

Hospital Homebound Handbook

**St. Johns County School District
Exceptional Student Education**

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The St. Johns County School District (SJCSD) Hospital Homebound program is administered by the Exceptional Student Education (ESE) Program Specialist.

For current ESE Hospital Homebound Program Specialist contact information:

<http://www.stjohns.k12.fl.us/ese/programs/homebound/>

For current version of Florida Rule Title: Specially Designed Instruction for Students Who Are Homebound or Hospitalized

<https://www.flrules.org/gateway/RuleNo.asp?ID=6A-6.03020>

For Florida Hospital homebound Policy and Procedures:

www.fldoe.org/core/fileparse.php/7590/urlt/hhppm08.pdf

Hospital Homebound instructional services may be available for St. Johns County School District students who are unable to attend school because of medical reasons.

Section 1: Hospital Homebound Instructional Services, beginning on page 3, describes the provision of academic instruction to students who are unable to receive school-based instruction based on a medical certification of need by a licensed Florida physician.

Section 2: Hospital Homebound Teacher Requirements begins on page 19.

Section 1

Hospital Homebound Instructional Services

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Introduction

This section of the handbook provides information to schools and families about the temporary provision of Hospital homebound instruction. The goal of Hospital homebound services is to keep the student current with classroom instruction and facilitate the student's return to the current classroom setting.

St Johns County School District (SJCS D) seeks to provide hospital homebound instruction in a seamless manner for students who must use this service. Students are expected to attend school to the fullest extent possible, but upon receipt of a statement of need by a Florida licensed physician, hospital homebound services may be provided to students who are confined to home or a health care facility in St Johns County and are unable to attend school. The term "licensed physician" is defined in Chapters 458 and 459, F.S., and as used in this rule, means one who is qualified to assess the student's physical or psychiatric condition. Section 458, F.S., references medical doctors (MDs) and Section 459, F.S., references osteopathic physicians (DOs). An advanced registered nurse practitioner (ARNP) or a physician's assistant (PA) working for a physician licensed under the authority of Sections 458 or 459, F.S., may sign the medical statement instead of the physician; however, the name of the licensed physician must be noted on the statement in addition to the signature of the ARNP or PA.

Hospital homebound instruction is not intended to replace school services and is, by design, temporary. It is not a remediation program and is not designed to provide students with time to make up previously missed assignments. It cannot duplicate the comprehensive classroom experience. Instruction is minimal and normal progression that would be expected through classroom instruction in the school setting cannot be guaranteed. The goal of hospital homebound instruction is to keep the student as current as possible with classroom instruction. It is expected that the family and school will minimize academic work missed due to absences prior to the initiation of hospital homebound services.

Communication among the school, the family, homebound teachers, and the SJCS D Exceptional Student Education (ESE) Hospital Homebound Program Specialist is vital to the success of hospital homebound instruction. This handbook provides a description of responsibilities for everyone involved in the implementation of services. When all parties work together, students can benefit from the provision of services and return to the school environment when services are no longer needed.

Questions about hospital homebound instruction may be directed to your home-zoned school's Multi-Tiered System of Supports (MTSS) problem-solving team contact by calling the school, or the SJCS D ESE Hospital Homebound Program Specialist at 904-547-7557.

General Information

Referral for Hospital Homebound Instruction

When a student is expected to be absent from school due to a physical or psychiatric condition for at least 15 consecutive school days or due to a chronic condition for at least 15 non-consecutive school days, the Local Education Agency (LEA) should be notified immediately. If the student is eligible for ESE services, the ESE case manager should also be notified. These individuals will work with the family to determine if a referral requesting hospital homebound instructional services is appropriate; and if so, will help those involved complete the referral process.

