



Colleton County
SCHOOL DISTRICT
PREPARING EVERY CHILD TODAY FOR TOMORROW

**MEDICAL HOMEBOUND
(MHB)
INSTRUCTION MANUAL**

**OFFICE OF SPECIAL SERVICES
500 Forest Circle
WALTERBORO, SC 29488
843-782-0022 Voice
843-782-0026 Facsimile**

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PURPOSE OF THIS MANUAL

Medical Homebound instruction is provided for students with and without disabilities who cannot attend school for a medical reason including a mental or physical condition that exists due to an accident, an illness, or pregnancy even when transportation is furnished. The goal of homebound instruction is to provide continuity of instruction and to facilitate the student's return to a regular school setting as quickly as possible. State Board of Education Regulation 43-241 outlines the provision of medical homebound services. **The following information is designed to support schools in implementing medical homebound in accordance with applicable laws and district expectations.** This process must be followed when a student requires homebound instruction.

DEFINITION

Homebound instruction provides the services of a certified teacher for those students whose physical or psychiatric medical needs preclude regular school attendance for an extended period of time. Homebound services are temporary with the goal for the student to return to instruction in the regular school setting as soon as the existing medical condition allows.

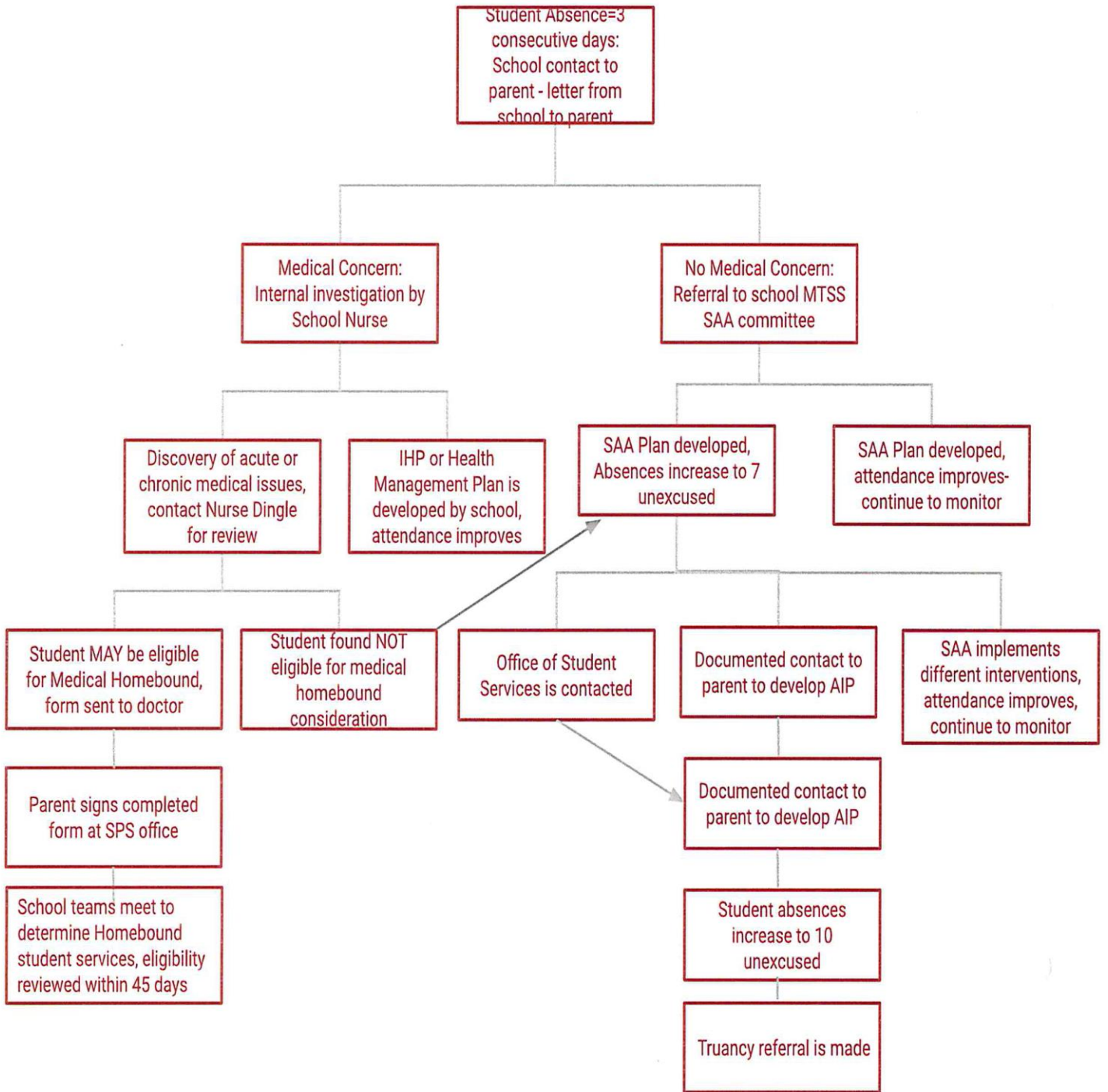
SCHOOL DISTRICT MANDATES

State regulations define "homebound or hospitalized instruction" as teaching that:

- is offered to the student who has **an acute or chronic medical condition that prevents him or her from attending** classes at school,
- takes place in a **"room especially set aside for the period of instruction,"** and
- is conducted by an individual who **holds a SC teacher's certificate.**

Schools and school districts that fail to fulfill their responsibilities with regard to the delivery of medical homebound instruction are subject to the forfeiture of federal and/or state aid. Specifically, the school district must:

- Make **individualized decisions** about the appropriate amount of instruction time for medically homebound students,
- Provide medical homebound **instruction and any other required services** in a **timely manner.**
- Consider whether the student seeking medical homebound instruction **qualifies under Section 504** of the Rehabilitation Act **or is eligible for entry into programs for children with disabilities** because of his/her accident or illness, and
- Provide medically homebound students with **opportunities for continued participation** in the general curriculum, extracurricular activities, and nonacademic activities. Homebound students and families **must continue to receive all regular school notifications** to ensure equal access.



