

**HOMEBOUND INSTRUCTION REFERRAL FORM
LAFOURCHE PARISH SCHOOLS**

Revised: 11/8/17

The Lafourche Parish School system homebound instruction is to meet the needs of students that cannot tolerate onsite full-day instruction due to medical conditions. Homebound services are provided to qualified students for generally 3-4 hours per week. Other 504 accommodations may be arranged. **Parents must complete attached consent to release information form in order that school board designated personnel speak to doctors as the need arises.** Upon completion of Section I and Section II forward forms to: Special Education Department, P.O. Box 879, Thibodaux, LA 70302 Telephone: 985-446-5631

Section I Homebound Request to be Completed by the School

Student's Name _____ Age _____ Sex _____ DOB _____

Student's School _____ Grade _____

Parent/Guardian Name _____

Student's Physical Address _____ City _____

Student's Mailing Address _____ City _____

Home Phone Number _____ Work Phone Number _____

Parent's email address _____

Were teachers notified that work is to be sent home to the student until homebound instruction services are provided? _____

What 2 or 3 major core subjects are recommended that the homebound teacher cover? _____

What subjects will be covered by the parents and student independently through the school? _____

Parent's Signature _____ Date _____

Principal's Signature _____ Date _____

**Section II Medical Certification to be Completed by a Licensed Physician
Attach backup documentation on physician's letterhead**

1)Illness, Injury, Recovery: The undersigned certifies that the above named student is unable to attend school for the following reason(s): ***please indicated the specific medical diagnosis with a brief description***

2)Pregnancy: A. Expected delivery date: _____
B. Student is experiencing the following complications in her pregnancy(or recovery)which can be detrimental to her pregnancy or the health of her baby:

3)Communicable Status: The undersigned certifies that the above named student is free from communicable or infectious disease and is able to benefit from homebound instruction with the following limitations or modifications:

4)Duration: The expected duration of the condition which prevents school attendance is: _____

Physician's Name (type or print) _____ Date _____

Physician's Signature _____ Telephone _____ Fax _____

Address _____ City, State, Zip _____

For Homebound Office Use Only

Date Received _____ Student Case Number _____

Homebound Teacher Assigned _____ Date _____

Other(s) Assigned _____

Exceptionality _____ Date of current IEP/IAP _____

Homebound Instruction Consent to Release Information Waiver of Confidentiality Form

All information that has been gathered on an individual is personal and private, and you are not required to release this information. Such information can not be released without authorized written permission except as required by law.

I understand that the information in the record of:

Student's Name: _____ DOB: _____

Address: _____

City: _____ State: _____ Zip Code: _____

is personal and private. However, I give my permission for licensed physician:

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

to release to:

Name: **Pupil Appraisal Center**

Address: **110 Bowie Road**

City: **Thibodaux** State: **LA** Zip Code: **70301**

the following specific information:

I DO NOT AUTHORIZE release of HIV test results. I understand that I have the right to refuse to disclose HIV test results.

My Medical record or the above listed information is to be released for the specific purposes of:

I understand that my permission to release this information may be cancelled at any time except when the information has already been released. My permission to release this information will expire: ____/____/____

The undersigned certified that he/she is the parent/guardian/representative of the student listed above and has the legal authorization to sign on behalf of the student, whether by court order, or by operation of law.

Student (Including Minor): _____ Date: _____ Witness: _____ Date: _____

Parent, Guardian, or Custodial Agency: _____ Date: _____ Witness: _____ Date: _____

