

WESTON BOARD OF EDUCATION

Weston, CT

Meeting Date: November 19, 2018

Information Only

Action Requested

Agenda Item Subject: First Reading – Policy 6173, Homebound

Submitted by: Lewis Brey

Document Summary/Purpose and/or Recommended Action:

This is an update to Policy 6173 by Shipman and Goodwin, to become compliant with the State and with Weston practice.

This item is on for a first reading by the Board.

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<https://meeting.cabe.org/public/Agency.aspx?PublicAgencyID=47&AgencyTypeID=1>

Instruction

Homebound Instruction

~~Homebound or hospitalized instruction is provided when a student's condition will cause an absence of at least three weeks duration. Provided nothing in the student's condition precludes it, such instruction shall begin no later than two weeks from the first day of absence. Where medical and other evaluative data indicate that these time requirements are too great for the student, revisions may be made. The student's counselor should be contacted if homebound procedures need to be initiated.~~

I. Definitions

A. "Medically complex" shall mean a student who has a serious, ongoing illness or chronic condition for at least one year and requires prolonged or intermittent hospitalization and ongoing medical treatment or medical devices to compensate for the loss of bodily functions.

B. "Maintaining the continuity of the child's general education program" shall mean that a student will receive instruction in core academic subjects required by the Weston Board of Education for promotion or graduation, subject to the provisions of this policy.

II. General Requirements

A. The Weston Board of Education shall provide homebound or hospitalized instruction to a student under its jurisdiction:

1. For a verified medical reason, which may include mental health issues, after the student's treating physician provides a written statement directly to the Board, on a Board provided form, stating all of the following: (1) that the student's treating physician has directly consulted with school health supervisory personnel and determined that attendance at school with reasonable accommodations is not feasible, (2) that the student is unable to attend school due to a verified medical reason; (3) the student's diagnosis with supporting documentation, (4) that the student will be absent from school for at least ten consecutive school days or the student's condition is such that child may be required to be absent from school on short, repeated periods of time during the school year, and (5) the expected date the student will be able to return to school. The Board must also receive signed parental consent permitting communication with the student's treating physician before homebound instruction can commence.
2. When a student is pregnant or has given birth and cannot attend school for medical reasons. Such a student shall be provided with homebound instruction and such other instruction as will enable the student to remain in school or otherwise have access to instruction and support services. Such services may include: transportation, shortened school day, counseling, modified class schedule.

B. In the case of a student who is eligible to receive homebound or hospitalization instruction under Part A:

1. The student shall receive instruction no later than the eleventh day of absence from school, provided that the

Board has received the written notice required under Section A.1 of this Policy. At the Board's discretion, instruction may begin earlier than the eleventh day if the Board has been provided with adequate notice prior to the student's absence from school. If the student's medical condition fails to allow for receipt of instruction on or before the eleventh day, the treating physician shall determine when the student will be able to access instruction and inform the Board of the same in writing.

2. The student shall receive instruction designed to maintain the continuity of the student's general education program.

3. For regular education students who are not suspected of having a disability, the requirements of evaluation and an individualized education program shall not apply and a PPT meeting need not be convened. In the case of a student not previously receiving special education and related services, requirements of evaluation and individual education program shall apply if the PPT has reason to believe the child may currently require special education and related services.

C. The amount of homebound instruction provided to a student shall be as follows:

1. Homebound instruction is intended to be limited in duration. Homebound instruction should be discontinued as soon as the student is able to return to the school environment.

2. For children in grades kindergarten through six, homebound and hospitalized instruction shall be provided for no less than one hour per day or five hours per week.

3. For children in grades seven through twelve, homebound or hospitalized instruction shall be for no less than two hours per day or ten hours per week.

4. For any child with a disability from three to five years of age, inclusive instruction shall be for the amount of time determined appropriate by the child's PPT.

5. Where evaluative data indicates that these time requirements should be modified, instruction may be increased or decreased upon the agreement of the parent and the Board, or upon a determination made by the PPT as appropriate in accordance with the student's individualized needs.

D. The location of homebound instruction shall be as follows:

1. Instruction may be provided in the student's home (provided that appropriate supervision of the student is present), the hospital to which the student is confined or in another setting, such as the town library, taking into consideration the student's medical condition and other relevant factors. The District will be responsible for making a determination regarding the location of homebound instruction.

