



## Eufaula City Schools - Procedures for the Provision of Homebound Services

Eufaula City Schools provides homebound services for those students who are not able to attend school for medical and/or mental health reasons that are acute, catastrophic, or chronic. If a student's anticipated duration of absence from school exceeds 15 consecutive school days, the student will be eligible for services under the provisions of this policy.

These homebound and hospital service procedures apply to all students who are not identified as eligible under the Individuals with Disabilities Education Act (IDEA). For those students who are identified as eligible under IDEA or Section 504, homebound services and instruction will be determined by the student's IEP or 504 team, which includes the homebound teacher, and if deemed applicable, administered through the Eufaula City Schools Special Education Department.

**(Note: The referral process for homebound services is to be initiated at the time it is determined that a student will miss 15 or more days of school—not after the student has already missed 15 or more school days.)**

Eligibility for homebound services requires that written documentation from a physician or psychiatrist must be presented to Eufaula City Schools prior to consideration for services. In addition, a student may become eligible for homebound services based upon a finding by the appropriate Individualized Education Program (IEP) or Section 504 Team.

Homebound services are for students currently enrolled in the Eufaula City School System who must be temporarily confined at home or in a health care facility. The purpose of homebound instruction is to help students keep up with their work although they are unable to attend school. However, homebound services are meant as a short-term intervention and do not in any way supplant attendance in a regular school for an extended period of time. The goal of homebound instruction is to sustain continuity of instruction and to facilitate the student returning to school. Homebound instruction is not a guarantee that the student will always progress in the academic program.

Eufaula City Schools will provide homebound instruction to students with and without disabilities. The following procedures should be noted for determining a student's eligibility for homebound services.

### Homebound Eligibility for All Students

1. The student must be enrolled in the Eufaula City School System and must reside within the Eufaula City School District.
2. A documented medical condition must prevent the student from attending school for a period of fifteen (15) or more consecutive school days from the date of the written homebound recommendation.
3. A written recommendation for homebound services from the student's treating physician, *e., a licensed physician or licensed clinical psychiatrist* must be submitted. Completion of the *Treating Physician's Recommendation for Homebound/Hospital Services* form by the child's treating physician is required.
4. Eufaula City Schools reserves the right to request an updated medical statement when deemed necessary. This statement may be requested when the homebound services need to be extended beyond the initially approved length of time.
5. The determination as to whether homebound services are warranted is a decision that is made by the homebound services team. In making this determination, full consideration will be given to the written recommendation received

from the treating physician. **However, a recommendation for homebound services by a treating physician does not guarantee homebound.**

6. If a student suffers from an emotional or psychiatric disorder, and the attending physician or psychiatrist recommends homebound services, a treatment plan **must** accompany the *Treating Physician's Recommendation for Homebound/Hospital Services*. The treatment plan must outline the student's mental health diagnosis, treatment history, current treatment, and a date for returning the student to school. The referring licensed physician and/or licensed psychiatrist must be the treating physician or psychiatrist for the medical and/or psychiatric condition for which the student is requesting homebound services. Examples include the following:
  - a. A student with leukemia may not request homebound services with a medical statement from a pediatrician. A statement from the oncologist currently treating the student is required.
  - b. A student with paranoid delusions may not request homebound services with a medical statement from a psychologist or pediatrician. The medical request must be from the licensed psychiatrist currently treating the student.

If the student requires an extension of homebound services, a mandatory review of the student's mental health condition must be conducted in order to extend the homebound services. An updated *Treating Physician's Recommendation for Homebound/Hospital Services* form must also be completed, along with an updated treatment plan.