PARENT HOMEBOUND INSTRUCTION GUIDELINES

Lafourche Parish School Board
Special Education Department

Revised 10/17

- Parents are to call Pupil Appraisal at 447-8181 **by 8:00 a.m.** to leave a message for the homebound teacher if student is unable to keep scheduled appointment.
- Student absences will be turned into the school following School Board Policy. **A doctor's written excuse will be required to document the student absence from homebound services.**
- **Habitual absences and cancellation of homebound teacher scheduled appointments** will be documented and reported to the Lafourche Parish School Board Child Welfare and Attendance Department.
- Documentation on physician's letterhead is required for a student to be considered for homebound instruction. Requests for homebound instruction written on a "prescription pad" will not be accepted.
- An adult **must always be present** when the homebound instructor is providing instruction to the student. The adult **must be within view** of the homebound teacher and student at all times.
- It is requested that during instructional time with the student, outside distractions such as talking, television, radio, etc. be held to a minimum.
- Parents **will be provided a copy and required to sign** the homebound assignment form with the due date recorded.
- Parents are responsible for making arrangements with their child's school concerning testing protocol. **(Refer to homebound fact sheet)**
- ***Homebound teachers will not be responsible for the administering of the LEAP, iLEAP, GEE, LAA 1 or LAA 2 tests. Parents are to make arrangements with the school for the administration of the tests at the site.***
- Homebound teachers **are not responsible for the delivery/return of independent assignments required by the school.** Parents are responsible for contacting the school to arrange times to pick up/return the assignments.
- Parents are responsible for the following:
 - 1) Notifying the school when it has been determined that the student will be out of school for longer than ten consecutive school days for a qualifying illness. It is recommended that the parent or guardian notify the school administrator in writing.
 - 2) Providing the name of the attending physician to authorize the release of medical information so the **school district can determine eligibility for services.**
 - 3) Providing access to the student's home and helping schedule teacher visits that do not conflict with medical treatments
 - 4) Providing an appropriate environment and necessary supervision.
 - 5) Assisting the child with instructional activities and ensuring appropriate instructional materials are available

Parent Signature: _____

Date: _____

Homebound Fact Sheet
Lafourche Parish Schools
Special Education Department

- 1) **Introduction:** Homebound instructional services are designed to support regular or special education students, who as a result of health care treatment, physical illness, accident, or the treatment thereof, are temporarily unable to attend school. Homebound services are provided in the home environment and shall be provided by a properly certified teacher. (Services should begin on the eleventh school day following an absence of more than ten (10) consecutive school days for a qualifying illness.) **Homebound instruction should be used as a last resort after all other options and/or alternative schedules (i.e. half days, work packets, etc.) have been exhausted.** Students may qualify for homebound services when enrolled in a public school with a written request for services from the attending medical physician.
- 2) **Purpose:** The purpose of homebound instruction is to provide students with instructional services during a temporary period of absence from school. Homebound services should also provide continuity between home instruction and classroom instruction, so students can re-engage successfully in their instructional program on return to school.
- 3) **Eligibility Criteria:** Public school students may be eligible for Homebound services if they are confined to the **hospital or home for a period of ten (10) consecutive school days or longer because of a medical condition.** A written request for services is required from the attending physician. The request should include information such as the exam date, medical diagnosis, medication(s) that may limit or affect learning, expected duration of confinement, and any other relevant information. The reason for referral could be physical illness, injury, or pregnancy.

After the student has been identified as needing these services, the student shall be referred for review by the School Building Level Committee (SBLC) to determine the need of Section 504 services if the student has not been identified as having a disability. The parent may contact the school guidance counselor if not contacted by the school to request a review for Section 504 services.

- 4) **Referral for Homebound Services:** Once the physician has made a referral, it is the **parent's responsibility to contact the student's school to obtain the homebound packet.** All supporting documentation should be returned to the school's contact person who will forward the completed application packet to the homebound coordinator for the local school district. Once the request is reviewed, the parent will be contacted regarding eligibility.
- 5) **Service Delivery/Teacher Qualifications:** Homebound instruction, at a minimum, shall be provided in the core academic subjects. The core academic subjects are English/Language Arts, Mathematics, Science, and Social Studies

Homebound instruction shall be provided by a properly certified teacher. However, if the student required homebound services **for less than twenty (20) school days**, instructional services may be provided through a **consultative model.**

- 6) **Hours and Duration of Instruction:** Homebound instruction, at a minimum, shall be provided for four (4) hours per week. Unless the student's health as determined by a physician requires less. Instruction will be provided during regular school hours unless otherwise scheduled by the school district. Homebound instruction is aligned with the official school calendar for the school district in which the services are being provided.
- 7) **Timelines:** The enrolling education agency is responsible for facilitating services, after having been **notified in writing, when a student will be out of school for more than ten (10) consecutive school days** for a qualifying illness. Homebound instruction should begin on the **eleventh (11th) day** of an absence related to a qualifying illness. Homebound services may be necessary to avoid an unnecessary break in education services during the period of time that a student is absent from school for a medical condition. Homebound applications may be obtained from the student's school.
- 8) **Teacher Responsibilities:** The homebound teacher is responsible for the following:
 - Contacting the parent or guardian to determine the need for services and arranging a schedule to begin instruction.
 - Scheduling a meeting with the classroom teachers to pick up assignments, coursework, outlines, answer keys, textbooks, and any other materials necessary to support the student's instructional program.
 - Developing and implementing a homebound educational plan that will facilitate academic progress and meet the instructional requirements of the student's current education program.
 - Providing progress reports and report cards as scheduled by the local school system.

