

# Stronger Together: Leveraging Health Personnel and Partnerships to Improve Attendance

**Session 3**  
**Spring 2026 Zoom Series**

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# Spring 2026 Zoom Series

## Chronic Absenteeism: Best Practices and Spotlights of Innovation Across Vermont

*All Wednesdays, 12 – 1pm*

- March 25: Chronic Absence 101: A foundational conversation investigating root causes and best practices
- April 8: Building Bridges for Student Success: Student Engagement Strategies
- April 29: Stronger Together: Leveraging Health Personnel and Partnerships to Improve Attendance
- May 6: Building Belonging: How the Community Schools Approach Reduces Chronic Absenteeism

Recordings of all sessions will be archived at <https://www.uvm.edu/larnermed/vchip/every-day-counts>



# Every Day Counts





# **Stronger Together: Leveraging Health Personnel and Partnerships to Improve Attendance**

**“You can’t educate a child who isn’t healthy,  
and you can’t keep a child healthy who isn’t  
educated.” – Dr. Joyce Elders**

4.29.2026

# School-based health services include:



School-based health centers (SBHCs)



School nurses



School mental health service providers

# **School-based health centers (SBHCs)**



## School-based health centers (SBHC's):



can include preventive services, acute care services, dental services, and mental or behavioral health services



SBHCs provide health services to students who otherwise may have been sent home or missed school because of illnesses and injuries or attending medical appointments for management of chronic health problems



Improve attendance among students with chronic absenteeism<sup>1</sup>

<sup>1</sup>Allison, M. A., Attisha, E., Lerner, M., De Pinto, C. D., Beers, N. S., Gibson, E. J., ... & Weiss-Harrison, A. (2019). [The Link Between School Attendance and Good Health | Pediatrics | American Academy of Pediatrics](#). *Pediatrics*, 143(2).



# A 2025 Vermont School-Based Health Center Study found:



SBHCs primarily address acute illnesses and mental health concerns, while also offering a wide range of services—from physical therapy to well-child and eye exams.



**86.7%** of students return to class after their visit, reducing time away from school and minimizing disruptions for caregivers who might otherwise need to miss work.



An average of **3.67 hours** in instructional time was saved for students who used their school-based health center and were sent back to class/recess afterward.



SBHCs provide access to medical care for children who might not otherwise receive it.

# School nurses

# School nurses: so much more than band-aids and ice packs!

## School nurses provide:



health management



mental health support



health education



crisis management



advocacy and access





# Schools with full time school nurses are more likely to experience:



**Reduced out of class time** for students seen for illness or injury<sup>1</sup>



**Decreased illness-related absenteeism** among children with asthma<sup>2</sup>



**Improved attendance** among students with chronic absenteeism<sup>3</sup>









Lower nurse-to-student ratios are associated with **improved school-level attendance rates.**<sup>4</sup>

<sup>1,2,3,4</sup> Allison, M. A., Attisha, E., Lerner, M., De Pinto, C. D., Beers, N. S., Gibson, E. J., ... & Weiss-Harrison, A. (2019). [The Link Between School Attendance and Good Health | Pediatrics | American Academy of Pediatrics](#). *Pediatrics*, 143(2).

# **School-based mental health service providers**



# School-based mental health services improve students' social, emotional and behavioral well-being through:


-  Individual-based interventions
-  Case management
-  External referrals
-  Group-based intervention
-  Needs assessment
-  Family-based intervention
-  Outreach
-  Telehealth delivery


Source: [National Center for School Mental Health \(NCSMH\) | University of Maryland School of Medicine](#), Accessed October 2025


# What does the research say?

## School-based mental health services<sup>1</sup>:

 Are as effective as traditional outpatient clinic services in improving clinical outcomes ([Armbruster & Lichtman, 1999](#); [Hussey & Guo, 2003](#); [Owens & Murphy, 2008](#))

 Do a better job of engaging and retaining families ([Atkins, Frazier, Birman, Adil Jackson, et. al., 2006](#))