Eligibility

A student must be enrolled in a SJCS D school in order to be considered for hospital homebound instructional services. Eligibility for hospital homebound instruction is determined based on medical evidence submitted by a licensed physician. A diagnosis with an explanation of how symptoms affect school attendance, a specific treatment plan, and a plan for returning the student to school are **required**. In no case will full homebound instruction be provided when a student can participate in a less restrictive school setting.

Physical condition: Students with physical conditions causing them to be unable to attend school may include those with serious or terminal illnesses, those undergoing treatments that compromise their immune systems, or those undergoing surgery. The student must be free of infectious or communicable disease.

Psychiatric condition: In some instances, when a student is experiencing psychiatric difficulties, hospital homebound instruction may exacerbate the student's problems and would therefore not be appropriate. Other school-based alternatives may be more appropriate.

Any St Johns County student can be recommended for Hospital Homebound services if the student meets state requirements and after the zoned-school staff have exhausted appropriate school-based resources through the MTSS problem-solving team.

Levels of Hospital Homebound Instruction

Full Instruction: A student who will miss 15 consecutive days or more of classroom instruction because of a medical condition, either physical or psychiatric, may be considered for full hospital homebound instruction.

Partial Instruction: A student who has a medical condition that significantly affects his or her stamina or ability to function in a full-day academic setting may be considered for partial hospital homebound instruction, while continuing to attend school for one or more classes. A collaborative plan must be developed, and other less restrictive alternatives must be considered first. Partial hospital homebound instruction may be part of the process of reintegrating a student who has been on full hospital homebound instruction.

Intermittent Instruction: A student who undergoes medical treatment protocols that affect the student's ability to consistently function in a school setting may be considered for intermittent hospital homebound services. For example, a student who is receiving a series of chemotherapy treatments for cancer may be able to attend school between, but not during, the treatment phases. Other students having chronic conditions, such as sickle cell anemia or severe seasonal asthma, which cause significant, yet intermittent, school absences may also qualify for hospital homebound instruction. To qualify, the doctor must anticipate that the student will miss a significant amount of school. The school ESE team, ESE Hospital Homebound Program Specialist, family, and doctor shall develop a collaborative plan to include conditions under which hospital homebound or classroom instruction can be implemented.

Courses Supported

The IEP team will determine the hospital homebound instruction that is necessary for the student. Instruction is typically provided for core academic classes: English, science, social studies, and mathematics. The appropriateness of instruction for physical education (P.E.), fine arts and practical arts, and elective courses will also be considered but is often deferred due to the student's medical condition.

Hours of Homebound Services

Face-to-face hospital homebound instruction may be delivered during school day or late afternoon and early evening only on those days when school is in session. Instruction on weekends may occasionally be considered as well. Instruction will not be given to homebound students when SJCS D students are not in attendance (i.e., teacher workdays, winter break, spring break, student holidays, summer). When scheduling sessions, homebound teachers will take into consideration parent or guardian requests, but not all requests can be accommodated.

Location of Instructional Sessions

The location of services will be the student's home; or, if the student is in a health care facility located in St Johns County, services may be provided at the health care facility. Please note that SJCS D cannot provide hospital homebound instruction to a student who is located outside of the district.

Parent/Guardian Responsibilities

If services are to be provided in the home, the parent/guardian must agree upon the following:

1. A responsible adult must always be in the home during the homebound teacher's visit.
2. A quiet, clean, well-ventilated place for the student and teacher to work without interruption must be provided. Radios and TV's should be kept off, and other children, visitors, and pets should be kept out of the room.
3. A schedule for the student to study between teacher visits must be established and cooperation with the homebound teacher in seeing that the student does the required assignments must occur.

4. All instructional appointments should be kept; however, in case of an emergency, the parent/guardian must contact the homebound teacher to cancel the appointment. Please understand that cancelled appointments will impact the student's academic progress.
5. Parent/guardian must communicate with the homebound teacher about changes in the child's health status or other concerns.
6. Parent/guardian must sign a time sheet with a record of the days and times that the homebound teacher works with the student.