7. The eligibility criteria for students who are pregnant are the same as for students who are not. The doctor must indicate the specific medical condition (outside of the student being pregnant) that necessitates the request for homebound services, i.e., requires continuous bed rest, at risk for premature delivery, etc. Although the medical condition necessitating services may be related to the student's pregnancy, the pregnancy in and of itself does not constitute eligibility for homebound services.
8. Recovery from childbirth—in and of itself—is not considered a medical condition that meets eligibility criteria for homebound services unless the student experiences medical complications. The eligibility criteria for participation in homebound services are the same for all students—whether they are pregnant, or not pregnant, or have given birth. Instead, once a pregnant student delivers her child, her absences from school are to be coded as excused for as long as the doctor says, which is typically for six weeks after delivery.
9. Homebound services are not to be granted for a teen parent simply because of lack of childcare.
10. Homebound services are not to be granted for a teen parent simply because she is in her third trimester.
11. In order to evaluate the need for homebound instruction, the parent/guardian of the student requesting homebound services will be asked to grant Eufaula City Schools written permission to consult with the physician or psychiatrist. The exchange of information is essential in determining the initial eligibility and continued eligibility of the student in receiving homebound services. The *Treating Physician's Recommendation for Homebound/Hospital Services* form contains a statement for the parent to sign granting Eufaula City Schools permission to consult with the appropriate medical professional. Only the original paperwork will be accepted as application for homebound services. An incomplete application may cause a delay in services.
12. **A recommendation for homebound services by a treating physician does not guarantee homebound placement.** The *Treating Physician's Recommendation for Homebound/Hospital Services* form that is completed by a licensed physician or a licensed clinical psychiatrist merely represents student assessment data that is to be considered by the homebound services team when deciding whether or not the student meets eligibility criteria for homebound services. The homebound services team also has the right to request additional information regarding the educational implications of the students' medical condition.

13. In most cases, homebound services **should not** be initiated during the month of May, which is the final month of the school year.

However, should there be a request for homebound services that occurs towards the end of April or the beginning of May, please make contact with the Homebound Service Coordinator's office so that factual circumstances can be considered.

14. For students who are currently identified as a student with a disability under Section 504, and are being recommended for placement in the homebound setting, the Section 504 team will adhere to the specified procedures and convene a 504 Team meeting to review the plan and placement in homebound services.
15. When a student is not currently identified as Section 504 eligible, the homebound services team will be tasked with making two decisions on an individual basis:
  - a. Is the student eligible to receive Section 504 services?
  - b. Is the student eligible to receive homebound services?



## Overview of Homebound Services

### General Information

- Homebound services are provided for those students who are not able to attend school for medical and/or mental health reasons that are acute, catastrophic, or chronic.
- If the student's anticipated duration of absence from school exceeds 15 consecutive school days, the student will be eligible for homebound services.
- The goal of homebound services is to facilitate the student's return to the current classroom setting as soon as medically indicated.
- Homebound services are meant to be a short-term intervention and do not in any way supplant attendance in a regular school setting for an extended period of time.
- It should not be expected for students to receive homebound services for an entire school year—unless there is a dire, medically documented need.



### Homebound Services Application Process

- When a parent requests homebound services, the *Treating Physician's Recommendation* form must be submitted.
- Once completed, the form should be returned to the school's Homebound Services Coordinator.
- The school's Homebound Services Coordinator will review the form to verify that all sections have been completed, including the anticipated return to school date. **(A specific date must be given. The doctor cannot write indefinitely on the form.)**
- If the student requesting homebound services suffers from an emotional or psychiatric disorder, the *Treatment and School Re-Entry Plan* form must also be submitted.
- Once all sections on the *Treating Physician's Recommendation* form have been verified for completion, the school's Homebound Services Coordinator will schedule a meeting with the parent and other members of the



homebound services team.

- The homebound services team will make the determination as to whether or not the student qualifies to receive homebound services.

### The school will....

- Notify the homebound teacher assigned to the school that a student is eligible to receive homebound services.
- Share necessary paperwork and information with the homebound teacher regarding the student who is scheduled to receive homebound services.
- Provide weekly assignments for the student.
- Work collaboratively with the homebound teacher.
- Make modifications and/or accommodations, as needed, with students' assignments.
- Determine the students' quarter, semester, and/or final grades based upon completed coursework.



- Consider Section 504 services for those students whose physical or mental impairment substantially limits one or more major life activities.
- Share the students' homebound progress reports with their teachers and/or the administrative staff, as needed.
- Continue to provide students' assignments until homebound services begin.

#### The homebound teacher will...

- Deliver the assignments to the students' home.
- Review the assignments with the students.
- Assist the students with any problem area.
- Administer classroom tests.
- Submit a weekly progress report to each school's Homebound Services Coordinator for each of the students with whom she is working.