 Are associated with reduced stigma ([Taras, Frankowski, & McGrath, 2004](#))

 Can reduce school absences ([Bavarian, Lewis, Dubois, Accok, & Vuchinich, 2013](#))

 Can reduce suspensions ([Wyman, Cross, Brown, Yu, & Tu, 2010](#); [Flay, Allred & Ordway, 2001](#); [Kang-Yi, Mandell & Hadley, 2013](#))

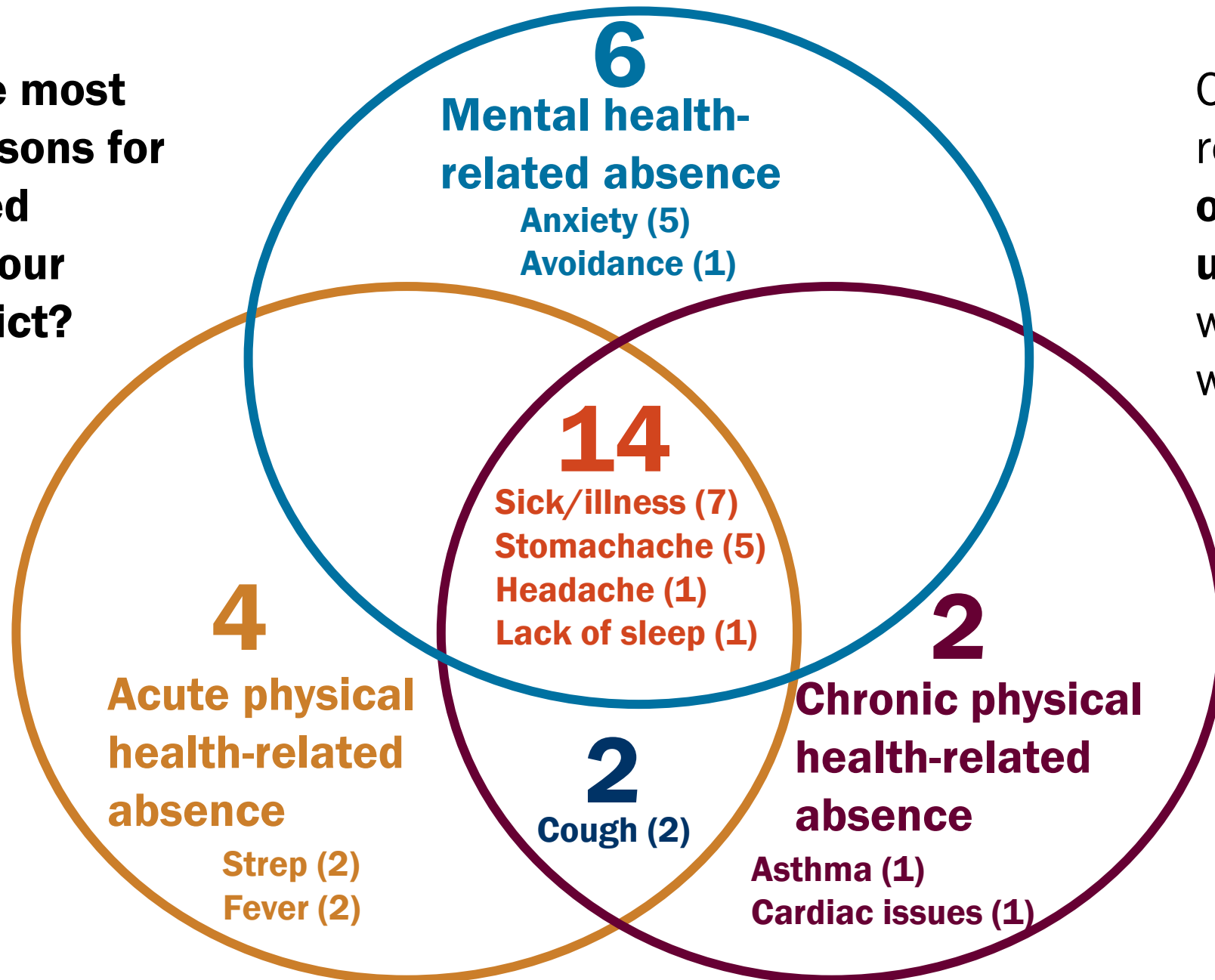


<sup>1</sup>Kang-Yi CD, Wolk CB, Locke J, Beidas RS, Lareef I, Piscicella AE, Lim S, Evans AC, Mandell DS. Impact of school-based and out-of-school mental health services on reducing school absence and school suspension among children with psychiatric disorders. *Eval Program Plann.* 2018 Apr;67:105-112. doi: 10.1016/j.evalprogplan.2017.12.006. Epub 2017 Dec 24. PMID: 29289924; PMCID: PMC5835186.

# Health-related absenteeism



**What are the most common reasons for health-related absence in your school/district?**

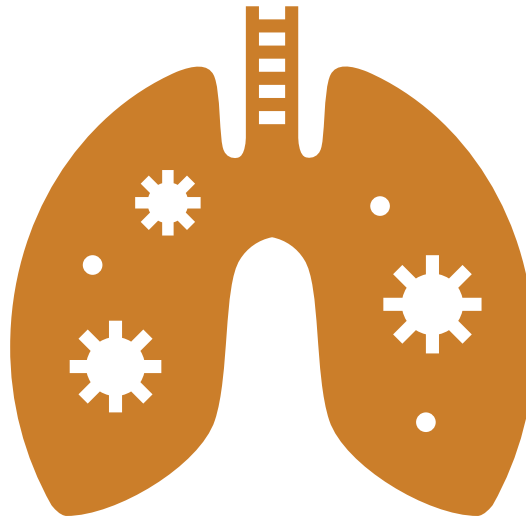


Of the 28 responses, **over half were unclear** as to which category was a best fit.

# Top health-related drivers of student chronic absenteeism



**Mental health and trauma**



**Asthma**



**Oral health concerns**

Sources: [2024 LA Trust Data xChange SBHC Impact Report](#), [Student Mental Health: Survey Results from Students and Education Leaders - EdWeek Research Center](#), [The Impact of School Mental Health Services on Reducing Chronic Absence - Attendance Works](#), [Mapping the Early Attendance Gap: Charting a Course for Student Success- Attendance Works](#), Accessed October 2025

# Content Warning

This presentation contains references to themes that some people may find distressing, including trauma due to sexual violence, bullying, parental/guardian substance misuse, weapon threats, neighborhood violence, food and housing instability.