Student Rights and Responsibilities

Hospital homebound instruction is considered a school sponsored activity. The Student Rights and Responsibilities apply to all students regardless of venue. These documents are provided to students and parents at the start of each new school year. Hospital homebound instruction is an extension of school and all classroom rules and regulations, as well as school district policies, apply. The student must:

- Be available for scheduled instruction
- Be dressed appropriately
- Have all books and materials needed for instruction
- Complete homework assignments
- Remain courteous, comply with teacher requests, and use appropriate language
- Dedicate instructional time for instruction only (no phone calls, visiting, radio, or television)
- Have a quiet area suitable for instructional purposes

Failure to comply with the above could result in the review of your child's eligibility for hospital homebound instruction.

Missed Sessions

Make-up sessions will only be allowed for sessions missed due to illness or family emergencies, and when cancellations are made 24 hours prior to scheduled sessions. If possible, make-up for missed sessions must be completed within the same week the session is cancelled. Requests for make-up sessions, other than those stated, will require prior approval from the ESE Hospital Homebound Program Specialist. The homebound teacher will notify the ESE Hospital Homebound Program Specialist after each cancellation when there is no prior notification by the parent or guardian. An excessive number of cancellations, i.e., three or more during a nine-week period, may result in termination of hospital homebound services. Sessions missed due to cancellation by the homebound teacher will be made up.

Exceptional Student Education (ESE)

If a referral for hospital homebound services is received for a student that already receives ESE services, the student's ESE case manager will attend the hospital homebound meeting to assist in determining eligibility, and for eligible students, take the lead in amending the individualized education plan (IEP) to meet the student's temporary instructional needs per the teams' decision. The student's IEP will delineate the number of hospital homebound instruction hours, the special education services to be delivered while the student is on hospital homebound, the goals to be pursued while the student is on hospital homebound, the service delivery option, and the placement continuum option: "Hospital

homebound.” The proposed school assignment would remain unchanged. When the student can return to school, the IEP team must amend the IEP to terminate hospital homebound services in order to return the student to the school setting.

Technology

Online courses may be used in place of, or to supplement, some homebound instruction for available classes. Online classes may be beneficial for students who are able to work well independently. For additional information, contact the student’s school counselor. The use of available technology for the student to participate in some classroom activities from home and to support instruction will be considered when appropriate.

Grading

If the student is receiving instruction via a homebound teacher, then the student remains on his/her classroom teacher’s roll, and the classroom teacher remains the teacher of record. Therefore, the classroom teacher is responsible for assigning the quarter, semester, and final grades to the student. For the classroom teacher to be informed regarding student progress, frequent, preferably weekly, communication is required between the classroom and homebound teachers, and all work completed by the student must be turned in to the classroom teacher in a timely manner. It is the responsibility of the classroom teacher to grade each work product and return the work to the homebound teacher in a timely manner to ensure the student is getting regular and relevant feedback on academic performance. Since not all classroom activities will be appropriate in a homebound setting, some assignments may be eliminated, altered, or replaced for a student in the homebound setting. While course requirements for the individual student may be modified by the classroom teacher, standards must be met for the student to earn course credit.

If the student is receiving hospital homebound instruction via online courses, then the school’s computer operator will create the student’s new online schedule and the student’s previous classroom teacher(s) will no longer serve as the teacher(s) of record.

FSA and Other Required Testing

If a hospital homebound student requires Florida Standards Assessment (FSA), Florida State Alternative Assessment (FSAA), and/or End of Course (EOC) testing, every effort will be made for these students to test at the school setting to ensure the integrity of the assessment. The school testing coordinator will make arrangements with the parent for the student to test at the school setting. The school testing coordinator will collaborate with the school LEA to provide an appropriate setting for the student to test, which ensures students’ individual medical needs are being met.