- 9) **Parent Responsibilities:** Parents are responsible for the following:
- Notifying the school when it has been determined that the student will be out of school for longer than ten (10) consecutive school days for a qualifying illness. It is recommended that the parent/guardian notify the school administrator in writing.
 - Providing the name of the attending physician to authorize the release of medical information so the **school district can determine eligibility for services.**
 - Providing access to the student’s home and helping schedule teacher visits that do not conflict with medical treatments
 - Providing an appropriate environment and necessary supervision.
 - Assisting the child with instructional activities and ensuring appropriate instructional materials are available

I have received and/or been given an opportunity for an oral explanation of all homebound instruction procedures. I understand the information and shall call the Pupil Appraisal Center Manager at 447-8181 if I have questions or concerns.

Parent Signature: _____

Student Signature: _____

Homebound Teacher Signature: _____

(Original to PAC/Copy to Parent/Guardian)

Date: _____

FREQUENTLY ASKED QUESTIONS

- a) **What is the Hospital/Homebound instructional program?** Hospital/Homebound is an instructional program provided to regular or special education students who are unable to attend school because of a medical condition. Students receive instruction in the home environment to help them keep up with their coursework while absent from school for a qualifying medical illness.
- b) **Is Homebound and Homestudy the same instructional program?** No. Homebound services are provided in the home environment by teachers assigned through the local education agency. Homestudy students also referred to as “homeschool students,” receive instruction from the parents in the home environment.
- c) **Who is eligible?** Public school students certified by their attending physician as having a medical condition that requires the student to be away from school for a period longer than ten (10) consecutive school days are eligible.
- d) **Where do parents apply?** Parents may apply at the student’s school.
- e) **Who will teach my child?** Students should be taught by a properly certified teacher assigned by the local education agency, especially if services will be needed for a period longer than twenty (20) school days. Services may be provide via a consultative model (properly certified regular or special education teacher consults with the homebound teacher delivering instruction) for students needing such services for less than twenty (20) school days during a school year.
- f) **Can my child receive instruction in classes beyond English, Math, Science, and Social Studies?** Consideration shall be given to the individual need for services beyond the core academic subjects for students with disabilities.
- g) **How can I get technical assistance?** Contact the Louisiana Department of Education-Division of Educational Improvement and Assistance – toll free number at 1-877-453-2721.

SCHOOL HOMEBOUND INSTRUCTION GUIDELINES

Lafourche Parish School Board
Special Education Department

Revised July, 2008

The school is responsible for following the Homebound Instruction Guidelines to ensure consistency in providing timely service for students. Failure to follow guidelines will result in the forms being returned and service delayed.

- The *administrator* does not sign a blank homebound referral. Once the physician's signature is obtained, the administrator may sign the request. Signature does not ensure eligibility.
- Student absences will be turned into the school by the assigned homebound teacher following School Board Policy. **A doctor's written excuse will be required to document the student absence from homebound services.**
- Parents and schools will be notified in writing from this office, **ten (10) school days prior** to the termination date of homebound services.
- The administrator of the school site is responsible for assigning a "Homebound Contact." The contact is responsible for collecting all assignments, tests, etc. from sending teachers and have ready in scheduled, pre-arranged pickup site. Failure to have assignments will result in delay in services.
- School administrator/homebound school contact person **is required to sign** the homebound daily activity report (if applicable) and the homebound assignment sheet.
- Homebound teachers were instructed **not to accept lesson plans** attached to the homebound assignment sheet. Students will be tutored utilizing specific class assignments.
- Homebound teachers will pick up/drop off assignment on a **weekly basis** according to their designated schedules. Please have all necessary assignments prepared ahead of time to facilitate this procedure. **In the event there are no assignments in the folders, this will be documented on the homebound teachers daily activity report turned into this office.**
- **Homebound teachers will not be responsible for the administering of the LEAP, ILEAP, GEE, LAA 1 or LAA 2 tests. Parents are to make arrangement with the school for the administration of the tests at the site.**
- Homebound teachers **are not responsible for the delivery/return of independent assignments required by the school.** Parents are responsible for contacting the school to arrange times to pick up/return the assignments.
- Parents are responsible for making arrangements with their child's school concerning testing protocol. **(Refer to Parent Homebound Instruction Guidelines)**
- After the student has been identified as needing homebound services, the student shall be referred for review by the School Building Level Committee (SBLC) to determine the need of Section 504 services if the student has not been identified as having a disability. The parent may contact the school guidance counselor if not contacted by the school to request a review for Section 504 services.

Administrator Signature: _____

Date: _____