#### Responsibilities of the Student's Parent/Guardian



- Ensure that all pets are confined prior to the arrival of the homebound teacher.
- Arrange for a parent (or responsible adult) to be in the home while homebound services are provided.
- Work closely with the homebound teacher to establish a mutually agreed upon schedule.
- Sign the weekly homebound progress report to confirm that the homebound services listed were provided.
- Keep all appointments with the homebound teacher as arranged. (Excessive cancellations of appointments may result in the inability of the student to earn credit or to be promoted. Cancellations may also result in the suspension of homebound services.)
- Provide updated medical documentation at the end of the approved period of time. Alert the homebound teacher and the student's school of any change in

the medical status that might result in the termination or extension of homebound services.

#### Take Note...



- Homebound services will culminate at the end of each school year.
- Homebound students should receive notice of all extracurricular activities, after school activities, and non-academic activities.
- Homebound students should have an equal opportunity to participate in any non-academic activities that are made available for students on the school campus. These include: field trips, after school activities, recreational programs, or summer programs.
- During the homebound services team meeting, discussion should be held as to whether or not a student is able to participate in these extracurricular activities.



## Eufaula City Schools

### Application and Parent Authorization for Homebound Services

Student's Name \_\_\_\_\_

Parent's Name \_\_\_\_\_

Home Address \_\_\_\_\_

Home Telephone Number \_\_\_\_\_ Cell Phone Number \_\_\_\_\_

Parent's Work Number \_\_\_\_\_ Parent's Fax Number \_\_\_\_\_

Parent's E-mail Address \_\_\_\_\_ Student's E-mail Address \_\_\_\_\_

### Explanation of Services and Parental Responsibilities

- Instructional time is limited to 3-5 hours per week in the home, or at a mutually approved alternate location, such as the public library, unless the student is receiving instruction through ACCESS courses.
- Your child's homebound teacher **may** need to contact your child's physician to obtain information pertaining to the planning and delivery of appropriate instruction.
- Your child's homebound teacher will contact appropriate personnel to ensure that your child's regular education curriculum, Section 504 Plan, and/or Individual Education Plan is/are being followed.
- It is your responsibility to provide a safe and sanitary environment conducive to learning. This includes the removal of pets from the learning area, the reduction of distractions such as visitors and television, and the provision of a smoke-free environment.
- It is your responsibility to provide supervision while the teacher is in your home. You or another mutually agreed upon adult **MUST** be present in the home during each instructional session.

Name of supervising adult and telephone number and relationship to student

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- You are responsible for your child's attendance during the scheduled lessons.
- You are responsible for supervising the completion of assigned classwork between homebound sessions.
- **Homebound instruction may be terminated if the student consistently fails to be available for instruction and/or fails to complete the required assignments.** Absences reported for these sessions will count as unexcused absences and may result in the student's loss of credit. Services may also be terminated if the student refuses to work or demonstrates aggressive or violent behavior toward the teacher of homebound students.
- Prior notification is necessary for any cancellation or re-scheduling of services. If your child or another family member is ill, has a fever or a contagious disease, instruction will be cancelled or re-scheduled. **Students not available for instruction at the scheduled time will be considered unexcused unless advanced arrangements are made with the teacher.**

I authorize my child to participate in homebound instruction provided through the Eufaula City School System.

Parent/Guardian Signature\_\_\_\_\_ Date \_\_\_\_\_



## TREATING PHYSICIAN'S RECOMMENDATION FOR HOMEBOUND/HOSPITAL SERVICES

Dear Treating Physician:

The below named student and his/her parent, legal guardian, or surrogate parent have requested that the Eufaula City School System provide the student with educational services in the homebound setting. In order for the Eufaula City School System to assess this request, the parents are required to submit medical documentation from the student's treating physician of the student's inability to attend school and subsequent recommendation for homebound services. **This recommendation is only one part of the information reviewed at the homebound services meeting and does not result in an automatic homebound placement.** While placement of students on homebound/hospital is the most restrictive placement, it may be necessary for some students who are unable to attend school for medical reasons to receive a Free Appropriate Public Education (FAPE).

Your recommendation and the information shared below will be reviewed by the homebound services team and considered when a decision is made in regards to the student's placement. A Eufaula City School System representative may contact you to discuss your recommendations and/or strategies to maintain the student in the school environment or to request additional information.