Extension or Early Termination of Hospital Homebound Services

In order to continue hospital homebound instruction beyond the specified termination date, it will be the responsibility of the parent or guardian to submit an updated referral for hospital homebound form five school days prior to the termination of services.

If the student will not require hospital homebound services for the initially specified period of time, it is the responsibility of the parent or guardian to provide a Re-Admittance to School form completed by a licensed Florida physician so that the student may return to school. This information should be provided to the school and forwarded to the ESE Hospital Homebound Program Specialist at least five days prior to the student's anticipated return to school. For ESE students, it will be necessary for a parent or guardian to give proper notification to the school, ESE Case Manager and ESE Hospital Homebound Program Specialist for an IEP team to reconvene, review the student's educational needs, and amend the IEP.

End-of-Year Termination of Hospital Homebound Services

Hospital homebound instruction is aligned with the school year calendar and will terminate on the last day of school. Hospital homebound instruction for special education students will follow the schedule delineated by the student's IEP.

School Reintegration Process

School and hospital homebound staff members work collaboratively with parents or guardians and medical and/or community resources to coordinate the appropriate reintegration of the student to school-based instruction, including any reasonable accommodations that will enhance the student's ability to appropriately access the curriculum.

Reporting Student Information

Information regarding a hospital homebound student is confidential and is subject to the same restrictions as all other such information.

Responsibilities

The successful provision of hospital homebound instructional services depends on the cooperation and collaboration of several individuals. The responsibilities of these individuals are outlined below.

ESE Hospital Homebound Program Specialist Responsibilities

1. Document receipt of referral for hospital homebound instruction and notify school LEA to schedule eligibility.
2. Communicate with school personnel if additional information is required in order to consider request.
3. Collaborate with LEA to ensure parent/guardian, student and other appropriate team members (i.e., social worker, mental health worker) are invited to eligibility.
4. Create Meeting Notice, conduct eligibility staffing and complete eligibility documentation.
5. Conduct IEP meeting for general education students to delineate services after Hospital homebound eligibility has been determined.
Please note: ESE Case Managers will conduct IEP meetings for ESE students
6. Communicate status of eligibility outcome to all concerned parties (i.e., school staff members, social worker) when hospital homebound instruction has been determined.
7. Assign teacher appropriate to the student's educational needs to provide homebound instruction.
8. Communicate to all parties when teacher is assigned.
9. Coordinate overall provision of services in a timely manner.
10. With the LEA, encourage communication between classroom teachers and homebound teachers, including supporting instruction and facilitating the exchange of assignments and materials between the homebound teacher and the classroom teacher, as needed.
11. With the LEA, support school staff members regarding instructional concerns and understanding their responsibility with the hospital homebound process for the hospital homebound student to receive appropriate instruction.
12. Consider the possibility of available technology to encourage the student to participate in certain classroom activities from home or to support instruction.
13. Provide oversight of instruction provided.
14. Participate in the hospital homebound student's school reintegration process.

School Hospital Homebound Coordinator – LEA Responsibilities

1. Assist parent or guardian when inquiring about hospital homebound services.
2. If the case involves a medical diagnosis/implications related to truancy, report(s) of bullying, behavior/academic concerns, implementation of accommodations/services, service provider concerns, concerns with other students, or issues able to be addressed at the school level, refer the student to the appropriate problem-solving team to address the issues through administrative action or academic/behavioral evidence-based interventions.
 - a. MTSS school-based problem-solving team for general education students.
 - b. 504 team for students who are already 504 eligible.
 - c. IEP team for students who are already ESE eligible.After review of the case and supporting documentation, the problem-solving team can continue school-based interventions, if appropriate, or assist the parent in completing sections I and II of the Hospital Homebound Referral Consent (page 1 of 3).