Please take the necessary precautions for your emotional safety and well-being. This may include stepping away while some or all content is being presented.

If you or someone you know are in need of support, contact:

The Suicide and Crisis Line at **988**

Or Text VT to **741741**

**1 in 4** middle school and **1 in 3** high school students reported that their mental health was most of the time or always not good in the past 30 days.

**Nearly 3 in 10** high school students have lived with a parent or guardian who has a problem with alcohol or other drug use.

**Nearly a quarter** of high school students and **1 in 8** middle school students have ever had someone do sexual things to them that they did not want.

**About 1 in 5** high school students and **more than a quarter** of middle school students report getting bullied in the past 30 days.

About **1 in 7** middle school and **1 in 6** high school students report seeing someone get physically attacked, beaten, stabbed or shot in their neighborhood.

Nearly **1 in 10** high school students report being threatened or injured with a weapon on school property during the past year.

**About 1 in 15** high school students have a disability or long-term health problem that keeps them from doing everyday activities.

**1 in 25** high school students and **1 in 50** middle school students report experiencing unstable housing during the past 30 days.

**1 in 50** students in both middle and high school report being hungry most of the time or always during the past 30 days.

# Asthma and Vermont's Children



**Roughly 1 in 14** VT children have asthma.



**Over half** the children with asthma in VT have uncontrolled asthma.



**More than 1 in 5** youth with asthma have severe or moderate persistent asthma, necessitating multiple emergency room visits and significant impacts to daily living.