Medical Need Established

- The **Special Services** provides the parent with the Homebound Brochure and Medical Homebound Instruction Form (HB1).
- The Parent Expectations (HB3) are reviewed with the parent and **parent** signs acknowledgement.

Homebound Requested

- The **parent** provides the physician with the **signed** Homebound Instructional Form (HB1) for completion.
- The **physician** completes the form and *faxes* it to the **Office of Special Services**. The Parent may also bring form to Special Services.

Homebound Approved

- The **CCSD Homebound Coordinator** reviews the Medical Homebound Instruction Form (HB1) and approves or denies the request. The **Homebound Office** informs the parents of the decision via *US Mail* and notifies the **School PowerSchool (PS) Liaison** via *email*.

Determination of Services

- The **school administration** and **classroom/special education teacher(s)** collaborate with **parent/student** to determine the type/amount of services and IEP revisions (if applicable). Services are listed on the Determination of Homebound/based Instructional Services Form (HB2) and submitted to the District **Homebound Office**. The school must confirm the Parent Expectations (HB3) have been signed and submitted as well.

Preparation for Service

- The **School PowerSchool (PS) Liaison** secures approved providers and collects Provider Commitment from each. The **HB Provider(s)** schedule the time and place of instruction with the parent.

Provision of Service

- As instruction is conducted, the **provider** completes the Record of Time and Attendance (HB5) and Report of Weekly Instruction (HB6) and submits these to the **School PowerSchool (PS) Liaison**.
- The HB liaison verifies services and submits information to update the student's attendance in PowerSchool. Originals are submitted to the **Homebound Office** and copies remain at the school.

Termination of Services

- Homebound services continue through the approved date. Extensions or changes to services must follow procedures. Unapproved hours and services may not be compensated.

GUIDELINES FOR HOMEBOUND INSTRUCTION

ELIGIBILITY

To be eligible for homebound services, a student must currently be enrolled in Colleton County School District (i.e., active in PowerSchool), be at least five (5) years of age and less than 21 years of age by September 1 of the current school year unless the student is determined eligible as a Student with a Disability under the criteria set forth in SC Board of Education Regulation 43-243.1.

- A licensed physician or nurse practitioner must certify that the student is unable to attend school for a mental or physical medical reason that exists due to an accident, an illness, or pregnancy even when transportation is furnished, but may profit from instruction given in the home or hospital. Medical Homebound should not be used to excuse absences for short-term illness.
- If a student has a recurring medical condition that intermittently results in the inability to attend school, the student may be eligible to receive medical homebound instruction during those periods, coming back to school and leaving school again, as the medical need dictates. A medical excuse from the doctor may be requested for each absence when a student is approved for Intermittent Medical Homebound.
- Upon request, the designated homebound school liaison will provide the parent with a *Medical Homebound Instruction Authorization* form and the information brochure entitled *Medical Homebound Instruction*. The administration of the school is responsible for ensuring an understanding with the parent of the process for requesting medical homebound. The parent must sign and provide the *Medical Homebound Instruction Authorization Form* to the student's physician for completion in its entirety. The physician must fax or mail the form to the district's medical homebound coordinator.
- The medical homebound approval will be for a period of 45 calendar days and will need to be submitted to the physician for a newly completed Medical Homebound Instruction Authorization Form.
- Upon receipt the District homebound liaison will log the homebound request into the District's database and will inform the designated Homebound School PowerSchool (PS) Liaison via email upon the determination of eligibility for homebound services.

What Homebound MAY BE used for...	What Homebound MAY NOT BE used for...
<ul style="list-style-type: none"> • Long term chronic illness requiring home or hospital care • Intermittent illness requiring home/hospital care • Support for pregnant students* • Support for students recovering from surgery 	<ul style="list-style-type: none"> • Students with excessive absenteeism • Students with discipline problems • Students who do not want to be at school • Students whose parents do not want them in school or • Students who need daycare for their children

*See Appendix 1

APPROVAL OF HOMEBOUND

The Superintendent of Colleton County School District must approve the student's eligibility for homebound services. This is done through a designated **District Office Authorizer**.

The DO Authorizer is not obligated to automatically approve any medical homebound request. If questions arise regarding a submitted request, the DO Authorizer may request a second opinion and/or contact the physician to supply additional documentation in order to determine if medical homebound instruction is appropriate and/or determine possible accommodations or modifications to allow the student to continue in the regular school program. Medical homebound will be authorized for a period of 45 calendar days. If continued medical homebound is determined to be required by a physician, a newly completed Medical Homebound Instruction Authorization Form will be submitted to the DO Authorizer for consideration of medical homebound services.

Note: The parent must sign the release on the Medical Homebound Instruction Authorization Form.

Additionally, if a mental health diagnosis indicates that long-term medical homebound instruction will be necessary, the DO Authorizer will advise the parent to make arrangements for a licensed mental health professional to develop a treatment plan and strategy for re-entry into the school setting. The SC Department of Education encourages districts to discuss with physicians the accommodations and modifications that can be made to keep students in the least restrictive environment (i.e., classes at the school). The DO Authorizer may refer the student to the school administrator and/or school psychologist. The District Homebound Coordinator oversees the daily operation of homebound services.

Notification of Approval or Denial will be sent to the **parent** and emailed to the **principal** and **School PowerSchool (PS) Liaison** by the **District Homebound Coordinator** or **District Homebound Liaison**.

APPEAL PROCESS

If a parent's request for medical homebound services is denied by the DO Authorizer, the parent may submit a written request for an appeal of the decision to the DO Authorizer. This written request for an appeal will be reviewed by the District Review Team. The student will be considered absent until the homebound appeal process is completed.