- a. The partially completed Hospital Homebound Referral, with signed release of information consent, will be sent by the Hospital Homebound office to the treating physician's office.
 - b. Upon return of Hospital Homebound Referral (pages 1 through 3) to the Hospital Homebound office, the LEA will schedule hospital homebound eligibility meeting, ensuring all appropriate team members are invited.
3. If a case involves a medical diagnosis/implication that cannot be intervened upon in the educational setting, assist the parent in completing section I and II of the Hospital Homebound Referral (page 1 of 3).
 - a. The partially completed Hospital Homebound Referral, with signed release of information consent, will be sent by the Hospital Homebound office to the treating physician's office.
 - b. Upon return of Hospital Homebound Referral (pages 1 through 3) to the Hospital Homebound office, the LEA will schedule hospital homebound eligibility meeting, ensuring all appropriate team members are invited.
4. When student is already ESE eligible, coordinate referral process with the ESE Case Manager.
5. Ensure that student receiving hospital homebound instruction is maintained on the class roll if receiving direct 1:1 homebound instruction.
6. Encourage school staff members to be actively engaged with student receiving hospital homebound services and their parents (i.e., PTO meetings, classroom/school newsletters).
7. Encourage communication between classroom teachers and homebound teachers, including making appointments, supporting instruction, facilitating the exchange of assignments and materials between the teachers as needed, and coordinating FSA or other state testing.
8. Support school staff members regarding instructional concerns and understanding their responsibility with the hospital homebound process for the hospital homebound student to receive appropriate instruction.
9. Determine a designated location for all hospital homebound materials and/or assignments to be located for pick-up by the homebound teacher.
10. Collaborate with the school testing coordinator on any high stakes testing coordination that must occur for the hospital homebound student.
11. Immediately contact the ESE Hospital Homebound Program Specialist if concerns arise.
12. Participate in the hospital homebound student's school reintegration process.

ESE Case Manager Responsibilities (if student is already ESE eligible)

1. Coordinate referral process with the LEA.
2. Conduct IEP meeting to delineate services after hospital homebound eligibility has been determined.
3. Provide the homebound teacher with the student's IEP.
4. Encourage communication between classroom teachers and homebound teachers, including making appointments, supporting instruction, facilitating the exchange of assignments and materials between the teachers as needed, and assist in coordinating FSA, EOC, and FSAA testing.
5. Ensure testing coordinator is including student on any district-wide and state-wide tests.
6. Encourage school staff members to be actively engaged with the student/parents receiving homebound services (i.e., PTO meetings, school newsletters).
7. Conduct IEP meeting to return the student to school-based services when hospital homebound services are no longer required.

8. Immediately contact the ESE Hospital Homebound Program Specialist and LEA if concerns arise.
9. Participate in the hospital homebound student's school reintegration process, if applicable.

School Social Worker Responsibilities

1. If a parent inquires or requests information about hospital homebound services, refer parent to:
 - a. MTSS school-based problem-solving team for general education students.
 - b. 504 team for students who are already 504 eligible.
 - c. IEP team for students who are already ESE eligible.
2. Participate in problem-solving team meeting. If the case involves a medical diagnosis/implications related to truancy, report(s) of bullying, behavior/academic concerns, implementation of accommodations/services, service provider concerns, concerns with other students, or issues able to be addressed at the school level, refer the student to the appropriate problem-solving team to address the issues through administrative action or academic/behavioral evidence-based interventions.
 - a. MTSS school-based problem-solving team for general education students.
 - b. 504 team for students who are already 504 eligible.
 - c. IEP team for students who are already ESE eligible.
3. Monitor dates for when the student's hospital homebound services expire to ensure that families get assistance with the transition back into the school or with extending the services.
4. Participate in the hospital homebound student's school reintegration process.