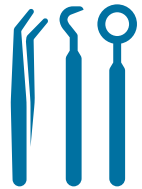
There were **420 emergency department visits and 58 hospitalizations** due to asthma among Vermonters under the age of 18 in 2022.

Source: [Asthma among Youth in Vermont | November 2025](#)

# Dental health concerns continue to rise for Vermont elementary school students.



**Over 40%** of Vermont's elementary school students have experienced tooth decay, a rate that is significantly worse than in recent years.



Dental care needs have increased significantly in the past 10 years. **One in four** Vermont elementary school students need dental care.



Elementary schools with more children eligible for the National School Lunch Program (NSLP) are **more likely to have children with tooth decay.**



# Panel Discussion

“**The mental health needs are the greatest.** Kids are really, really struggling - daily, multiple times – just today students have come in with (emotional/mental health issues) - cutting issues, depression issues, sleep disturbances, anxiety is huge. It's big.”

- VT school nurse

"I would love for there to be a way for kids to get their teeth fixed - we have so many kids who come in with rotten teeth or they have not been to the dentist, and I see it so often. **It affects their behavior and their ability to learn at school.** Some of these kids – their mouths just really look like they're in pain and they're complaining about their mouth hurting.”

-VT school counselor

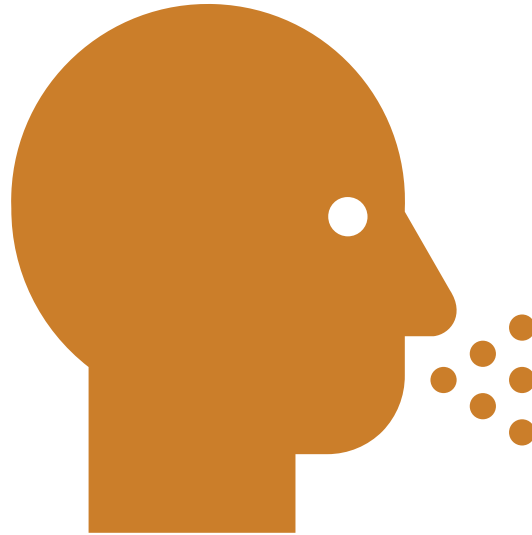
"We had a student who has severe asthma and **significant absences** related to asthma exacerbations...We worked with the parents and the primary care provider **to obtain an asthma action plan along with daily and rescue medications** that were needed to control or help with an asthma attack. The student's parents were also users of tobacco products, so we **referred them to 802 quits** to help mitigate the second-hand smoke exposure. The student has since had less severe asthma exacerbations requiring hospitalization. The student has also been **more compliant with medications** which has greatly reduced asthma attacks and the need for rescue medications. This has had a significant impact on this student's absence as his **days missed has decreased greatly.**"

- VT school nurse

# Health-related misconceptions contribute to missed school days.



Mental health days



Sick policy



Vaccine safety

# **Mental Health Day Misconceptions**



## Mental Health Days can:



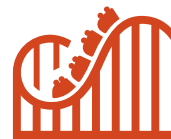
Provide time to recuperate and recharge



Reinforce avoidance or anxiety



Make the problem bigger, not better



Disrupt a consistent and supportive routine

Source: [Should Kids Take Mental Health Days? - Child Mind Institute](#), accessed October 2025

# **Sick Policy Misconceptions**

# Sick Policy Confusion

Children can go to school even if they have:



