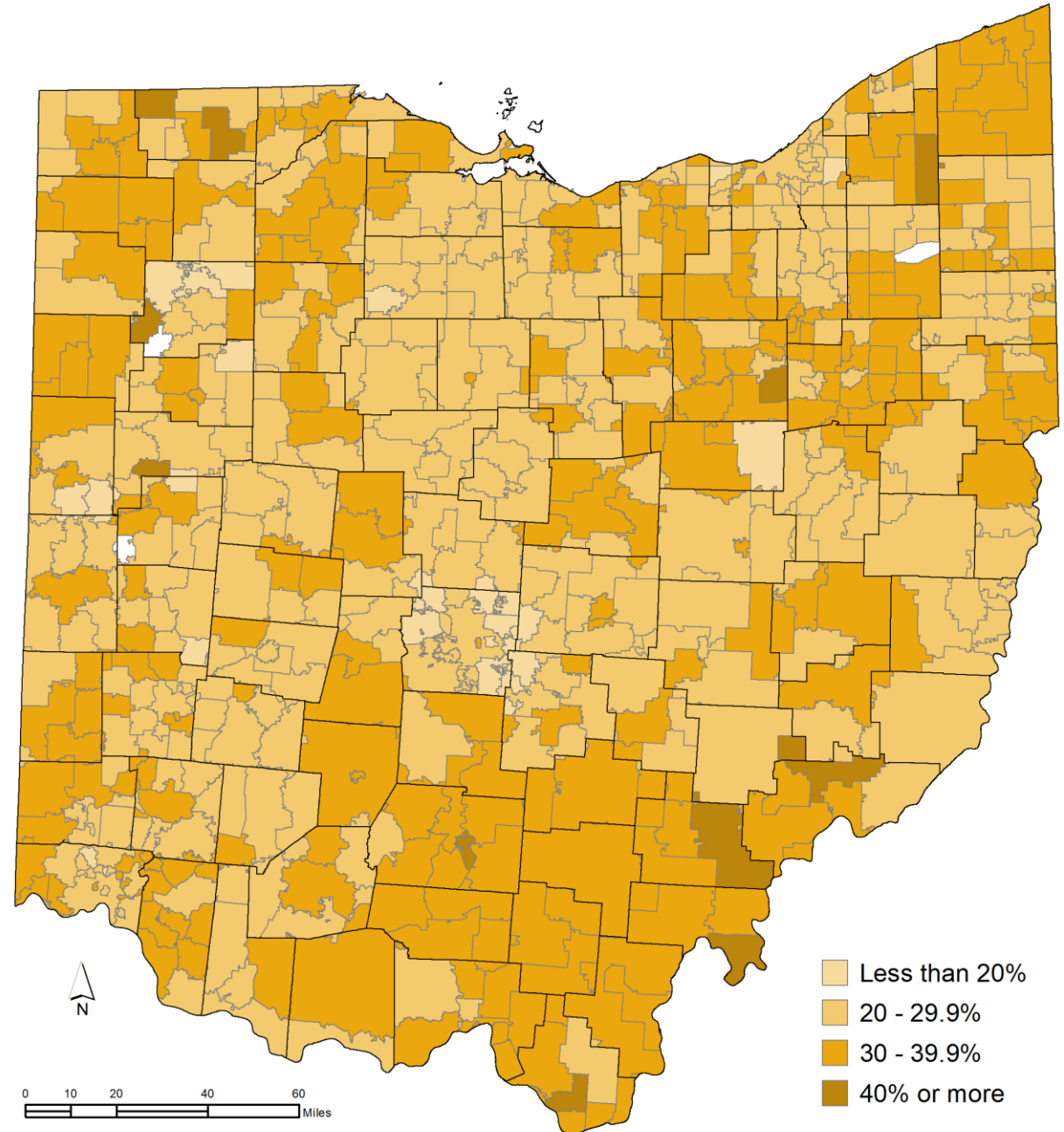
- 20 Districts- 6% or above
- 150 Districts- 4- 5.9%



