



Homebound Instruction Procedure Manual

2016

HOMEBOUND INSTRUCTION

Homebound instruction is recognized by this district as a viable alternative to regular classroom instruction under certain circumstances (see Wis. Stat. 118.15). Homebound instruction is not a mandated service. Homebound instruction is available to students who will be absent from school for an extended period defined as follows:

1. 30 or more consecutive calendar days, or
2. 30 or more intermittent calendar days including seven days that are consecutive.

Before homebound instruction can begin, a physician or psychiatrist must verify the need for absence by completing a written statement (see Appendix B) and a district faculty team must meet to develop an educational plan.

PROCEDURES FOR STUDENTS IN GENERAL EDUCATION

Initiation of Instruction

1. The parent or the teacher learns that the student may be absent from school for a prolonged period of time due to a medical condition.
2. The student is discussed at an SST meeting. A decision is made as to whether homebound instruction or other services are appropriate. If homebound instruction is deemed not appropriate, an SST team member will communicate this information to the parents along with any other recommendations or sources of assistance.
 - The student's counselor or the school nurse secures a signed Release of Information (Appendix A) form from the parent.
 - The parent or the school nurse obtains a signed Physician's Statement (Appendix B).
 - The teacher, counselor or principal completes a SST Referral, and the referral, Release of Information, and Physician's Statement are all sent to the Director.
 - Following review of the referral, the Director assigns case monitoring responsibilities to either a school nurse or school psychologist. The psychologist, whether assigned to be case monitor or not, is responsible for securing the services of a homebound teacher.
 - The school psychologist arranges a meeting with the following people: nurse, homebound teacher, counselor, parents and classroom teacher(s).
 - i. The purpose of this planning meeting is to discuss the following:
 1. Subjects to be taught at home or at a healthcare facility
 2. Any modifications needed in content, assignments, timelines
 3. Schedule for instruction
 - a. A guideline is three times per week for 1.5 to 2 hours. This must be arranged with the family. A family adult needs to be at home when homebound instruction is to be offered.
 - b. If a schedule cannot be set at this meeting, the homebound teacher should do this as soon as possible and should give a copy to the psychologist to document in the Accommodation/Intervention plans.
 4. The schedule for contact between the homebound teacher and the regular teachers. (The homebound teacher may communicate directly with the classroom teachers using the counselor as a special liaison, if necessary.)

5. Determination of grades. (generally, the homebound teacher will grade daily work and the regular teacher(s) will make final grade decisions.)
 6. Starting date and probably ending date.
 7. Other community sources of support or assistance.
 8. The psychologist summarizes the staffing meeting via an Accommodation/Intervention Plan.
- The psychologist informs the Director and appropriate school personnel, including attendance office staff, of the starting and probable ending date of homebound instruction.
 - The psychologist consults with the counselor, nurse and the homebound teacher, at least once a quarter, to re-evaluate the plan and the continued need for such instruction.
 - The student's counselor maintains contact, periodically, with the homebound student.

Responsibilities of the Homebound Teacher during the Period of Homebound Instruction:

- Secures needed texts, notes, course outlines and assignments from the teachers. If problems arise, the homebound teacher should check with the counselor.
- Establishes a schedule, if not done at the staffing. Give the psychologist a copy and any revisions that develop.
- Informs the psychologist of any changes in the student's or family's situation.
- Clarifies the expectation with the parents that at least one family adult needs to be in the home during the time of homebound instruction.
- Provides the Pupil Services office a Time Sheet (Appendix C) for each student at the end of every month. This sheet should reflect instructional and preparation time, including meetings.
- Completes a Homebound Teacher's Report (Appendix D) summarizing his or her work. Give it to the Director along with a final time sheet. The Director will review the report with the monitoring psychologist.
- Confers with the student's teachers and counselors if necessary.

Termination of Homebound Instruction

- The case monitor notifies the Director and appropriate school personnel, including attendance office staff, of the homebound instruction termination date.
- The case monitor composes an Accommodation/Intervention Plan closing memo with appropriate comments noted reflecting the fact that homebound instruction has ended.

PROCEDURES FOR STUDENTS WITH DISABILITIES

Initiation of Instruction

1. The parent or the student's Special Education teacher (IEP Chairperson) learns that the student may be absent from school for a prolonged period of time due to a medical condition.
2. The student is discussed at an SST meeting and the need for homebound instruction is reviewed. If there is not a need, the IEP chairperson will inform the parent.