- The **District Review Team** will meet on an as needed basis as determined by the District Homebound Authorizer, but in no case more than ten (10) calendar days from receipt of a written statement of concern and/or request for an appeal.
- The **District Review team** will issue a written notice of its decision regarding the written statement of concern and/or request for an appeal within five (5) school days from the date of the meeting.
- The **District Office Authorizer** will establish, maintain, and continuously monitor the information maintained in the district data base.

ACCOUNTABILITY FOR HOMEBOUND SERVICES

*To ensure appropriate and timely services are provided, the District will establish and maintain a **District Review Team** to assist in adhering to the appropriate policies, rules and regulations, including the review of homebound requests, the review of parental appeals, and conducting parent satisfaction surveys. The District Review team consists of school administrators, the District Homebound Coordinator, and the District Office Authorizer.*

DETERMINING SERVICES

The District, in collaboration with school administration, will **determine appropriate Homebound services on an individual basis for all eligible students**. Students are entitled to a minimum of 1 hour per day of absence unless teams specify other amounts of time based on student needs. Virtual courses should be the first choice for homebound services for students for whom meet requirements. Upon receipt of a completed and approved Determination of Instructional Services for Medical Homebound form, the type and amount of instructional services will be delivered in accordance with the approval.

Services for Medical Homebound may be for a *continuous period of time or intermittent*. Intermittent homebound is available for students that have recurring medical conditions that intermittently makes him/her unable to attend school, that student may be eligible to receive medical homebound during these periods, coming back to school and leaving school again as the medical need dictates.

Be aware that a medical condition may also qualify the student for services and/or accommodations under Section 504 of the Rehabilitation Act of 1973. The school or District 504 Coordinator can provide more information on this process.

EXPECTATIONS OF STAKEHOLDERS

Student Responsibilities

The student must realize that medical homebound instruction is an extension of regular school and that all classroom rules and regulations, as well as school district policies apply. In addition, the student must

- Understand that the same rigorous standards for classes will apply during homebound;
- Understand that some labs or other activities that cannot be adjusted for homebound instruction may have to be made up after the student returns to school from homebound.
- Be available for all scheduled instruction;
- Be dressed appropriately for instruction;
- Have all books and materials needed for instruction;
- Complete all class work/homework assignments;
- Remain courteous, comply with teacher requests, and use appropriate language; and
- Dedicate instruction time to instruction only (no phone calls, visiting, radio, television, or other unrelated activities).

Parent Responsibilities[†]

- Realize that before instruction can begin, all necessary paperwork must be completed;
- Ensure that the child is available and prepared for the arrival of the medical homebound teacher;
- Understand that during the course of instruction, additional adult supervision is required to ensure a healthy and safe environment[†] for both the student and the teacher;
- Contact the homebound teacher to cancel the scheduled period of instruction in cases of emergency;
- Inform the homebound teacher of the child's future medical appointments as early as possible if such appointments will interfere with instructional time;
- Understand that if the student is absent for his/her scheduled period of instruction, he or she is considered absent from school on that day;
- Understand that the state's attendance laws fully apply to medically homebound students;
- Communicate with the school's homebound contact person about changes in the child's health and return-to-school plans;
- Sign the homebound teacher's time sheets, which logs the hours and days that the teacher has worked with the student;
- Monitor and encourage the child to plan his/her time in order to accomplish assigned work;
- Understand that although medical homebound instruction can take place in the home, an alternative site may be designated; and,
- Understand that the medical homebound approval will be for a period of 45 days and will need to be submitted to the physician for a newly completed Medical Homebound Instruction Authorization Form.
- If Homebound instruction is to be delivered in the home, a responsible adult/parent must be

present at all times.

† If a student is an emancipated minor or 18 years of age and living independently, he/she may sign forms as “parent.”

‡ The HB provider and student should never be in an unsupervised setting without at least one other adult. If the child’s home is used for instruction, the parent is also expected to provide an area in the home that is conducive to learning and suitable for instruction (e.g., quiet and free of distractions, has good lighting and a desk/work table).

Homebound Teacher (Service Provider) Responsibilities

- Call the **District’s Homebound Coordinator** if medical homebound instruction does not begin on the anticipated date;
- Notify the **family or hospital and District Homebound Liaison** if he/she is unable to attend a regularly scheduled session due to illness or emergency;
- Notify the **District Homebound Liaison** immediately if the teacher expects to be absent from regularly scheduled sessions for more than a few days;
- Never arrange for a substitute without prior approval from the **District Homebound Liaison**;
- Maintain close contact with the **student’s regular teachers and counselors** to ensure that the student is working on the appropriate assignments, consult on long term planning of the student’s educational program, and ensuring that completed student work is submitted and graded;
- Keep documentation to ensure the student receives credit for the work that he/she accomplishes;
- Notify the **school administrator** and the **District’s Homebound Coordinator** if one of the student’s school-based teachers is not cooperating in the homebound instruction process;
- Meet on a regular basis with the student and the family or hospital staff;
- Understand confidentiality requirements;
- Email the **School PowerSchool (PS) Liaison and District Homebound Liaison** immediately if the student is absent from the home at the scheduled time and the session has not been canceled by the family;
- Email and/or the **District’s Homebound Coordinator** immediately if there are concerns about the *safety of the teaching environment*;
- Report to the **Department of Social Services, the school administration, and the District’s Homebound Coordinator** if he/she believes that a student’s physical or mental health or welfare has been or may be adversely affected by *abuse or neglect*;
- Maintain written documentation of work assigned, student absences, and meetings with parents and school staff;
- Contact the **District Homebound Coordinator or Liaison** if there are problems with school personnel, the family or the student;
- Remember that motivation can be a problem with a sick or injured student;
- Notify the **District’s Homebound Coordinator** and the **School’s PowerSchool Liaison** as soon as it is known when the student will return to school; and
- Return incomplete assignments, books, and materials to the school when the student is authorized to return to classes;

- Submit the Session Reports and Timesheets no later than the Thursday following the instructional week to the **District homebound Liaison.** †
- Keep copies of Session Reports and Timesheets to log the hours and days of instruction with the student.
- Mileage is paid if at or above 20 miles.
- Fifteen (15) minute rule - Homebound Teacher is paid for 1hr if the student does not show.