### SECTION I – STUDENT INFORMATION: (To be completed by school personnel)

|                          |                |                                 |        |
|--------------------------|----------------|---------------------------------|--------|
| Student's Name:          | Date of Birth: | Age:                            | Grade: |
| Parent/Guardian Name:    | School:        |                                 |        |
| Student's Medical Issue: |                | School's Homebound Coordinator: |        |

Is this recommendation: ☐ Initial request ☐ Recommendation for extension of homebound/hospital services

### SECTION II – RELEASE: (To be completed by parent, legal guardian, surrogate parent, or student, if eighteen or older)

|  |                           |
|--|---------------------------|
| I authorize the release of written and/or verbal medical, educational, or mental health information between school officials and the treating physician listed in Section III: |                           |
| _____<br>Signature of Parent/Legal Guardian/Surrogate Parent (or student if eighteen or older)   | _____/_____/_____<br>Date |

**NOTE:** Please clearly, fully and legibly complete Section III as indicated.

### SECTION III – MEDICAL INFORMATION: (To be completed by *the treating physician.*)

|   |
|---|
| Diagnosis of the medical condition: (Attach additional information if needed) |
| Prognosis and Treatment:  |



Is it your opinion that the medical condition prevents the student from physically attending school? If yes, please provide an explanation in support of your opinion.

Is the condition contagious? ☐ Yes ☐ No

If yes, please explain precautions that can be taken by staff who may work with the student:

If the student is placed on homebound/hospital, please identify any medical barriers the student may face with completing assignments at home, if any.

What is the amount of time you estimate the student's medical condition will limit his or her ability to attend school? If more than 15 school days, please explain in greater detail.

The homebound services program is designed to be a temporary educational program to help students who are unable to attend school for medical or psychiatric reasons.

**If the dates of non-attendance will be in excess of six weeks, please provide more information about why you feel the medical condition will lead to a removal of this length. In addition, please complete the *Treatment and School Re-Entry Plan* form. (Attach additional information, if needed.)**

Beginning date of non-attendance: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      Projected return date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

It is my recommendation that the above student cannot attend school because of illness, accident, or complications from pregnancy—even with the aid of transportation—but may profit from instruction given in the home or hospital.

Printed Name: \_\_\_\_\_ Physician's Signature: \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      Phone: \_\_\_\_\_      Fax: \_\_\_\_\_

Name of Practice/Institution: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

**SECTION IV: To be completed by ECS School Personnel:**

Date received request from parent: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Date form given to parent: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## TREATMENT AND SCHOOL RE-ENTRY PLAN



Dear Treating Physician:

The following information is required to determine eligibility for homebound/hospital services, and it must be completed by the licensed physician or licensed psychiatrist who is currently treating the student for the diagnosis presented.

1. What is the scheduled frequency of treatment/therapy for this student?

- ☐ Daily  
☐ Weekly  
☐ Monthly

2. What is the expected duration of the treatment/therapy? \_\_\_\_\_

3. Will the student take medication? Yes ☐ No ☐

4. List below the medications this student will take for diagnosis:

| Name of Medication | Effects on Student's Ability to Comprehend | Effects on Student's Ability to Complete Independent Assignments | Effects on Student's Ability to Relate to Teachers and Other Students |
|--------------------|--|--|---|
|                    |  |  |   |
|                    |  |  |   |
|                    |  |  |   |
|                    |  |  |   |
|                    |  |  |   |

5. Could this student return to school on an intermittent basis after his or her medication and condition is stabilized?

Yes ☐ No ☐

6. Can this student come into contact with other students?

Yes ☐ No ☐

7. The homebound/hospital services program is designed to be a temporary educational program to help students who are unable to attend school for medical or emotional or psychiatric reasons. Please describe your time frame and transitional plan for the student's re-entry to school. (You may attach additional pages, as needed.)

**Physician's Certification:** I certify that this student is under my care and treatment for the aforementioned medical condition. My recommendation has been based on the medical needs of the patient, keeping in mind that the least restrictive environment is preferred.

\_\_\_\_\_  
Physician's/Psychiatrist's Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Physician's/Psychiatrist's Signature

\_\_\_\_\_  
Date

In compliance with federal law, Eufaula City Schools administers all education programs, employment activities, and admissions without discrimination against any person on the basis of gender, race, color, religion, national origin, age, or disability.