Attendance Rate Calculations
Updated June 13, 2014

The Chicago Public Schools (CPS) reports attendance on an annual basis, both to the State of Illinois and publicly on the CPS website. The attendance rate is also used in accountability systems such as the School Quality Rating Policy (SQRP) and principal evaluation. However, the attendance rate used in accountability is adjusted for students with medically fragile conditions and early graduation for 8th and 12th graders. This document explains how attendance rate is calculated and how it is adjusted for accountability purposes.

Official Attendance Rate
The average daily attendance rate is calculated as follows:

**Numerator**
The sum of the number of days in which students were marked present. A student may be marked as follows for each day:

1. Present for 300 minutes: 1.0 in the numerator
2. Present for a 150 to 299 minutes: 0.5 in the numerator
3. Present for homebound instruction: 0.5 in the numerator
4. Present for 0 to 149 minutes (includes all absence reasons): 0 in the numerator

**Denominator**
The sum of the number of days that students were “in membership” at the school. Students are considered to be in membership if:

1. The student is enrolled in the school; and
2. The student is scheduled to attend school that day.

CPS elementary schools record attendance once per day per student. Elementary schools must select the appropriate attendance value based on the number of minutes the student attended school that day. CPS high schools record attendance at the beginning of each class period.
IMPACT will calculate the correct attendance value based on the total minutes attended for the student that day.

Only students in grades K-12 are included in the official attendance rates reported by CPS and ISBE, including the rate used in the SQRP.

Schools are only accountable for the days in which a student is in membership at the school. All attendance a student earns while enrolled at a school (whether it is 1 day, 10 days, or 100 days) stays with that school regardless if the student becomes inactive or transfers out of the school. If a student transfers to another school during the year, the attendance the student earns at the second school is not factored into the first school’s attendance rate.

**Adjusted Attendance Rate for Accountability**

Attendance rates used in the SQRP and principal evaluation are adjusted for students with medically fragile conditions and early graduation from 8th and 12th grade. These adjustments are made after the calculation of the school’s official attendance rate and do not replace the official attendance rate. This means that the attendance rate reported to the State of Illinois and most often reported by CPS will be the unadjusted, official attendance rate.

**How Adjustments Work**

To calculate the adjusted attendance rate, CPS calculates four different attendance rates for the school and selects the highest one. The rates calculated are:

1. The official attendance rate, as described above
2. An attendance rate that excludes (from both the numerator and denominator) the attendance records for students who have been identified as having a medically fragile condition, as described below, IF the student’s individual attendance rate at the school was below the school’s official attendance rate.
3. An attendance rate that excludes 8th and 12th grade attendance records after the first allowable graduation date for CPS, as described below, IF the student’s individual attendance rate at the school was below the school’s official attendance rate.
4. An attendance rate that excludes all attendance records that meet the conditions for #2 and #3.

**Medically Fragile Adjustment**

Students who have medically fragile conditions that prevent them from attending school on a consistent basis may be removed from the school’s attendance rate as a part of the adjustment. A student who qualifies must meet the following criteria:
• Has an IEP, 504, or qualifying medical condition indicator¹ in SIM (at any time during
  the school year); and
• Has a health impairment that is severe enough to require prolonged dependency on
  medical care or technology; and
• Requires intensive nursing services in or out of school in order to maintain health and
  well-being; and
• Has a health impairment that is characterized by periods of acute exacerbation or
  potentially life-threatening episodes; and
• May require frequent hospitalizations or prolonged recuperation periods in home.

The Office of Diverse Learner Supports and Services (ODLSS) will review students’ IEPs, 504s
and medical condition indicators and designate which students qualify for the medically fragile
attendance adjustment. This process will take place late in the year in order to ensure all eligible
students are identified. A list of eligible medical conditions is included at the end of this
document². To adjust attendance for the SQRP, CPS will calculate an adjusted attendance rate
that excludes these students, but only for those students who have an end-of-year attendance
rate that is lower than the school’s unadjusted, official attendance rate. In this regard, a school
is not accountable in the SQRP for the attendance of these students if their attendance is low,
but it is also not penalized if the attendance for these students is high.

A student who qualifies for the medically fragile attendance adjustment at any time during the
year may be excluded from the attendance rate. If excluded, the student’s attendance for the
whole year will be removed from the calculation, not just the days during which the student
qualified for the medically fragile attendance adjustment.

8th and 12th Grade Graduation Adjustment
CPS specifies the first day on which students in 8th and 12th grade may graduate (for the 2013-
2014 school year this date is June 2, 2014). If students graduate on or after this date and do not
return to school, they will accumulate absences for the remainder of the school year, but the
school may enter these absences as “Excused” in SIM. In the official attendance rate that CPS
reports online and to the State, these absences will count against the school (excused absences
are still absences in the attendance rate). For this reason, schools to hold graduations as close to
the last attendance day as possible (for the 2013-2014 school year this date is June 13, 2014).

¹ Medical condition indicators are entered into data systems by nurses and case managers. The Office of
Diverse Learner Supports and Services (ODLSS) determines which of these conditions qualifies a student
for an attendance adjustment.
² NOTE: Having one of the eligible medical conditions does not by itself qualify a student for an
attendance adjustment. A student must meet ALL of the above criteria and be designated as qualifying by
ODLSS.
To adjust attendance for the SQRP, CPS calculates an adjusted attendance rate that excludes students who are in 8th or 12th grade on the first allowable graduation date and who have an end-of-year attendance rate that is lower than the school’s unadjusted, official attendance rate. In this regard, a school is not accountable in the SQRP for absences accumulated after graduation, but it is also not penalized if 8th and 12th graders have high attendance after that date.

This adjustment does not apply to Kindergarten students. Kindergarteners are expected to attend school until the last day of the school year. If the school holds an end-of-year celebration for Kindergarten students, absences after that day should be marked excused or unexcused based on normal CPS attendance policies.

**List of Medical Conditions Eligible for Medically Fragile Attendance Adjustment**

<table>
<thead>
<tr>
<th>Condition</th>
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<tbody>
<tr>
<td>Asthma, unspecified</td>
<td>Congenital anomaly, unspecified</td>
</tr>
<tr>
<td>Epilepsy, unspecified</td>
<td>Subglottic Stenosis (stenosis of larynx)</td>
</tr>
<tr>
<td>Diabetes Mellitus, unspecified complication, juvenile type</td>
<td>Hemophilia, unspecified coagulation defects</td>
</tr>
<tr>
<td>Cerebral Palsy, unspecified</td>
<td>Rheumatoid Arthritis (juvenile chronic polyarthritis)</td>
</tr>
<tr>
<td>Sickle Cell Anemia, excludes trait</td>
<td>Encopresis (incontinence of feces)</td>
</tr>
<tr>
<td>Pulmonary Tuberculosis, unspecified</td>
<td>Leukemia, lymphoid unspecified</td>
</tr>
<tr>
<td>Tracheostomy, complication of</td>
<td>Brain tumor, unspecified</td>
</tr>
<tr>
<td>Spina Bifida, unspecified region</td>
<td>Systemic Lupus Erythematosus</td>
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<tr>
<td>Crohn’s Disease (regional enteritis, unspecified site)</td>
<td>Renal failure, unspecified</td>
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<tr>
<td>Wilm’s Tumor (kidney)</td>
<td>Colitis, noninfectious, unspecified</td>
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<tr>
<td>Sarcoma (connective tissue, malignant)</td>
<td>Hodgkin’s Disease, unspecified</td>
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