a mild cold, including a runny nose and/or cough



eye drainage without fever, eye pain, or eyelid redness



a mild stomachache



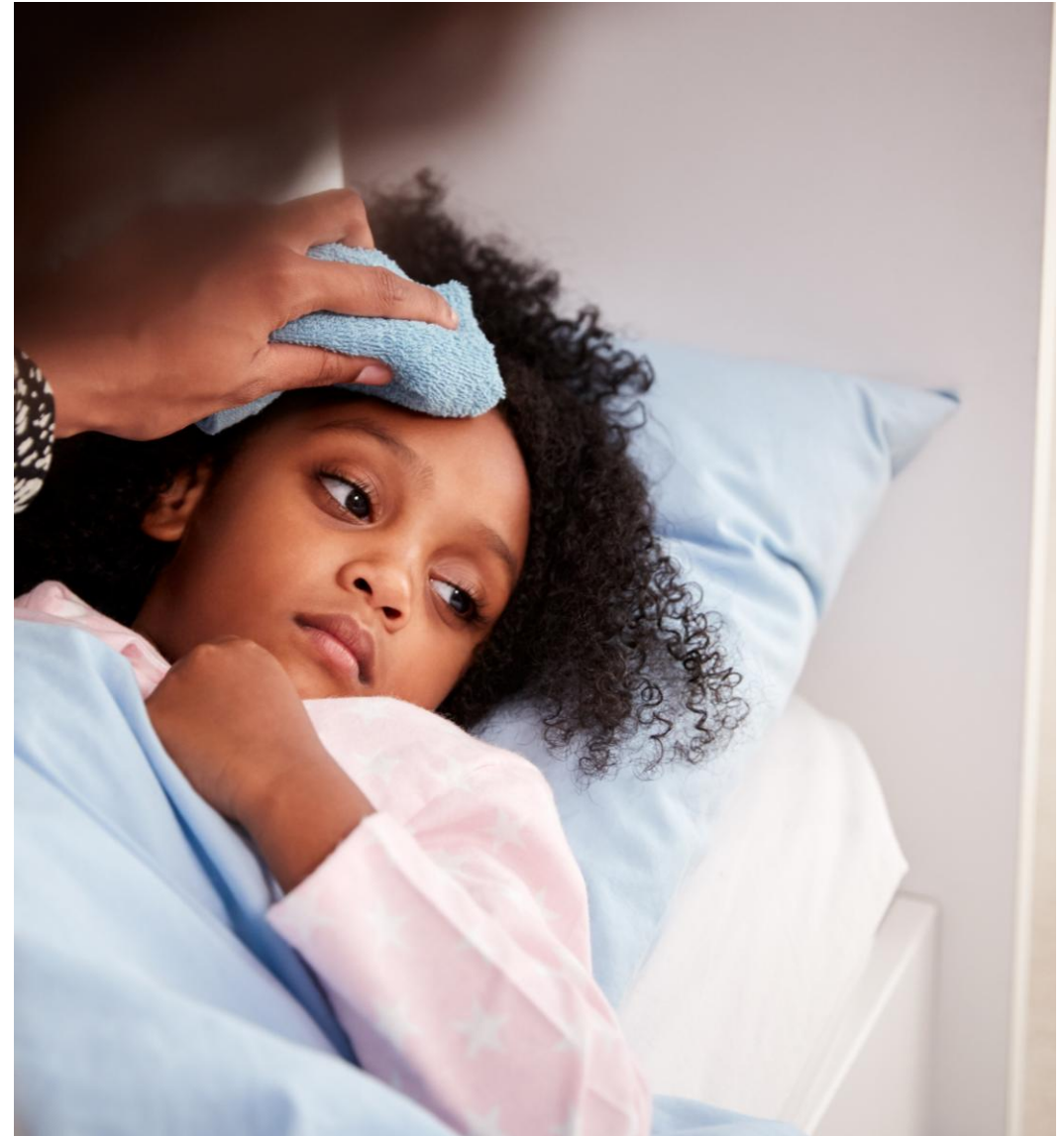
a mild rash with no other symptoms



head lice

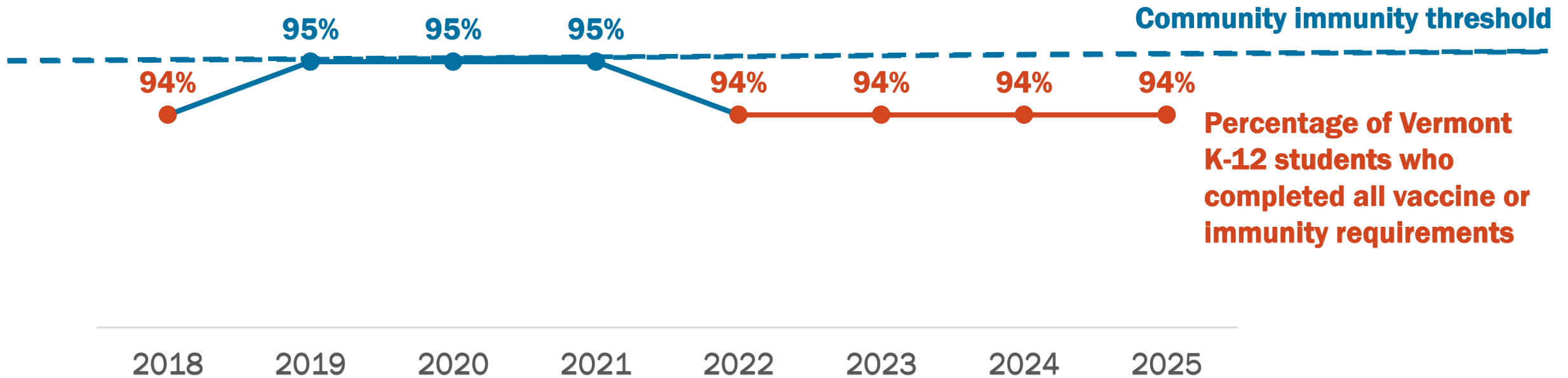


been fever-free overnight and hasn't taken fever-reducing medicine during that time



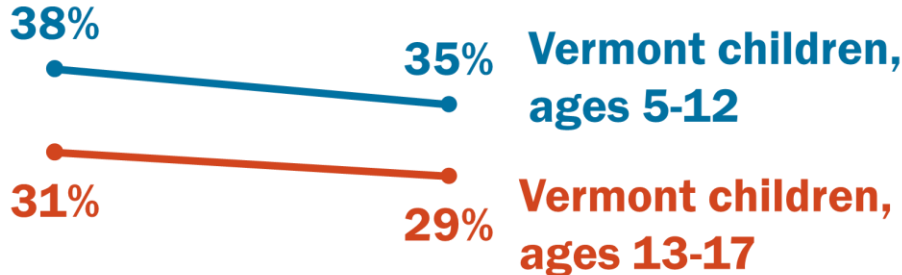
# Vaccine Safety Misconceptions

While Vermont has higher rates of K-12 students who completed all vaccine or immunity requirements than many states, we still have had **rates below** the **community immunity threshold** of 95% for the past four years.





### Flu vaccination rates decreased for Vermont children ages 5-17 from the average over the previous 3 years to the 2024-2025 season.