- 3.If there is a need for homebound instruction, the IEP Chairperson (student's Special Education teacher) or nurse secures a signed Release of Information from the parent.
- 4.The IEP Chairperson or the nurse obtains a signed Physician's Statement.
- 5.The IEP Chairperson sends the Release of Information and the Physician's Statement and a memo requesting homebound instruction to the Director of Student Services.
- 6.The Director secures a homebound teacher and notifies the IEP Chairperson.
- 7.The IEP Chairperson coordinates an IEP meeting.
- 8.The following points are discussed at the IEP meeting and documents on the revised IEP.
 - Subjects to be taught at home or at a healthcare facility
 - Any modifications needed in content, assignments, or timelines.
 - Schedule for instruction
 - i. A guideline is three times per week for 1.5 to 2 hours. This must be arranged with the family. A family adult needs to be at home if homebound instruction is offered there.
 - ii. If a schedule cannot be set at this meeting, the homebound teacher should do this as soon as possible and give the information to the IEP Chairperson to be reflected in the revised IEP.
 - The schedule for regular contact between the homebound teacher and the general and/or Special Education teacher. (The homebound teacher may communicate directly with the classroom teachers and the IEP Chairperson as needed.)
 - How grades will be determined. (Generally, the homebound teacher will grade daily work and regular or Special Education teacher(s) will make final grade decisions.
 - Provision of any related services needed
 - Starting date and probable ending date
 - Other community sources of support or assistance.
- 9.The IEP Chairperson sends the revised IEP and Notice of Placement to the Director.
10. The Director sends a copy of the revised IEP to the parent, homebound teacher and IEP Chairperson.
11. The IEP Chairperson notifies the building administrator and the appropriate school personnel, including attendance office staff, of the starting date for homebound instruction.
12. The IEP Chairperson consults with the nurse and homebound teacher at least once a quarter to re-evaluate the need for continued homebound instruction.

Responsibilities of the Homebound Teacher during the Period of Homebound Instruction:

- Secures needed texts, notes, course outlines and assignments from the teachers. If problems arise, the homebound teacher should check with the IEP Chairperson.
- Establishes a schedule, if not done at the IEP meeting. Gives the IEP Chairperson a copy and any revisions that develop.
- Notifies the IEP Chairperson of any changes in the student's or family's situation.

- Clarifies the expectation with parents that at least one family adult needs to be in the home during the time of homebound instruction.
- Provides the Director a separate Time Sheet for each student at the end of every month. This sheet should reflect instructional and preparation time (including meetings).
- Upon termination of instruction, completes a Homebound Teacher's Report and summarizes his or her work and give it to the Director.
- Confers with the student's teachers and counselor if necessary.

Termination of Homebound Instruction

- The IEP Chairperson, upon being notified that homebound instruction is to end, convenes an IEP meeting to review the IEP and change the student's special education placement. The IEP Chairperson sends the Invitation to the IEP Meeting.
- The IEP Chairperson sends the revised IEP and the Notice of Placement to the Director. This revised IEP notes the final day of homebound instruction.
- The IEP Chairperson notifies the principal and attendance personnel at the school of the homebound instruction termination date.

Additional Notes Regarding Pregnant Students in General and Special Education

- Counselor learns that student may be pregnant.
- Student's counselor or nurse secures a signed Release of Information form from the parent.
- A SST referral for pregnancy services is completed by the counselor and is sent, with the Release, to the Director.
- The school nurse has case monitoring responsibilities. The nurse verifies the pregnancy with the physician and obtains a homebound instruction prescription documenting medical reasons for not attending school, pre and/or post-delivery.
- When the nurse obtains the Physician's Statement verifying the need for homebound instruction, she/he will do the following:
 - For students in general education, the nurse notifies the psychologist who will proceed following the procedures in Section I-A.
 - For students receiving special education services, the nurse informs the IEP Case Manager, and the IEP Case Manager will follow all procedures noted in Section II-A.

PERMISSION TO OBTAIN AND RELEASE INFORMATION

Dear : _____ Date: _____

In order for us to obtain and release information regarding your child, _____, please complete and return a copy of this form. If you have questions, contact me at: _____

Sincerely,

Name and title of school district employee

Name of Child: _____ Date of Birth: _____ Age: _____
Current School: _____ Grade: _____

PARENT PERMISSION TO OBTAIN AND RELEASE INFORMATION (TWO WAY COMMUNICATION)

I, the undersigned, hereby request and authorize:

School: _____ Contact Person: _____

Address: _____

Phone: _____ Fax: _____

To release to or obtain from:

School/Agency: _____ Contact Person: _____

Address: _____

Phone: _____ Fax: _____

The information which I have indicated below:

- Official student academic/administrative records (identifying information, grade level completed, grades, class rank, attendance records, and group aptitude, and achievement test results)
- Medical and/or related health records. Type of provider: _____
- Medical history/diagnostic/therapeutic information from _____ to present.
Developmental/Learning Disability Mental Health Behavioral Health
Drugs/Alcohol Abuse HIV
- Specific information (i.e., x-ray films, photographs) or verbal exchange with _____
- Medical information limited to: _____
- Psychological evaluations or social work reports
- Evaluation and related reports
- Appropriate agency reports
- Exchange/release of IEP documents
- Attendance, participation, and implementation of the IEP
- Other (please specify): _____

Purpose of disclosure: _____

This permission is valid for one year from the date signed. A copy of this form is as effective as the original.