III. Students with Disabilities

Homebound instruction may also be provided to a student under the jurisdiction of the Weston Board of Education when a student who is eligible for services and/or supports under the Individuals with Disabilities Education Act or Section 504 of the Rehabilitation Act of 1973 and a properly convened PPT or Section 504 Team, as appropriate, places the student in a homebound setting. A PPT or Section 504 Team may also determine that instruction is appropriate when a student is confined to a hospitalized setting. A student with a disability shall be provided instruction sufficient to enable the student to continue to participate in the general education curriculum and to make progress toward meeting the goals and objectives of the student's IEP. Where necessary, the PPT may modify short-term instructional objectives in the child's IEP during a period of homebound placement or hospitalization depending upon the student's individualized needs.

IV. Medically Fragile Students

Homebound instruction shall be provided when a student has a disability and is considered to be medically complex and requires instruction to be provided in accordance with his/her Individualized Education Plan (IEP) when the student is unable to attend school due to medical reasons. The PPT shall consider and make

accommodation for the child's program to be moved (A) from public school to a home or health care facility, including but not limited to, a hospital, psychiatric facility or rehabilitation center, and (B) back to school when the child is able to return to school.

A student with a disability who is medically complex shall begin instruction no later than the third day of absence provided the student is medically able to receive instruction.

V. Disputes

A. In the event of a dispute regarding the basis upon which the student's treating physician has asserted the need for instruction, the student shall receive instruction pending review of the written statement by the school medical advisor or other health professional employed by the Board who is qualified to review and assess the information submitted, so long as the parent or guardian has consent for communication with the physician is provided as described below. The Board is not required to commence instruction until such consent is provided by the parent or guardian of the child. Said consent must allow the Board's medical advisor or other qualified health employee to consult the student's treating physician to assess the need for instruction. Consultation with the treating physician shall include a review of educational and medical records, and where appropriate, include a review of accommodations and school health services that can be provided so the student can attend school safely.

B. In the event of a continued dispute, the Board may offer at its expense a review of the student's case by a qualified independent medical practitioner. If the parent or guardian fails to make the student available for the review, the Board is no longer legally obligated to provide homebound instruction. If the student continues to be absent from school, the Board shall pursue attendance intervention in accordance with state law and Board policy.

C. In the event of the failure to resolve the dispute, both the parent or guardian of the student and the Board have the right to request a hearing, or in lieu of a hearing, to request mediation pursuant to state law and the Regulations of Connecticut State Agencies.

VI. Miscellaneous Provisions

A. Any parent or Weston Public Schools staff member who believes a child may require homebound instruction should contact the Principal of the building in which the child attends school or the Assistant Superintendent for Pupil Personnel Services for the Weston Public Schools.

B. Homebound Instruction may also be provided in conjunction with an alternative education program. For more information, see Board Policy 5114, Student Discipline.

Legal Reference: R.C.S.A Section 10-76d-15 Homebound and hospitalized instruction

(Connecticut State Board of Education Regulations)

Policy approved: March 5, 1991

Policy Revised: _____

WESTON PUBLIC SCHOOLS
Weston, Connecticut

HOMEBOUND INSTRUCTION REQUEST FORM

(This form is to be filled out by the student’s treating physician)

TO THE TREATING PHYSICIAN: Pursuant to the Connecticut State Department of Education regulations (specifically R.C.S.A. §10-76d-15), the following information must be provided to the district in order for a student to be eligible for homebound instruction. Please legibly complete this form.

If you have any questions about this form, please contact:

Michael Rizzo, Assistant Superintendent for Pupil Personnel Services, 203-221-6583

This completed form is to be provided to the student’s school’s nurse.

Student’s Name: _____ **Date of Birth:** _____

Home Address: _____

Treating Physician’s Name: _____

Address: _____ **Phone #:** _____

Email Address (optional): _____

Please provide the information below. You are encouraged to attach extra paper as needed to this form in order to answer the questions as fully and completely as possible.

- a) State the student’s current diagnosis:
- b) Please attach documentation to support this diagnosis including but not limited to a written statement, testing results, and/or medical records.
- c) Is the student unable to attend school due to a verifiable medical reason? If yes, what is the reason?
- d) Will the student be absent from school for at least 10 consecutive school days due to his or her condition?
- e) Is the child’s condition such that the child may be required to be absent for short repeated periods of time during the school year?
- f) Have you consulted with school health supervisory personnel (i.e., the school nurse or the district’s medical supervisor) and determined that the student’s attendance at school is not feasible even with reasonable accommodations? If yes, please state the name of the school health supervisory personnel with whom you have consulted, the accommodations discussed, and the basis for determining what accommodation in school could not be provided.

The expected date the student will be able to return to school is: _____
mm/dd/yyyy

Signature of the Treating Physician: _____ **Date:** _____