Healthy Student Profiles: Any Behavioral Health

Percent of Medicaid students with a behavioral health diagnosis

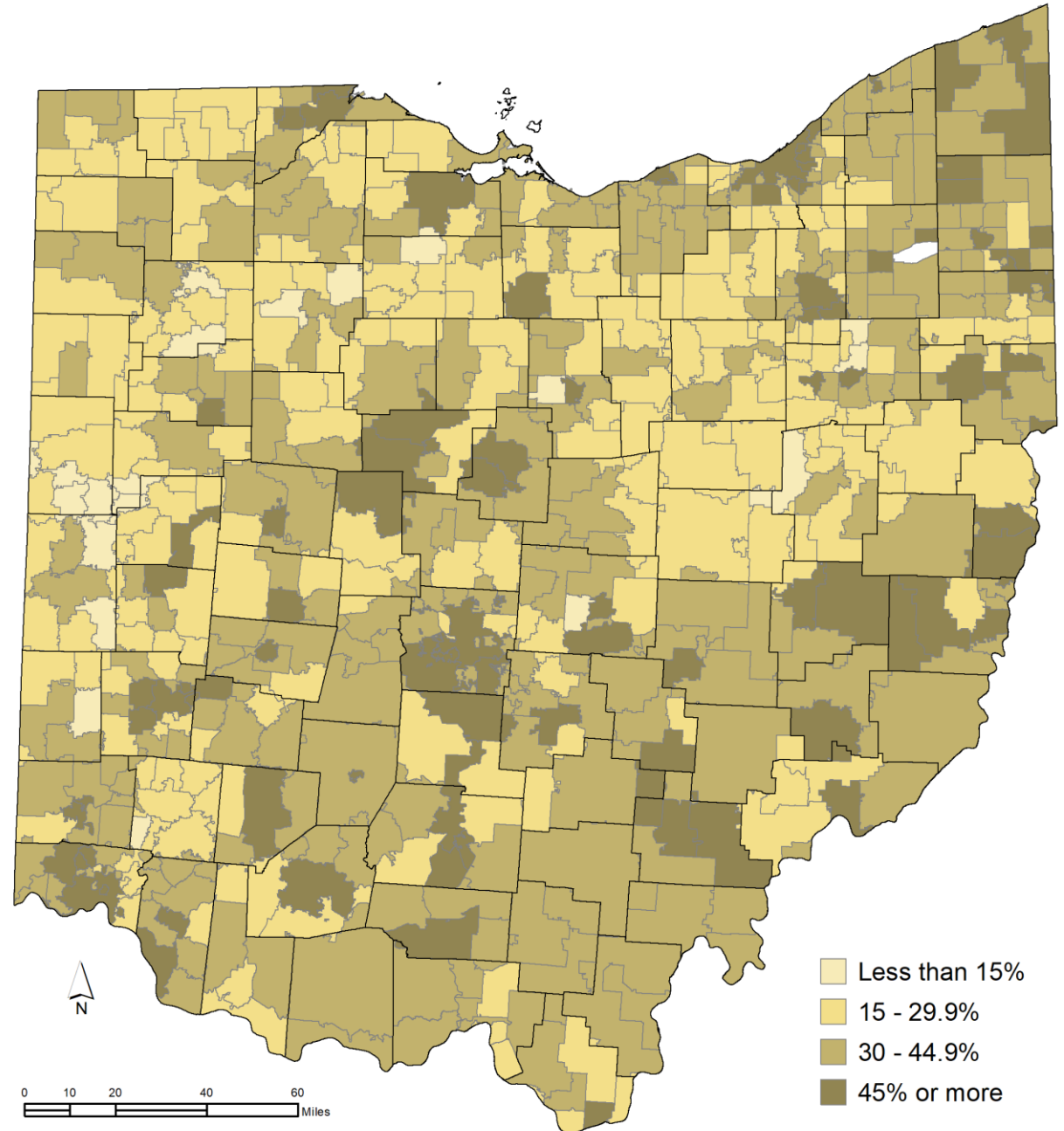
- 11 Districts- 40% or above
- 250 Districts- 30-39.9%



Healthy Student Profiles: Chronic Absenteeism

Percent of Medicaid students who are chronically absent

- 98 Districts- 45% or above
- 270 Districts- 30-44.9%



Assessing Local Data

Review Data as a Team

- Effective data review teams vary by district
 - Stakeholders
 - Team Roles
 - Time and Process



Understand Root Causes

- Understanding root causes will better position schools and healthcare partners to:
 1. Understand the nature of the need
 2. Reduce the need where possible
 3. Reduce the impact of students' health and wellness needs on their educational outcomes

Explore Root Causes

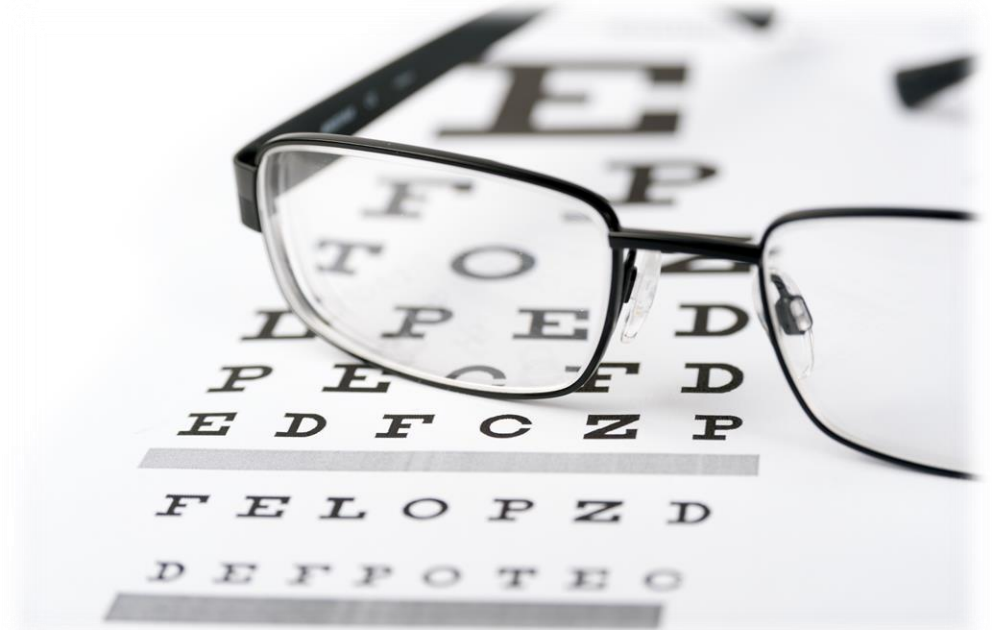
- District and Building
- Community
- Family

Use Existing Resources

- Community Partners
- Similar Districts
- Resources from Department of Education and Workforce
- Local Community Health Profiles or Community Health Assessments

Viewpoints

- District administrators
- Building administrators
- District health professionals
- Health care partners
- Other district stakeholders



What Can You Do to Improve Healthy Student Profiles?



Chronic Absenteeism 2022-2023

Why Focus on Attendance Data?