† Note that pay follows the district's payroll schedule for hours submitted and approved.

Teachers of Record (School-based Teachers) Responsibilities

- Determine the student's interim and final grades with input from the medical homebound teacher;
- Understand confidentiality requirements;
- Assign grades to the student, following the regular grade-reporting processes including interims and report cards;
- Collaborate and consult regularly with the medical homebound teacher regarding the student's assignments, projects, and assessments;
- Provide long-term planning of instruction in collaboration with the medical homebound teacher;
- Provide assignments for the student on a regular basis;
- Clearly communicate with the medical homebound teacher about the student's progress;
- Collaborate with the medical homebound teacher to send frequent progress reports to the student's parent(s) or guardian;
- Avoid assigning busywork or excessive practice to the student; and
- Be flexible and remember that the homebound student is experiencing medical or mental difficulties.

School Responsibilities

- Ensure that appropriate collaboration is occurring between school staff and the medical homebound teacher;
- Assign a school contact person for the parent to call if problems arise because of lack of collaboration among school personnel;
- Assign a school contact person to facilitate the exchange of instructional materials;
- Plan for accommodations at school when the student returns to his/her classes;
- Arrange meetings as needed among the student's parents, the homebound teacher (providers), the student's teachers, and others;
- Involve the data team or school PLC as needed;
- Ensure that the homebound teacher has the appropriate textbooks and supporting materials;
- Consider IEP or Section 504 plans when warranted for recurring or chronic health conditions;
- Consider change of placement issues if medical homebound instruction becomes necessary for a special education student;

- Review periodically the appropriateness of homebound instruction for individual students;
- Ensure that an annual IEP or Section 504 team review is held for students with disabilities to consider the appropriateness of medical homebound instruction for these students.

District Responsibilities

- Establish a procedure to review homebound requests, confer with physicians as needed, and approve/deny medical homebound requests;
- Provide confidentiality training to staff every year via Employee Annual Orientation Platform;
- Establish a procedure to review instruction timesheets;
- Establish a procedure to meet with the parents to discuss such issues as the educational plan for the student's medical homebound instruction and the considerations of service delivery including attendance requirements, time, and location;
- Ensure that appropriate instruction is provided to the student;
- Ensure that district grade-reporting policies are followed for homebound students;
- Outline the responsibilities of the parents, the principal, the teacher, related school district personnel, and homebound teachers (providers) while a student is on homebound instruction;
- Outline a procedure to ensure collaboration, consultation, and coordination among all the medically homebound student's professional caregivers (e.g., physician, psychiatrist, counselor);
- Establish guidelines for reporting potentially unsafe conditions regarding the delivery of medical homebound instruction;
- Utilizing technology and other alternative instructional delivery methods when appropriate to enhance the medical homebound instructional process.

HOMEBOUND INSTRUCTORS/PROVIDERS

All medical homebound teachers and/or service providers must have a valid SC teaching certificate or license, must be listed in the District's personnel tracking system, and have a valid District email.

- Contract employees are NOT eligible to serve as homebound providers. This is because personnel may not be paid/employed by both CCSD and a contracted provider simultaneously.
- A person selected to be a homebound instructor who is already a full-time employee of the district will be reimbursed for instruction of no more than three (3) homebound students during the same week.
- A person selected to be a full-time homebound instructor will be reimbursed for instruction of no more than six (6) homebound students during the same week.
- Two (2) or more instructors/providers may individually instruct the same student provided that the total instructional time does not exceed the total number of hours of service allocated to the student.

LOCATION OF HOMEBOUND SERVICES

Homebound instruction may be conducted in the student's home or a hospital; however, an alternate location may be chosen if necessary. Regardless of location, it must be conducive to instruction (e.g., good lighting, a desk or table to work at, and have internet accessibility). Adult supervision by the family is also required to ensure that a safe and healthy environment exists for both the student and provider.

At no time should a homebound provider and student be alone without the benefit of at least one additional adult.

INSTRUCTIONAL ACTIVITIES DURING HOMEBOUND SERVICES

- Homebound instruction must be conducted according to the [Determination of Instructional Services for Medical Homebound](#) form agreed upon. The homebound instructor *may not* change the agreed upon services without conferring with the designated school administrator to ensure proper procedures are followed for amending a student's services.
- If a student received instruction for classes that require a lab and/or use of school equipment, the classroom segment of the instruction could possibly be done at home, while the student would have to make up the lab portion of the class after returning to school. If a portion is to be made up when the student returns, this should be stated on Part C of the [Determination of Instructional Services for Medical Homebound](#) form.
- Schools are encouraged to explore a variety of instructional methods such as virtual school, audiotapes, videos, computer software/applications, and internet resources to supplement the instruction provided by the homebound instructor.

ATTENDANCE AND HOMEBOUND

Medical homebound instruction is an extension of regular school in that all classroom rules and regulations, as well as school district policies apply, including attendance. Given that students on medical homebound are already receiving specific support and accommodations as a result of their medical needs, it is important that attendance at sessions is carefully monitored and reported should attendance at homebound sessions become a concern.

Note that UNTIL HOMEBOUND IS APPROVED, the student will be marked absent in PowerSchool.