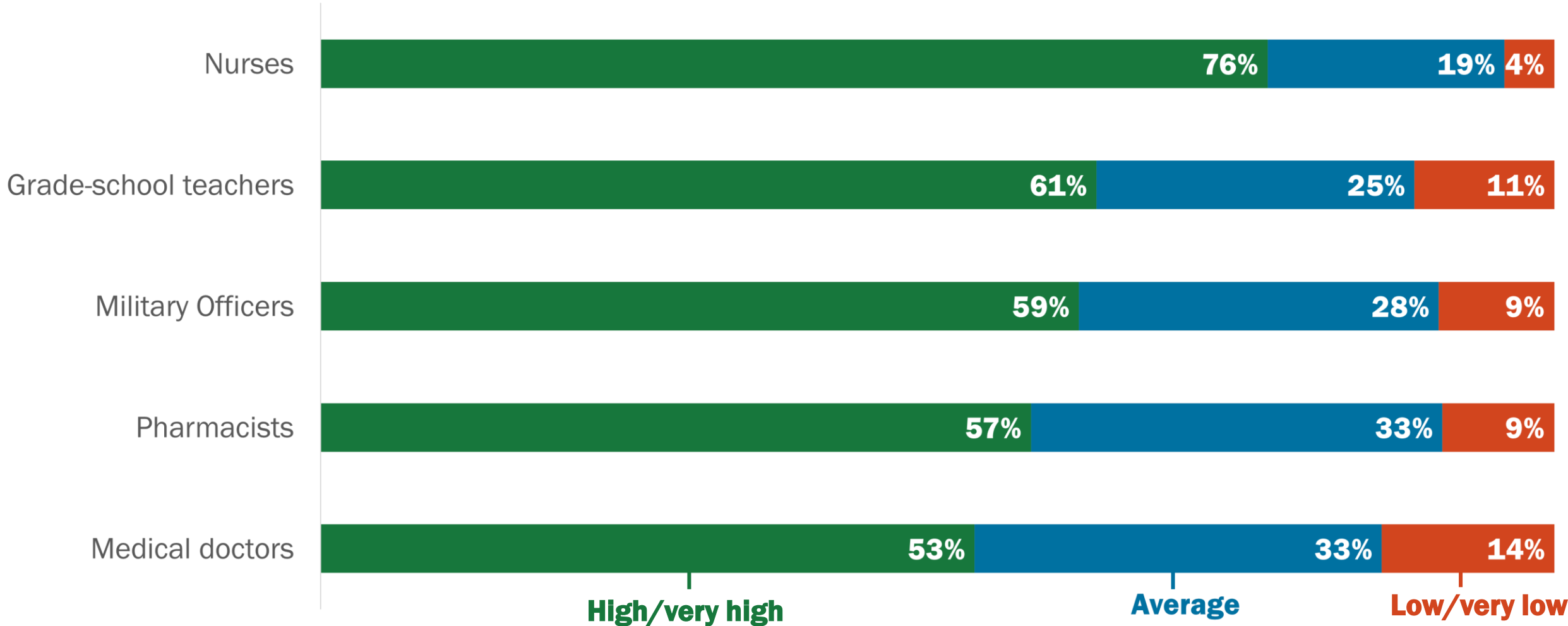


Last 3 year average

2024-2025

# Most Americans view nurses and teachers as having **high/very high** honesty and ethical standards.

Source: [Gallup Poll, 2025](#)



# Panel Discussion



Share one of the more common health-related misconceptions that lead to school absence in your school/district!

# Optimizing the impact of health services

# Optimize the impact of your school-based health services!



**Integrate** school-based health services staff into student support teams.







**Engage** school health services staff in population-level work.






**Enable** school health services staff to better partner with families, provider practices, and community supports.

# Build Strong Relationships with Families

Include school-based health services in:

-  new school orientation events/parent nights
-  the school and district website, with links to their own webpages from the main page
-  the school newsletter and social media
-  family and student handbooks

Families benefit from:

-  easy to access school health forms
-  awareness of and access to policies/procedures related to health and wellness
-  family engagement activities related to health and wellness



# Partner with your local health care providers (HCPs)

Together, you can:



[Adopt a bidirectional consent form](#)



Make a protocol around excused/unexcused absences for illness



Invite a child's HCP to attendance or MTSS meetings for that child



Coordinate for individualized health plan with school nurse



Identify resource supports in the school and health community and their roles

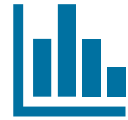




## Your Local Health Department can provide support around:



strengthening partnerships with provider practices



sharing data, evidence-based best practices, and promising strategies related to school health and wellness policies and procedures