Students in grades K-3 who were never chronically absent were 6.7x more likely to pass the 3rd Grade Reading Guarantee

High school students who were never chronically absent were 9x more likely to graduate on time

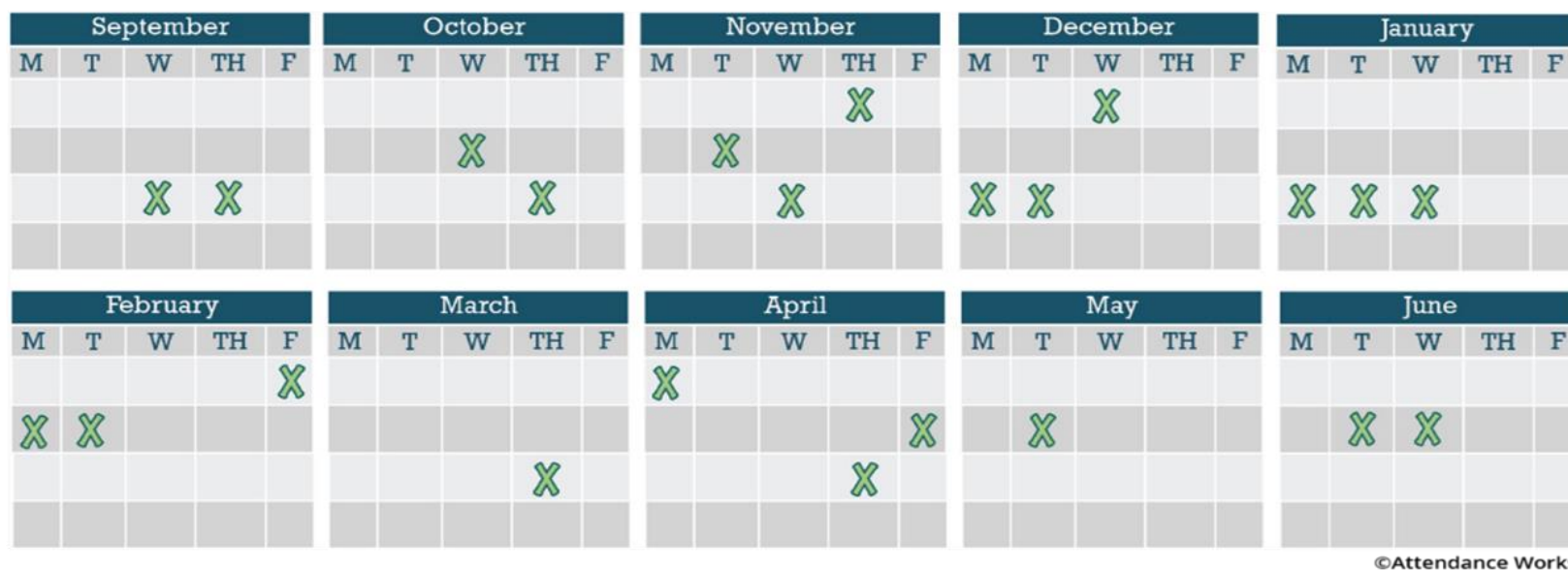
What is Chronic Absence?

Chronic absence is defined as missing 10 percent or more of school for **any** reason.



Chronic absence is **different** from truancy (unexcused absences only) or average daily attendance (how many students show up to school each day).

Absences Add Up!