Regularly scheduled sessions are established to provide consistency and continuity to homebound services. *While it is understandable that a session may need to be re-arranged on occasion by either the parent or an instructor/provider, it must be understood that such changes should be limited to emergencies or unavoidable conflicts.*

Cancellation WITH NOTICE: If a parent contacts the instructor/provider to report a conflict with a scheduled instructional session, the session should be rescheduled at a mutually agreeable time as soon as possible. *If either the parent and/or the instructor/provider have concerns that sessions are being re-arranged too frequently or for inadequate reason, he/she is encouraged to contact the school's designated homebound liaison or administrator for additional assistance to avoid termination of Homebound Services.*

Cancellation WITHOUT NOTICE:

If an instructor fails to notify the parent of the need to cancel a scheduled session, the parent is asked to contact the school's administrator.

If a parent fails to notify the instructor/provider of the need to cancel a scheduled session, the instructor is expected to:

- Wait 15 minutes at the scheduled location prior to leaving.
- Leave a note for the parent documenting the missed session.
- Report the missed session to the school's homebound liaison within 24 hours. The **homebound liaison** will notify the **school's PowerSchool liaison** of the absence so that the student's attendance can be marked as UNEXCUSED.
- Document the missed session on the Weekly Session Reports as UNEXCUSED.
- Documented UNEXCUSED absence for homebound students must be handled according to District Attendance/Truancy guidelines. **The school's PowerSchool Liaison** will notify the designated **school administrator** to ensure that attendance plans are established for the student.
- For a student with a disability, an IEP meeting may also need to be convened if the student's absences are significantly hindering the District's ability to provide the services specified in the student's IEP. The **school's PowerSchool Liaison** will immediately notify the **school administrator** to schedule this meeting.

"Partial Day" School Attendance - Attendance prior to the end of Medical homebound period

A student may maintain his/her status as "homebound" and begin returning to school for partial days.

In grades K-8, students may attend up to 5 hours of school and remain eligible for medical homebound.

In grades 9-12, students may attend up to 4 hours of school and remain eligible. If a student resumes partial attendance, it is expected that

- The licensed physician that certified the student's eligibility has medically cleared the student to return to school for partial days and given an indication of how long the student will need to remain on partial attendance. This can be done via a letter from the doctor or pre-printed "return to work/school" excuse form from the physician's office.
- The physician's note will provide the documentation code the student's absence for the rest of the day as "medically excused" and allow for homebound instruction for that day, otherwise, normal attendance procedures apply.

STUDENT TRANSFERS AND HOMEBOUND

Should a student move into another school's attendance zone, normal transfer procedures will apply and the student's homebound service responsibilities will move to the new school. New homebound providers may be secured in the event the student's transfer does not allow existing providers to work with him/her; otherwise, existing providers may continue to provide student services.

ENDING HOMEBOUND SERVICES

If a student's date of return to school matches the physician's date of return on the homebound approval form, normal procedures for general education and students with a disability apply.

- If a **parent** requests that a student return to school before the assigned medical homebound period has ended, the **school administration** will require a written physician's release before allowing the student to return.
- If a student is too ill to complete the services, then Homebound may be revoked. See "Revoking Homebound" below.
- If the student returns to school before the completion of all services/time, services will continue until completed. All services are expected to be delivered by the last day of school unless special approval has been given by the **District's Homebound Coordinator**.
- If a student with an IEP turns 21 while on homebound, the **school administrator** must contact the **District Homebound Coordinator** to discuss ending Homebound Services.

EXPULSION AND HOMEBOUND STUDENTS

Only those homebound students *with disabilities* remain eligible for homebound services during expulsion. All other students are not eligible if they are expelled from school.

REVOKING HOMEBOUND SERVICES

Per state regulations, the District may revoke homebound eligibility if there is documented evidence that the student no longer meets homebound eligibility. If the school has received information from the parent regarding a change in eligibility BEFORE the dates approved by the District OR if the school has other documented concerns regarding a family's management of homebound services, the **school administrator** (or designee) must contact the **District Homebound Coordinator** to consider revoking homebound services.

VERIFICATION OF HOMEBOUND INSTRUCTIONAL SERVICES

The school's homebound liaison is responsible for maintaining a copy of all homebound forms and records at the school and for distributing original forms as expected to necessary district staff. If the school's homebound liaison has questions or concerns regarding instruction for homebound, he/she

should speak to the school's administrator. If the liaison has questions or concerns regarding procedures for homebound monitoring, he/she should speak to the District's Homebound Coordinator.

1. The **District's Medical Homebound Liaison** will obtain all signed Weekly Session Reports and the Timesheets from the **instructor/provider(s)** and will verify that services have been performed for payroll and accountability purposes. *This includes:*
 - a. Ensuring that the dates and hours of service on the Weekly Session and the Timesheets are within the approved plan for the student.
 - b. Ensuring that the hours on the Timesheet match the Weekly Session Report.
 - c. Ensuring that the parent has initialed and signed the Report form.
2. Once the **District's Medical Homebound Liaison** has verified the forms, the original signed Timesheet will be given to the **District's Authorizer** for signature.
3. The **District's Medical Homebound Liaison** should copy/file both the Timesheet and the Weekly Session Report and file both original documents by the close of business each Thursday.

MONITORING OF INSTRUCTIONAL SERVICES AND HOMEBOUND ATTENDANCE

The School's PowerSchool Liaison in collaboration with the district homebound liaison is responsible for monitoring the provision of the services and/or absences.