supporting schools in expanding health-related services and initiatives

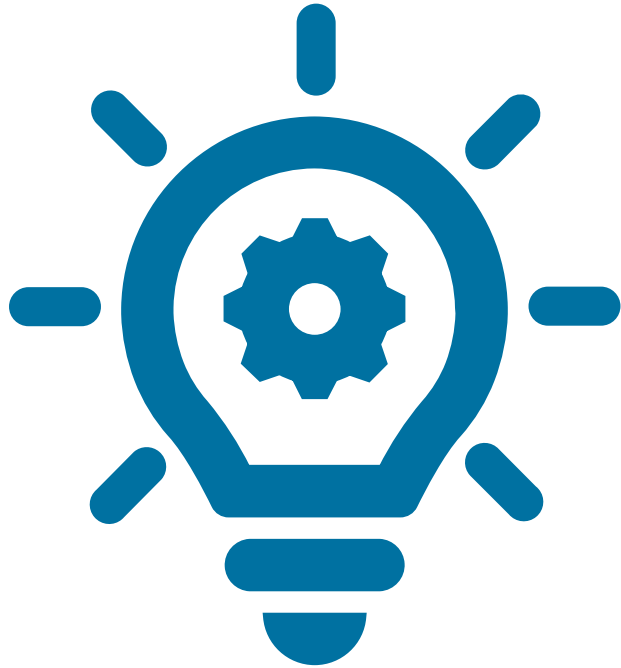


connecting to community partners and elevating school voice in community spaces to promote health and wellness



responding to infectious disease outbreaks and navigating immunization compliance challenges

# Panel Discussion



What is one action step you plan to take toward optimizing health services to address attendance?

# Resources

[Asthma-friendly Schools | Vermont Department of Health](#)

[Act 67 – Community Schools | Agency of Education](#)

[A Guide to Opening a School-Based Health Center in Vermont](#)

[Health Handouts - Attendance Works](#)

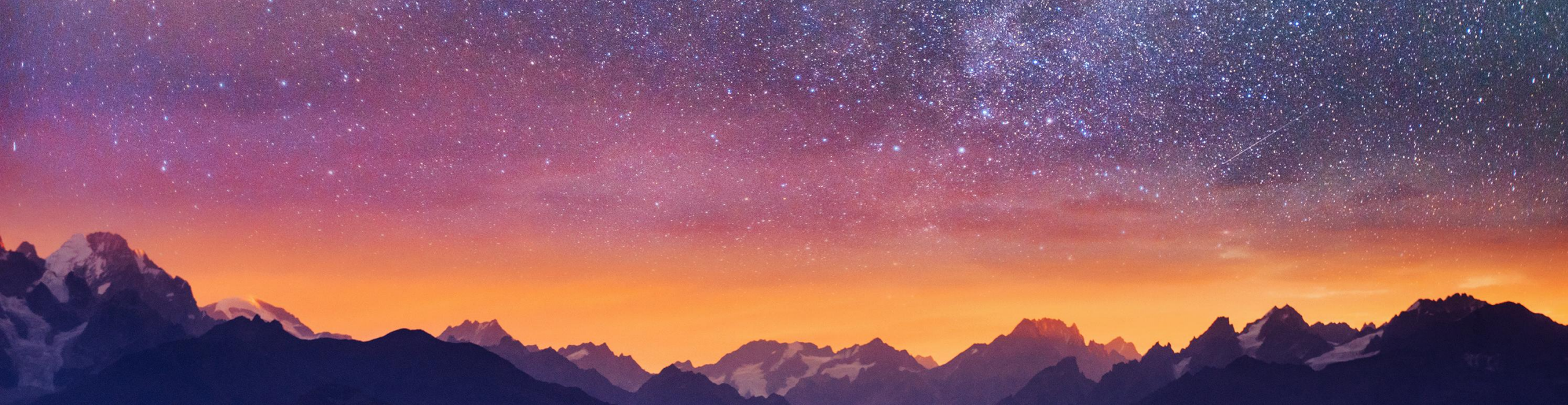
[Local Health Offices | Vermont Department of Health](#)

[School Vaccination Data | Vermont Department of Health](#)

[The Impact of School Mental Health Services on Reducing Chronic Absence - Attendance Works](#)

[Vermont 802 Smiles Network | Vermont Department of Health](#)

[Youth Risk Behavior Survey \(YRBS\) | Vermont Department of Health](#)



**“A goal without a plan is just a wish.”  
– Antoine de Saint-Exupéry**

# Thank you!

## Let's stay in touch.

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**Social:** @HealthVermont