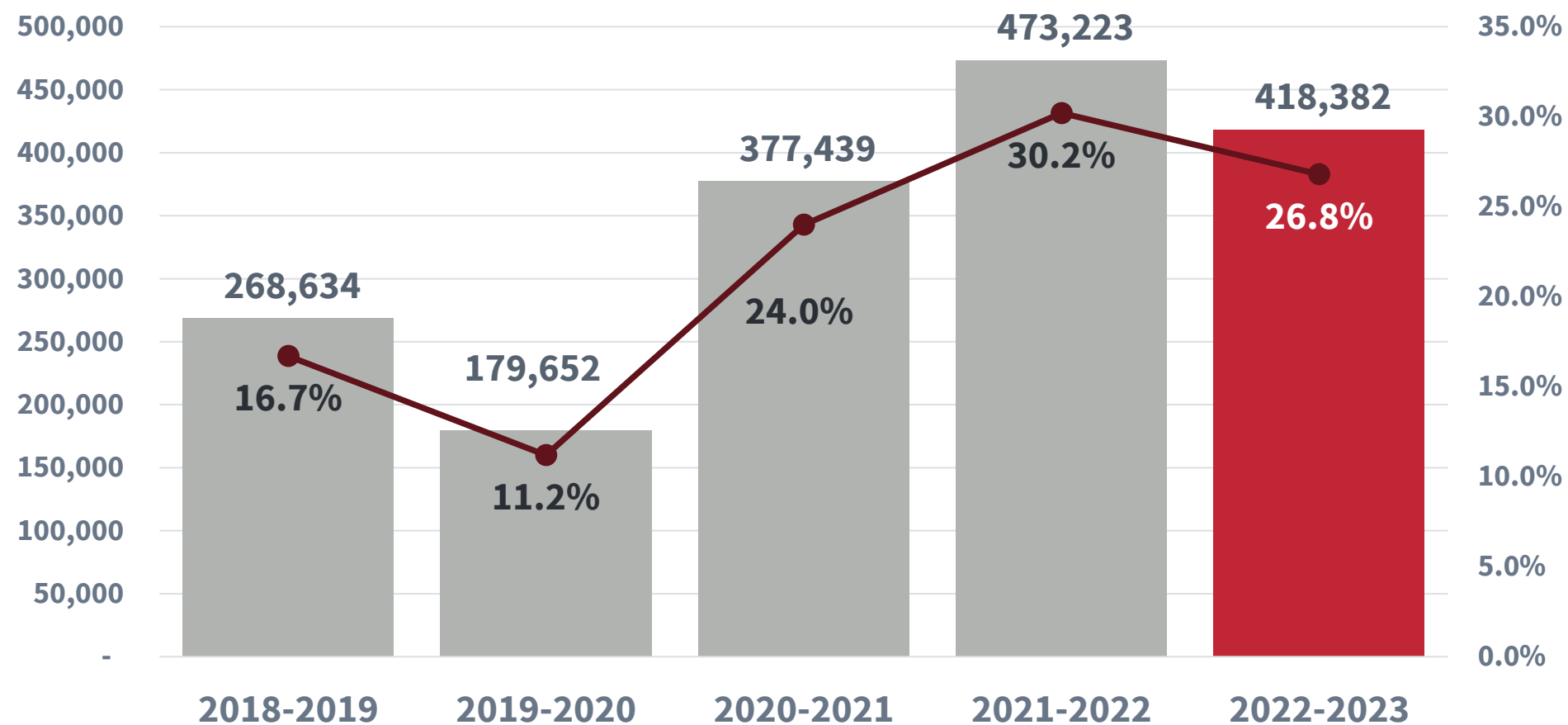


Missing just 2 or 3 days a month can lead to chronic absence.

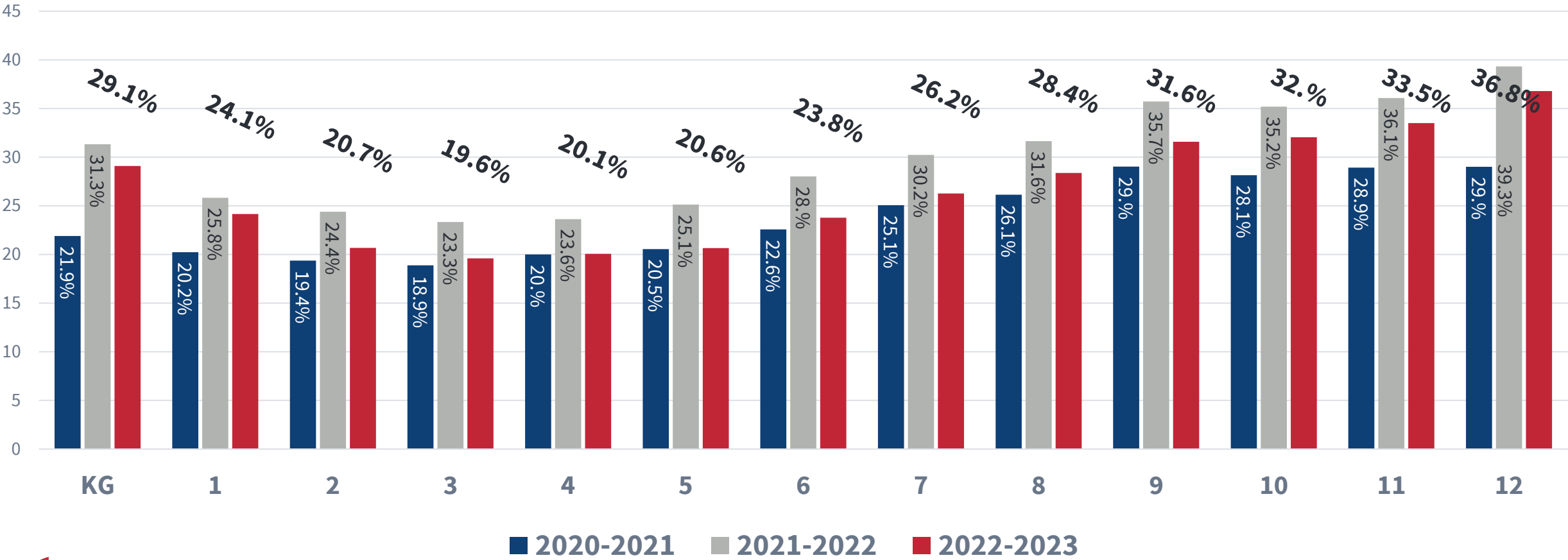
10% of the school year = 18 days of absence