1. The **school's PowerSchool Liaison** will daily document student absences from homebound instruction. ATTENDANCE FOR HOMEBOUND STUDENTS MUST BE UPDATED IN POWERSCHOOL per District Pupil Accounting protocols.
2. The total amount of medical homebound instructional services/time allotted must be provided as agreed upon in the Determination of Instructional Services for Medical Homebound form.
3. Medical homebound *MAY NOT BEGIN* until a **physician** certifies and the **District's Authorizer** approves the medical homebound request.
4. If the student has not received ALL of the hours they are entitled to under the approved Homebound Request, ***the District is REQUIRED to make up the missed instructional period – even if the regular school year has ended – without the benefit of state funding.***
5. Note that homebound hours are not added/amended to address standardized testing. Testing will need to be accomplished within regular hours available. The "days counted" are based on the hours due to the student and with consideration for the student's medical condition.
6. Note that discrepancies in submitted paperwork are referred to the **District's Authorizer** for resolution. The **District's Authorizer** will note decisions on submitted forms and/or return paperwork to the **District's Homebound Liaison** for resolution.

<p>It is CRITICAL that school and district staff make EVERY EFFORT to ensure that services are provided in a timely manner so that state regulations are followed and state funds can be used to pay for homebound services.</p>
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HOMEBOUND PROCEDURES FOR STUDENTS WITH DISABILITIES

FOLLOWING APPROVAL OF HOMEBOUND INSTRUCTION

1. The **district homebound liaison** will enter the service request into the district database and will notify the designated **school homebound liaison** of the specific services for special education. The **district homebound liaison** will “cc” the **school administrator** and the **District Homebound Coordinator and facilitator**.
2. The **district homebound liaison** will notify **parents** via US Mail and/or email of the approval or disapproval for medical homebound services.
3. The designated **school homebound liaison** will notify the **Team Lead** to schedule an IEP meeting to determine the extent of services.
4. The **school administrator** (or designated member of the IEP team) reviews the Parent Expectations for Medical Homebound and Expectations for Medical Homebound Service Providers with the **parent**.
5. The **parent** must sign the acknowledgement at the bottom of the Parent Expectations form. This signed form remains on file with the **school’s homebound liaison**.
6. IMMEDIATELY FOLLOWING THE IEP MEETING ESTABLISHING HOMEBOUND, **the school’s homebound liaison** should scan/fax a copy of the student’s IEP, meeting notes, and signature page and the Determination of Homebound Instructional Services for Medical Homebound form to the **district homebound liaison**.
7. The **school homebound liaison** will copy/file all forms and send originals to the **district homebound liaison**.
8. The student may now begin to be coded as “Homebound” in PowerSchool.

Factors to Consider when Planning Homebound Instruction:

- An IEP meeting must be scheduled through the special education Team Lead. The IEP team must meet to discuss the student’s medical needs and their impact on the student’s present levels of academic achievement and functional performance.
- The IEP must be reviewed/revise to reflect the student’s medical needs and the services that will be needed during the student’s medical homebound placement. The IEP team must ensure that students are given an opportunity to access and progress in the general curriculum, to advance toward the goals in their IEPs, and to earn Carnegie units (if applicable).
- The process for developing the student’s IEP must be followed as outlined in current district policies and procedures.
- The IEP team should consider an “if...then” description of services when a pattern of intermittent absences exists due to an illness or disability. A medical excuse will be requested for each intermittent medical absence.
- If the planned medical homebound services should change for the student (e.g., the semester ends and a new course begin), the IEP team is required to call a meeting to review/revise the IEP and describe the updated medical homebound services.

- The school team and parents set the amount of medical homebound instruction per day based on the student’s medical condition and the course/subject requirements. Time is based on the needs of the student; there are no preset limits to service times.
- Keep in mind that, even in the best of circumstances, medical homebound cannot completely replace the experiences a student is afforded by attending school regularly.
- The amount of services must be no less than fifty (50) minutes per day for each day of absence; unless otherwise noted on the physician’s statement due to the student’s medical condition. While the student may receive no less than fifty (50) minutes per day, medical homebound is not limited to this amount of time.
- Schools/districts may NOT make decisions regarding medical homebound based on funding, personnel shortages, administrative convenience, or school policies that limit instruction time.

ONCE HOMEBOUND INSTRUCTIONAL SERVICES HAVE BEEN DETERMINED

1. Following the IEP meeting, the **LEA/designee** will complete the Determination for Instructional Services for Medical Homebound form that includes the type and amount of services to be provided. The completed form should be given to the **School’s PowerSchool Liaison**.
2. The **special education Team Lead** will submit IEP paperwork to the District Office. The **special education Team Lead** will notify the **School’s PowerSchool Liaison** of the change of placement for the student.
3. The **school administrator** reviews the Medical Homebound Brochure and the Parent Expectations for Medical Homebound and Expectations for Medical Homebound Service Providers with the **parent**.
4. The **parent** must sign the acknowledgement at the bottom of the Parent Expectations form.
5. The **school’s homebound liaison** will send ***all*** original homebound forms to the **District’s Homebound Liaison**. The **school’s homebound liaison** is responsible for maintaining copies of all homebound records at the school.

NOTE: The **special education Team Lead** will be responsible for notifying the **homebound school liaison** of any changes in a student’s disability areas within 24 hours of a meeting.

ASSIGNING HOMEBOUND PROVIDERS

1. The **District’s Homebound Liaison** will work closely the **school’s homebound liaison and Facilitator** to locate a certified instructor and secure his/her services. Once an instructor is secured, **the liaison** will send the completed original Expectations for Medical Homebound Service Providers form to the **district homebound liaison**. A filed copy will remain with the **school’ Homebound and PowerSchool liaison**.

2. The **school administrator** is to ensure that all assigned **homebound instructors/providers**
 - a. Are certified in the areas of service the student is to receive while on homebound (e.g., special education services are conducted by a special education teacher);
 - b. Understand their responsibilities for providing services and for submitting homebound paperwork to the District HB Office;
 - c. Have been provided with the District’s Medical Homebound Procedures and forms;
 - d. Have reviewed and signed the Expectations for Homebound Instructors; and
 - e. Have reviewed and understand the service(s) to be provided as outlined on the Determination of Instructional Services for Homebound form and the student’s IEP.