I understand that I may revoke this authorization at any time by submitting written notice of the withdrawal of my consent and that the written revocation must be given to the agency/organization I authorized to release information. I recognize that health records, once received by the school district, may not be protected by the HIPPA Privacy Act and may become education records protected by the Family Educational Rights and Privacy Act (FERPA) with additional protection afforded by Wisconsin Statutes 118.25(2m)(a)(b) and 146.83. I also understand that if I refuse to sign, such refusal will not interfere with my child's ability to obtain health care.

Signature of parent/relationship

Date

The school district does not discriminate on the basis of race, sex, age, religion, disability or national origin.

Permission to Obtain and Release Student Information: Staff Procedures

What types of student information are governed by these procedures?

Parents may request that school staff who work closely with their child furnish information regarding the student's daily functioning in the school environment for inclusion in medical and/or clinical evaluations conducted by professionals outside the school system, i.e. general medical practitioners, clinical psychologists, psychiatrists, social workers, etc. The information may include checklists, rating scales, behavior inventories, descriptive narratives of the student in the school setting, which are not part of the student's cumulative file. A separate file apart from a student's cumulative file, is maintained to store this type of information. Access to such files is limited and documented.

Are staff members required to complete these forms about students?

Certified staff members are strongly encouraged to assist parents in efforts to seek appropriate evaluations for their children. This type of evaluative task is not one that is within the scope of job duties assigned to classified staff such as instructional aides.

The following steps should be followed:

- Parents/guardians sign a *Permission to Obtain and Release Information* form that verifies their permission for the requested RASD staff member(s) to collect and release specified student information to the agency/provider designated by the parent/guardian and to obtain specified information from the agency/provider regarding the student. Parents may be referred to the building principal, school counselor, or school psychologist for assistance in obtaining and completing the required form.
 - Information provided by school staff must be sent directly to the office of the agency/provider designated by the parent/guardian. This is so the completed checklists, rating scales, etc. are released only to professionals having the expertise to fully interpret the information for parents. (Information should not be given to "hand carry" to providers.) This information will be mailed out from the Student Services Office.
1. The staff member informs the building school counselor, school psychologist, or special education teacher of the request.
 2. The staff member(s) complete(s) the checklists, etc. furnished by either the parent or the school psychologist.
 3. Staff member(s) return(s) the completed materials to the school counselor, school psychologist or spec. ed. teacher. Materials will be sent to the Student Services Office where the request will be logged and materials will be mailed to the appropriate individuals. Staff members do not need to retain copies of the completed forms, as this will be done by the Student Services Office staff before materials are mailed. Copies will then be filed in the student's behavioral file.

Which Student Services members handle these types of requests for staff?

- K-5: The School Counselor handles all requests for regular education students.
 - K-5: The School Psychologist handles all requests for students who are in the process of being evaluated for special education or Section 504 or who are being tested individually by the School Psychologist with parent permission.
 - K-5: Special Education Teachers handle all requests for students on their caseload. (Speech Pathologists handle requests for students with speech/language disabilities.)
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PHYSICIAN'S STATEMENT
Verifying the Need for School Absence

NOTE: To be eligible for Homebound Instruction, the student needs to be absent from school for an extended period—30 or more consecutive calendar days or 30 or more intermittent calendar days including sever which are consecutive.

Student Name (Last, First, Middle): _____

Sex: Male Female Birthdate(Mo/Day/Yr.): _____

Parent or Guardian's Name(s): _____

Address (Street/City/State/Zip): _____

Physician's Statement

1. Diagnosis: _____

2. Description of Condition: _____

3. Is the student able to attend his/her school program? Yes No
 If no, list medical restrictions which may interfere with the educational program.

4. Will this student be:
 At home – Anticipated no. of days ____ Indefinitely Consecutive Intermittent
 Hospitalized – Anticipated no. of days ____ Indefinitely Consecutive Intermittent

5. Where will this student be residing during this time?
 Home Nursing Home Hospital Other: _____

Physician's Name: _____ Clinic Name: _____

Address: _____

Telephone Number: _____

Physician's Signature: _____ Date: _____

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Area School District

"Inspiring learners, engaging community, enriching the world"

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Dear

Enclosed is a "Physician's Statement of Student's Inability to Attend School" which should be completed before homebound instruction can be considered to _____. You will also find the parental permission for release of this information to the Ripon Area School District.

Please note in Section 5, that the number of anticipated homebound or hospitalized days should be noted. These can be consecutive or intermittent. Thirty days are the minimum number of days in order to be considered for homebound services.

Please call me at (920) 748-1554 if you have any questions. Thank you.

Sincerely,

Anne Lang,

Director of Student Services