This translates to almost one month of missed learning

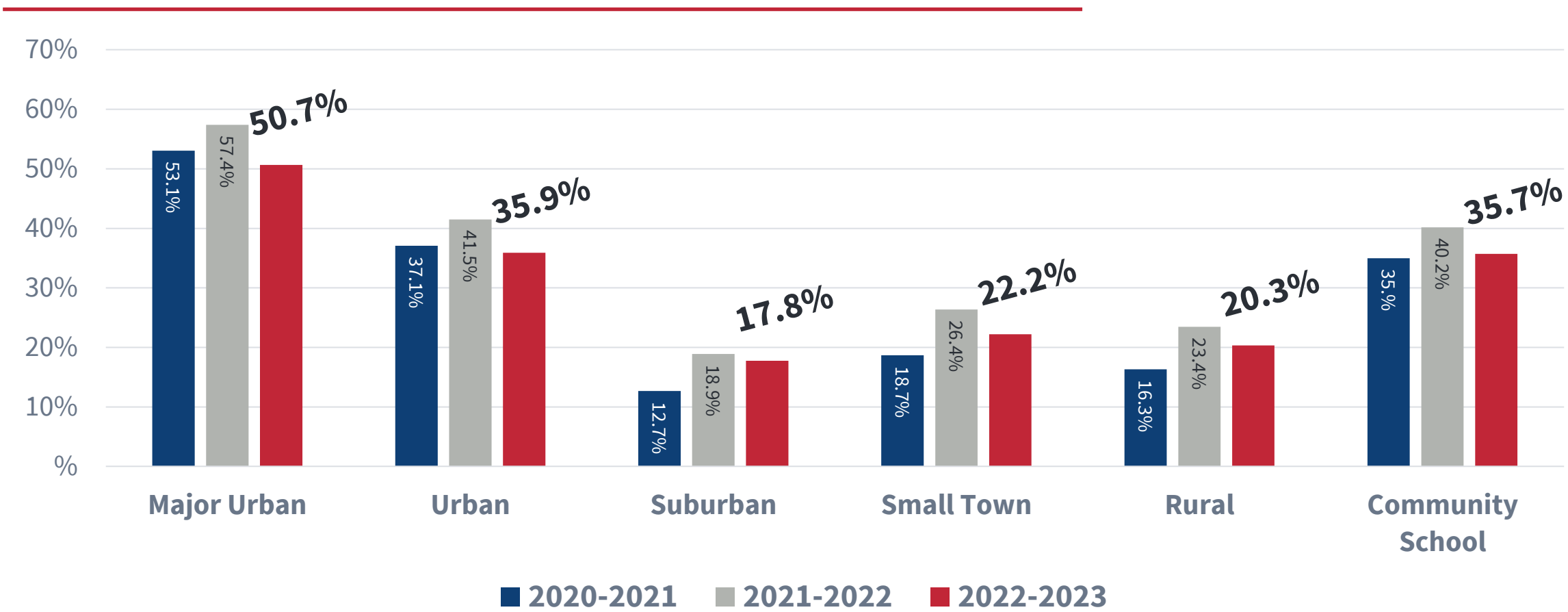
Chronic Absence



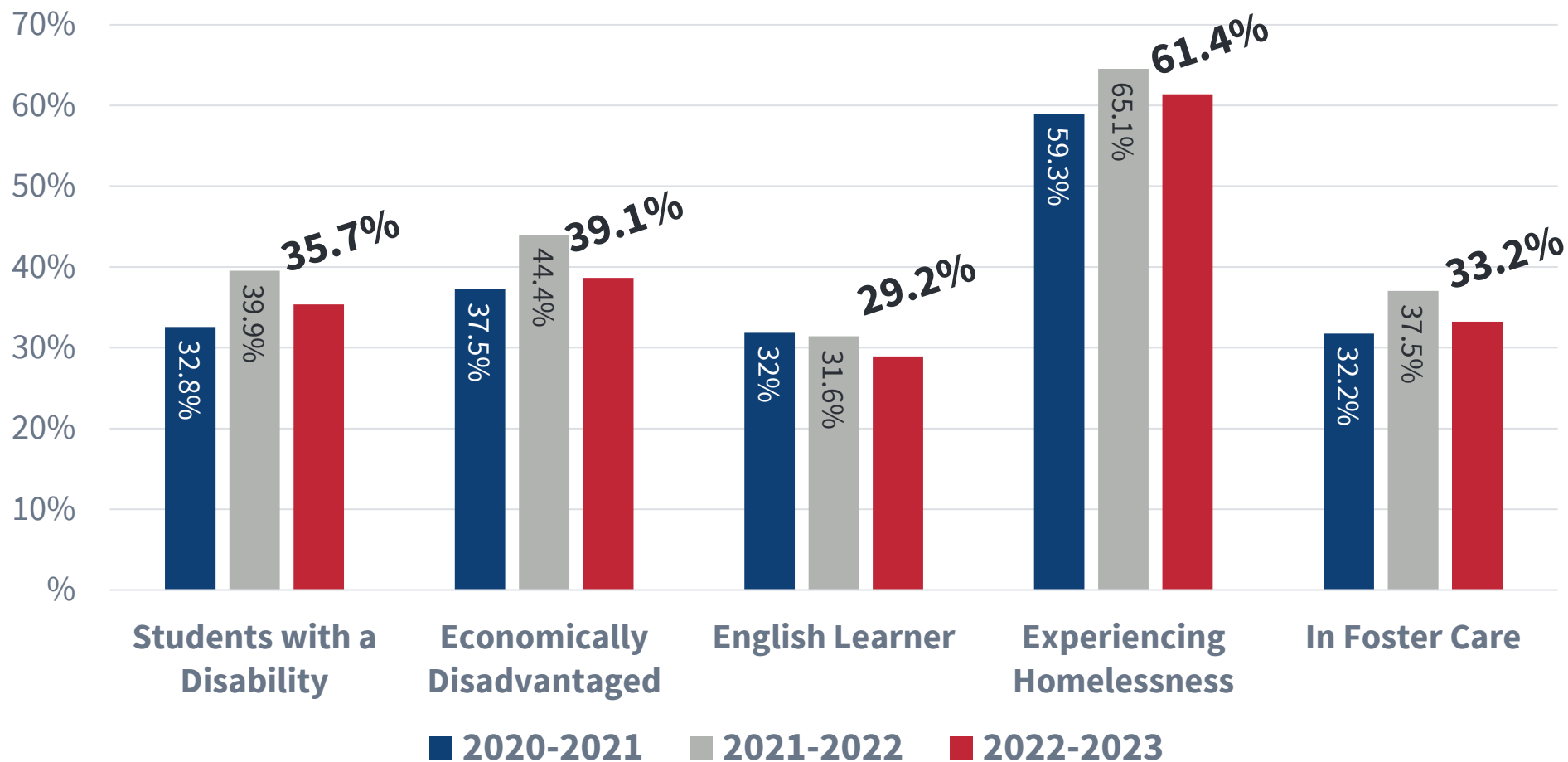
Chronic Absence by Grade Level



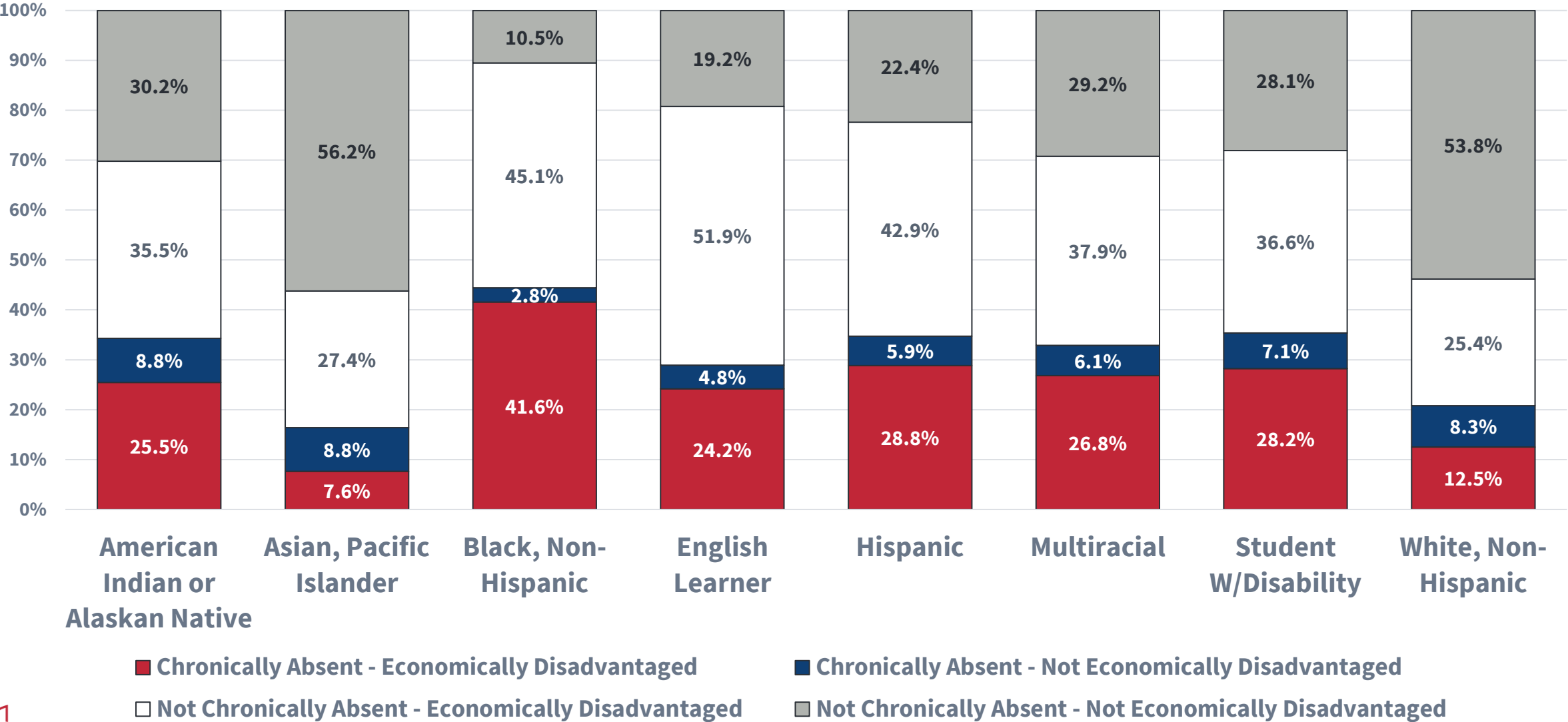
Chronic Absence in Ohio by Typology



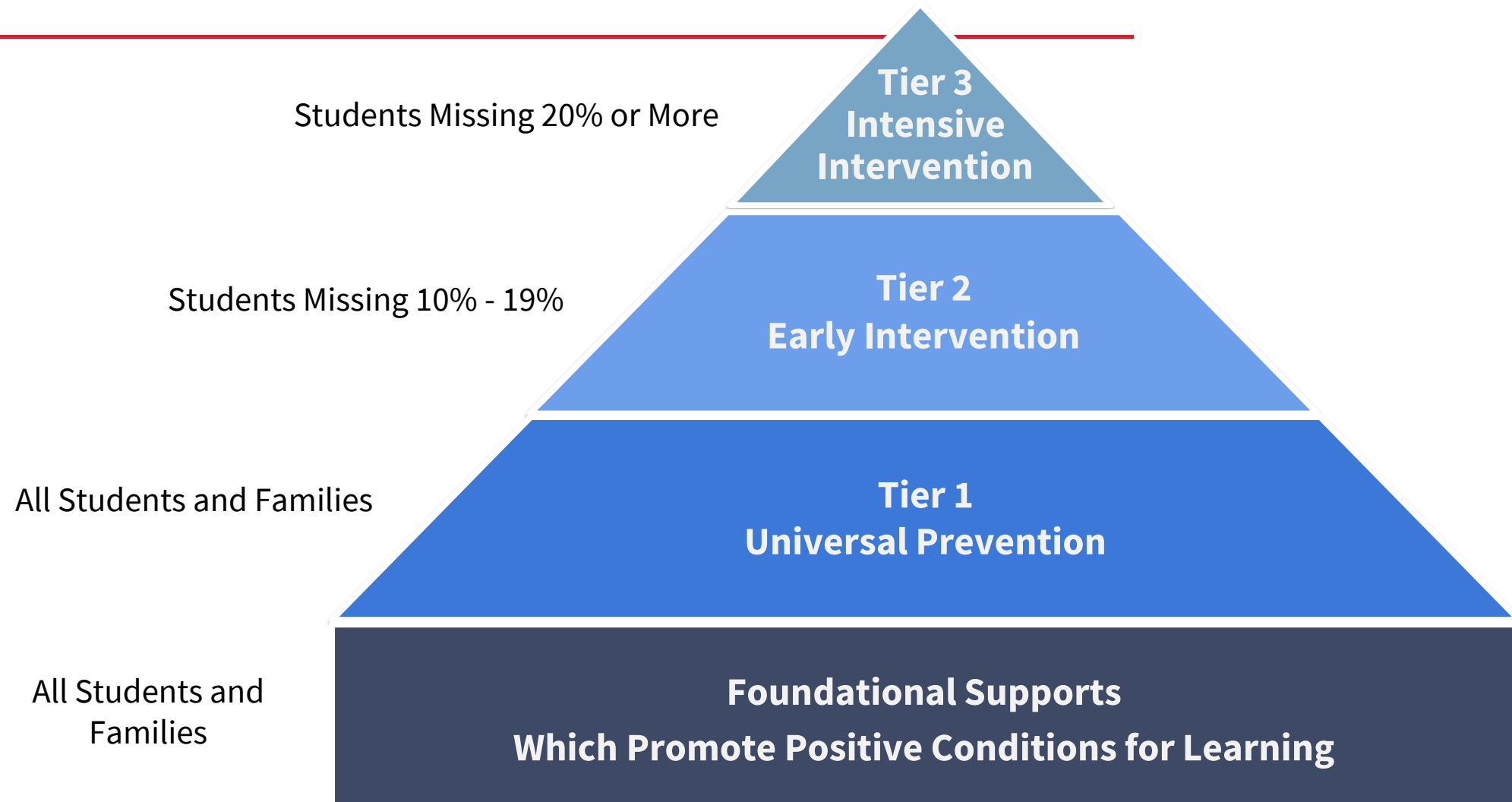
Chronic Absenteeism at Risk Youth



Chronic Absence- Economically Disadvantaged 2022-2023