PROVIDING HOMEBOUND SERVICES

Personnel selected as instructors/providers for students receiving medical homebound services are responsible for scheduling and delivering the services specified on the Determination of Instructional Services for Homebound form and the student’s IEP.

1. The **instructor/provider** contacts the **parent** to establish a mutual schedule and location for services based on the information indicated on the Determination of Instructional Services for Homebound form.
2. The **instructor/provider** contacts the **student’s teacher(s) of record** [school-based teachers] to obtain all appropriate instructional materials and/or subject/course requirements. The instructor/provider must ensure that the same rigorous standards apply to homebound assignments. *If a student’s teacher fails to provide assignments, the instructor/provider must notify the designated school administrator immediately. Homebound services should not be delivered if materials are not provided by the teacher(s) of record.*
3. After each instructional session, the **homebound instructor/provider** will complete the Report of Weekly Homebound Instruction and secure the **parent’s** signature as verification that services were provided.
4. The **homebound instructor/provider’s** completed Report of Weekly Homebound Instruction will be submitted to the **school’s homebound liaison** along with the **instructor/provider’s** Record of Time and Attendance form.

AFTER HOMEBOUND SERVICES HAVE BEEN COMPLETED

When a student with a disability is able to return to school following medical homebound placement, an IEP meeting must be convened to review/revise the student’s present levels of performance, special education/related services and placement needs. All standard procedures and protocols for IEP meetings must be followed during this meeting.

The **special education case manager** will submit IEP paperwork to the District Office. The **special education Team Lead** will notify the **school’s PowerSchool liaison** of the change of placement for the student.

HOMEBOUND PROCEDURES FOR STUDENTS WITHOUT DISABILITIES

FOLLOWING APPROVAL OF HOMEBOUND

1. Upon receipt of approval the **district's homebound liaison** will log the homebound request into the District's database and will inform the designated **homebound school liaison** via email upon the determination of eligibility for homebound services. The school administrator will be "cc'ed" on this information.
2. The district's homebound liaison will notify **parents** via US Mail of the approval or disapproval for medical homebound services.
3. The amount of services needed will be determined by **school administration** in collaboration with school nurse, **teachers**, and **parents**. The **school administrator** will complete the Determination of Instruction for Medical Homebound Services form during this collaborative meeting. *The District HB Coordinator may participate as needed.*
4. The **school administrator** (or designee) reviews the Parent Expectations for Medical Homebound and Expectations for Medical Homebound Service Providers with the **parent**.
5. The **parent** must sign the acknowledgement at the bottom of the Parent Expectations form. This signed form remains on file with the **school's homebound liaison**.
6. The **school homebound liaison** will submit all original, completed forms to the **district's homebound liaison** and maintain a filed copy of all items.
7. The student may now begin to be coded as "Homebound" in PowerSchool.

Factors to Consider when Planning Homebound Instruction:

- Virtual courses are the preferred method to deliver homebound instruction for students that will be continuously on medical homebound for at least four to five weeks.
- The school team and parents set the amount of medical homebound instruction per day based on the student's medical condition and the course/subject requirements.
- Medical homebound is to keep a student "connected to his or her regular curriculum until the time when his or her return to the classroom setting is possible." (SDE, pg. 4)
- Keep in mind that, even in the best of circumstances, medical homebound cannot completely replace the experiences a student is afforded by attending school regularly.
- The amount of services must be no less than fifty (50) minutes per day for each day of absence; unless otherwise noted on the physician's statement due to the student's medical condition. While the student may receive no less than fifty (50) minutes of instruction, medical homebound is not limited to this amount.
- If a student will be receiving *intermittent* homebound services, the team must describe the plan for delivery and a medical excuse will be required for each intermittent medical absence.
- Schools/districts may NOT make decisions regarding medical homebound based on funding, personnel shortages, administrative convenience, or school policies that limit instruction time.

ONCE HOMEBOUND INSTRUCTIONAL SERVICES HAVE BEEN DETERMINED

1. The completed Determination of Instruction for Medical Homebound Services form should be given to the **school homebound liaison**.
2. The **school homebound liaison** will send all original copies of homebound forms to the **district homebound liaison**. The **school homebound liaison** is responsible for maintaining copies of all homebound records at the school.

ASSIGNING HOMEBOUND PROVIDERS

1. The **school homebound liaison** will locate a certified instructor and secure his/her services. Once an instructor is secured, **the liaison** will send the completed original Expectations for Medical Homebound Service Providers form to the **district homebound liaison**. A filed copy will remain with the **school homebound liaison**.
2. The **school administrator** is to ensure that all assigned **homebound instructors/providers**
 - a. Are certified in the areas of service the student is to receive while on homebound (e.g., special education services are conducted by a special education teacher);
 - b. Understand their responsibilities for providing services and for submitting homebound paperwork to the District HB Office;
 - c. Have been provided with the District's Medical Homebound Procedures and forms;
 - d. Have reviewed and signed the Expectations for Homebound Instructors; and
 - e. Have reviewed and understand the service(s) to be provided as outlined on the Determination for Instruction for Medical Homebound Services form.

PROVIDING HOMEBOUND SERVICES

Personnel selected as instructors/providers for students receiving medical homebound services are responsible for scheduling and delivering the services specified on the Determination of Instruction for Medical Homebound Services form.

1. The **instructor/provider** contacts the **parent** to establish a mutual schedule and location for services based on the information indicated on the Determination of Instruction for Medical Homebound Services form.
2. The **instructor/provider** contacts the **student's teacher(s) of record** [school-based teachers] to obtain all appropriate instructional materials and/or subject/course requirements. The instructor/provider must ensure that the same rigorous standards apply to the assignments completed during medical homebound instruction. *If a student's teacher fails to provide assignments, the instructor/provider must notify the designated school administrator immediately. Homebound services should not be delivered if materials are not provided by the teacher(s) of record.*

3. After each instructional session, the **homebound instructor/provider** will complete the Report of Weekly Homebound Instruction and secure the **parent's** signature as verification that services were provided.
4. The **homebound instructor/provider's** completed Report of Weekly Homebound Instruction will be submitted to the **school's homebound liaison** along with the **instructor/provider's** Record of Time and Attendance form.
5. For INTERMITTENT HOMEBOUND STUDENTS, the **school homebound liaisons** are expected to send a report of the student's power school attendance with each provider's forms.
6. The **school homebound liaison** will file/copy all forms and send originals to the **district homebound liaison**.

AFTER HOMEBOUND SERVICES HAVE BEEN COMPLETED

Normal attendance procedures resume with no further action.

APPENDIX 1 – FORMS and TERMS CLARIFICATION

HOMEBOUND FORMS	
CCSD Report of Weekly Homebound Instruction	This form must be completed weekly by each homebound service provider and submitted WITH A <i>MATCHING</i> RECORD OF TIME AND ATTENDANCE to the District Homebound Office. Copies should be filed by the school homebound liaison.
Determination of Instructional Services for Medical Homebound Form	This form is completed at the Homebound Determination Meeting (and IEP meeting for students with disabilities) and submitted to the District Homebound Office. A copy should be filed with the school homebound liaison. <i>If a student has an IEP, a copy of the IEP and meeting notes must accompany the Determination form.</i>
Expectations for Medical Homebound Service Providers form	This form is reviewed with each homebound provider by the school administrator (or designee) and signed by the homebound provider. The original is submitted to the District Homebound Office and a filed copy must remain with the school homebound liaison.
Medical Homebound Instruction Authorization Form	Given to the parent for a licensed physician to complete and fax to the District Homebound Office. The school homebound liaison should complete sections 1 (student information) and the parent must sign the release if homebound is requested.
Parent Expectations for Medical Homebound Form	This form is reviewed with the parent by the school administrator (or designee) and must be signed by the parent. The original is sent to the District Homebound Office with a copy filed with the school homebound liaison.
Power School Attendance Reports	FOR INTERMITTENT HOMEBOUND, Power School attendance must match submitted Weekly Reports and Time/Attendance Forms. <i>School homebound liaisons are expected to send a report of the student's power school attendance with each provider's forms.</i>
Record of Time and Attendance	This form must be completed weekly by each homebound service provider and submitted WITH A <i>MATCHING</i> REPORT OF WEEKLY HOMEBOUND INSTRUCTION form to the District Homebound Office. Copies should be filed by the school homebound liaison.

TERMS CLARIFICATION	
Age of Eligibility	For students <u>without</u> a disability, a student must be at least 5 years of age and not older than 21 by September 1 st of the current school year. <u>Children with visual and hearing disabilities</u> may be four years of age by September 1 to receive medical homebound instruction. Younger children may receive services; however, this is not considered “medical homebound” and is arranged through Child Find or Baby Net.
Licensed Physicians	Only medical doctors, physician’s assistants, and psychiatrists licensed in S.C. may certify that a student is unable to attend school but may profit from instruction given in the home or hospital. <i>Midwives, RNs, LPNs, psychologists, and counselors are <u>not</u> able to do so.</i>
Non-public school students	A student must be enrolled in a <u>public</u> school to qualify for medical homebound instruction. The district may then count the student in its attendance report for state aid purposes. If a student is not enrolled in a public school, there is no requirement under either federal or state law that districts must provide medical homebound instruction to the student.
Pregnancy	A licensed physician must certify that the student cannot attend school because of a prenatal or postnatal complication associated with the pregnancy. In general, abdominal pain, back pain, fatigue, and vomiting are common to pregnancy but are not usually considered serious enough to warrant medical homebound instruction.

APPENDIX 2 – STATUTORY REFERENCES

Federal Law

The statutory basis for medical homebound instruction in federal law concerns the student who attends regular school but who qualifies as disabled under the Individuals with Disabilities Education Act 2004 (IDEA 2004) or Section 504 of the Rehabilitation Act of 1973.

Section 504 is a broad civil rights law that protects the rights of individuals with disabilities in programs and activities that receive financial support from the US Department of Education. Section 504 mandates that a team of knowledgeable participants develop an individual accommodation plan for a student who qualifies under its provisions. Elements of an individual accommodation plan may include the provision for medical homebound instruction.

The IDEA (2004) is a federal funding statute whose purpose is to provide financial aid to states in their efforts to ensure appropriate education services for students with disabilities. The IDEA provides protections for students with disabilities who need medical homebound instruction.

Both of these statutes mandate that states provide a free appropriate public education (FAPE) for all children with disabilities. The IDEA (2004) defines a FAPE as the special education and related services that are provided a public expense and are provided in conformity with an individualized education program (IEP).

Federal law mandates that removal of a child with a disability from the regular educational environment should occur only if the child's disability is so severe that he or she cannot be educated in regular classes with the use of supplementary aids and services.

Under the IDEA (2004) mandate, the individual school districts have the responsibility to provide extended school year (ESY) services, including instruction in the home and/or a hospital, to students with disabilities whose IEP teams determine to have the need for such services. Compensatory services may be required when a district has failed to provide the services stipulated in the IEP and the student suffers a loss of educational opportunity or benefit.

If the medical homebound placement will result in a change of placement, the IEP team must meet and make an individualized determination regarding the special education and related services needed to provide the student a FAPE. The IEP team must ensure the student is provided an opportunity to access and progress in the general curriculum, appropriate advance toward the goals in his/her IEP, and earn Carnegie units if applicable. At times, the medical condition and health of the student may dictate service considerations.

State Law

South Carolina's mandates regarding homebound instruction appear in State Board of Education Regulation 43-241. A copy of the regulation follows this paragraph along with a copy of the State's *Medical Homebound Instruction: A Guide for Parents and School Districts (2003)*.