Multi-tiered System of Support

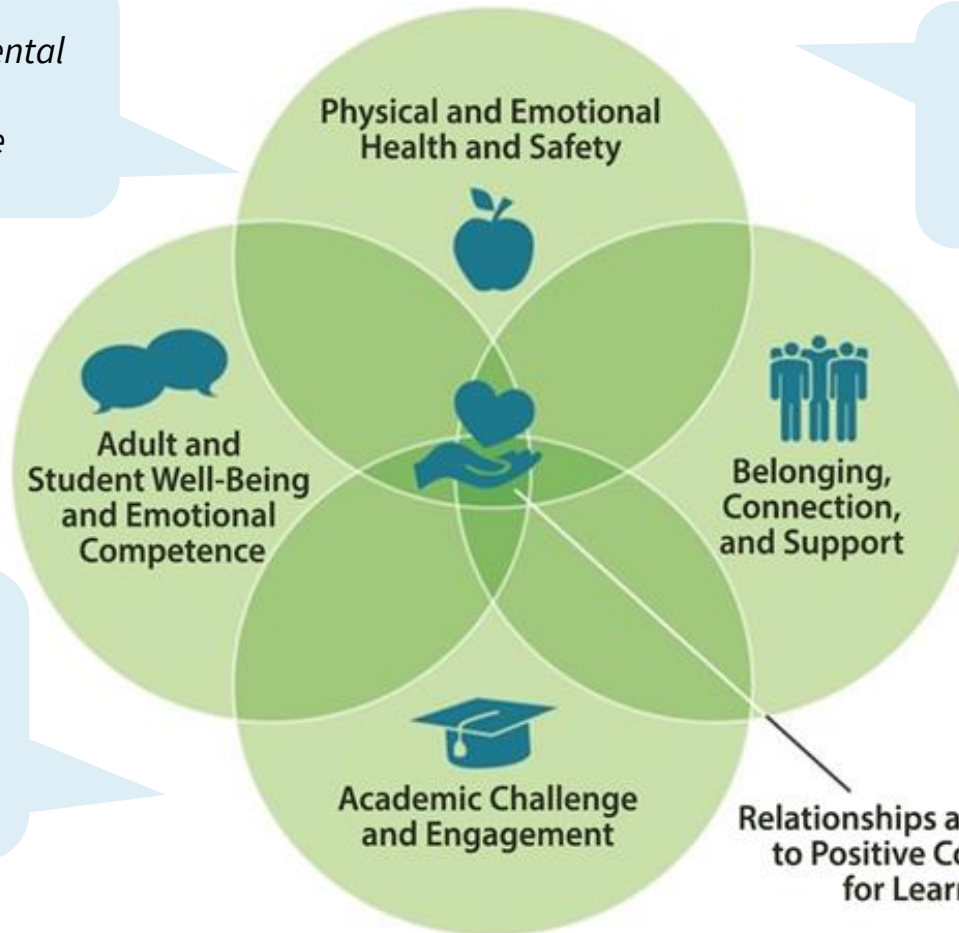


Positive Conditions for Learning

- Restorative check-ins
- Access to health care & mental health supports
- Trauma-informed practice
- Staff self-care

- Healthy learning environments
- Welcoming, safe school climate
- Access to food & other basic needs
- Restorative circles

- Access to tech & internet
- Learning supports
- Project-based learning
- Credit recovery opportunities
- Internships/community service
- Alternative scheduling options



- Active student & family engagement
- Advisories/meetings to build community
- Enrichment & clubs
- Positive peer connections

Relationships are Essential
to Positive Conditions
for Learning

What Can We Do to Address These?

Barriers

- Chronic and acute illness
- Family responsibilities or home situation
- Trauma
- Poor transportation
- Housing and food insecurity
- Inequitable access to needed services
- System involvement
- Lack of predictable schedules for learning
- Lack of access to tech

Aversion

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

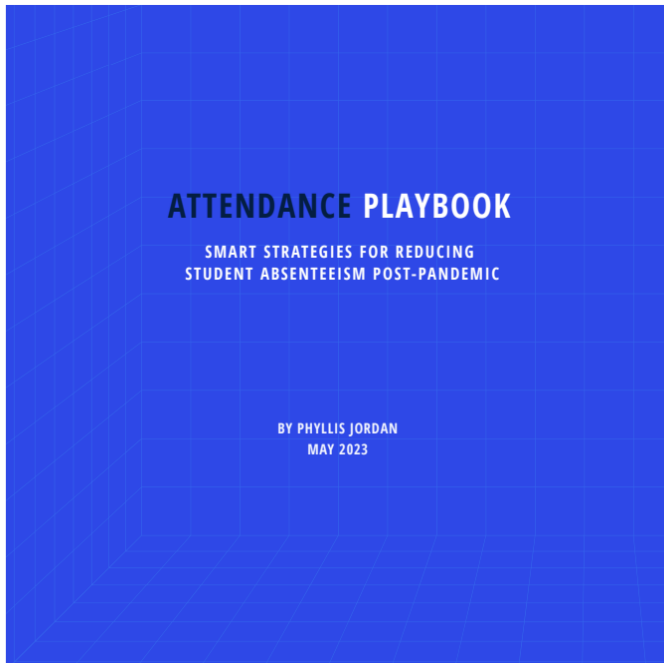
Disengagement

- 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
- Drawn to low-wage job vs. 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
- Sporadic absences aren't a problem
- Attendance only matters in the older grades
- Suspensions don't count as absence

Attendance Interventions



Attendance Works: Attendance Playbook

<https://www.future-ed.org/wp-content/uploads/2023/05/Attendance-Playbook.5.23.pdf>

FutureEd
Independent Analysis, Innovative Ideas



Teir I Interventions

- Nudging Parents and Students
- Home Visits
- Positive Messaging
- Incentives
- Healthy School Buildings
- School-based Health Services
- Telehealth
- School Buses and Public Transit
- A Safer Walk to School
- Breakfast for All
- Laundry at School
- Relevant—and Culturally Relevant— Curriculum
- Threshold Greetings
- Rethinking Recess
- Restorative Discipline Practices

Ohio's Attendance Guide

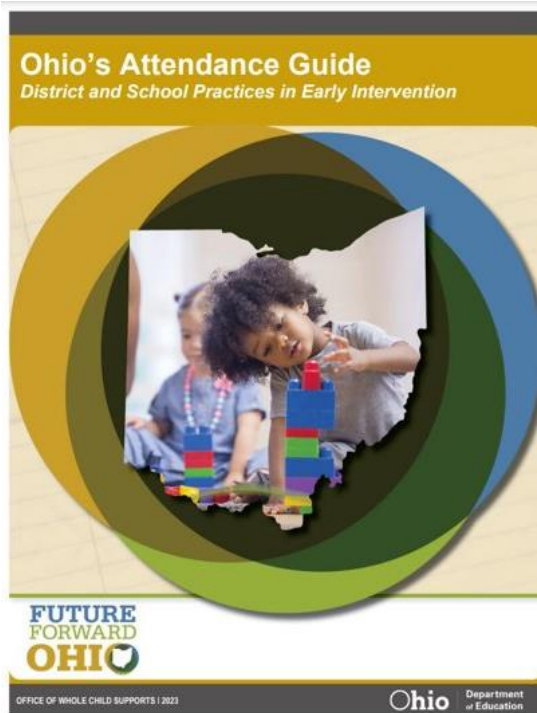


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- <https://education.ohio.gov/getattachment/Topics/Student-Supports/Attendance-Support/Ohio-s-Attendance-Guide.pdf.aspx?lang=en-US>

Tier II & III Interventions

TIER II

- Early Warning Systems
- Mentors
- Youth Engagement
- Addressing Asthma
- Targeted Transportation
- Students with Disabilities
- School Refusal
- Immigration Enforcement

TIER III

- Truancy Courts
- Interagency Case Management
- Housing Challenges

Student Wellness and Success Funds

- Effective during the 2023-2024 school year 50% of funding must be spent on either physical health care services, mental health care services or a combination of the two.
- All previous Student Wellness and Success Funds must be spent by June 30, 2025.

Happy to Help!

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References

<https://www.attendanceworks.org>

<https://education.ohio.gov/Topics/Student-Supports/Attendance-Support>

Zajacova A, Lawrence EM. The Relationship Between Education and Health: Reducing Disparities Through a Contextual Approach. *Annu Rev Public Health*. 2018 Apr 1;39:273-289. doi: 10.1146/annurev-publhealth-031816-044628. Epub 2018 Jan 12. PMID: 29328865; PMCID: PMC5880718.

QUESTIONS?

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