School Counselor Responsibilities

1. If a parent inquires or requests information about hospital homebound services, refer parent to:
 - a. MTSS school-based problem-solving team for general education students.
 - b. 504 team for students who are already 504 eligible.
 - c. IEP team for students who are already ESE eligible.
2. Participate in problem-solving team meeting. If the case involves a medical diagnosis/implications related to truancy, report(s) of bullying, behavior/academic concerns, implementation of accommodations/services, service provider concerns, concerns with other students, or issues able to be addressed at the school level, refer the student to the appropriate problem-solving team to address the issues through administrative action or academic/behavioral evidence-based interventions.
 - d. MTSS school-based problem-solving team for general education students.
 - e. 504 team for students who are already 504 eligible.
 - f. IEP team for students who are already ESE eligible.
3. If student is found eligible hospital homebound, coordinate providing assignments from the classroom teachers to the parent or guardian until homebound teacher is assigned.
4. Facilitate the exchange of assignments and materials between the homebound teacher and the classroom teachers as needed.
5. Work with the student and his or her family to ensure that academic and/or elective course requirements are being met while the student is receiving hospital homebound instruction.
6. Encourage engagement between school staff members and the student.

7. Immediately contact the ESE Hospital Homebound Program Specialist and the LEA if concerns arise.
8. Participate in the hospital homebound student's school reintegration process.

Parent, Guardian, and Student Responsibilities

1. Contact school staff members when hospital homebound services may be required.
 - a. MTSS school-based problem-solving team for general education students.
 - b. 504 team for students who are already 504 eligible.
 - c. IEP team for students who are already ESE eligible.
2. Coordinate with School Counselor to obtain assignments from the classroom teachers until the hospital homebound services are determined.
3. Sign a release of information allowing the medical professional to share information or clarify information provided for determination of hospital homebound instruction.
4. Participate in the eligibility and IEP team meetings to delineate hospital homebound services.
5. Provide written consent prior to hospital homebound instruction beginning.
6. Plan the schedule of instruction with the homebound teacher. When possible, parent or guardian requests will be considered, but not all requests can be accommodated.
7. Provide an appropriate learning environment free of interruptions and with proper lighting and necessary equipment, such as a desk or table, pencils, paper, books, and other materials as needed.
8. Ensure that all pets are confined prior to the arrival of the homebound teacher.
9. Make sure the student is ready for instruction at the time designated by the homebound teacher.
10. Supervise daily homework.
11. Make every effort to see that the student completes school assignments.
12. Ensure that a responsible adult (18 years of age or older) is in the home during the entire period of instruction. If an adult is not in the home at time of instruction, the teacher will cancel the session. Even though a student may be 18 years old, it is required, and necessary, that there be a third person (adult) in the home during the entire teaching time.
13. Review and sign **completed** *Teacher Contact Log* and *Student Contact Log* (i.e., with date, time, and number of hours of instruction given) after each instructional session. The worksheets must be reviewed for accuracy and signed by the parent, guardian, or designated adult. **Students may not sign the worksheet.** Parents should not sign for sessions in advance.
14. Keep all appointments with the homebound teacher.
15. Notify the homebound teacher at least 24 hours prior to the scheduled session if the student is unavailable because of a contagious disease or an emergency.
16. Request make-up instruction for sessions missed because of illness or family emergency. If possible, make-up for a missed session must be completed within the same week the session is canceled. Requests for make-up sessions, other than those stated, will require approval from the ESE Hospital Homebound Program Specialist. Continued cancellations could result in termination of homebound services.
17. Notify the ESE Hospital Homebound Program Specialist of an excessive number of missed appointments or of excessive tardiness by the homebound teacher.
18. Immediately contact the ESE Hospital Homebound Program Specialist if concerns arise about instruction.
19. Advise the LEA or the ESE Hospital Homebound Program Specialist of any change in the student's status that would require a change or termination of hospital homebound services.

20. If the student will not require hospital homebound services for the initially specified period, provide the LEA with a Re-Admittance to School form completed by a licensed Florida physician at least five days prior to the student's anticipated return to school.
21. Participate in the hospital homebound student's school reintegration process.

Classroom Teacher Responsibilities (if student is receiving direct 1:1 homebound instruction)

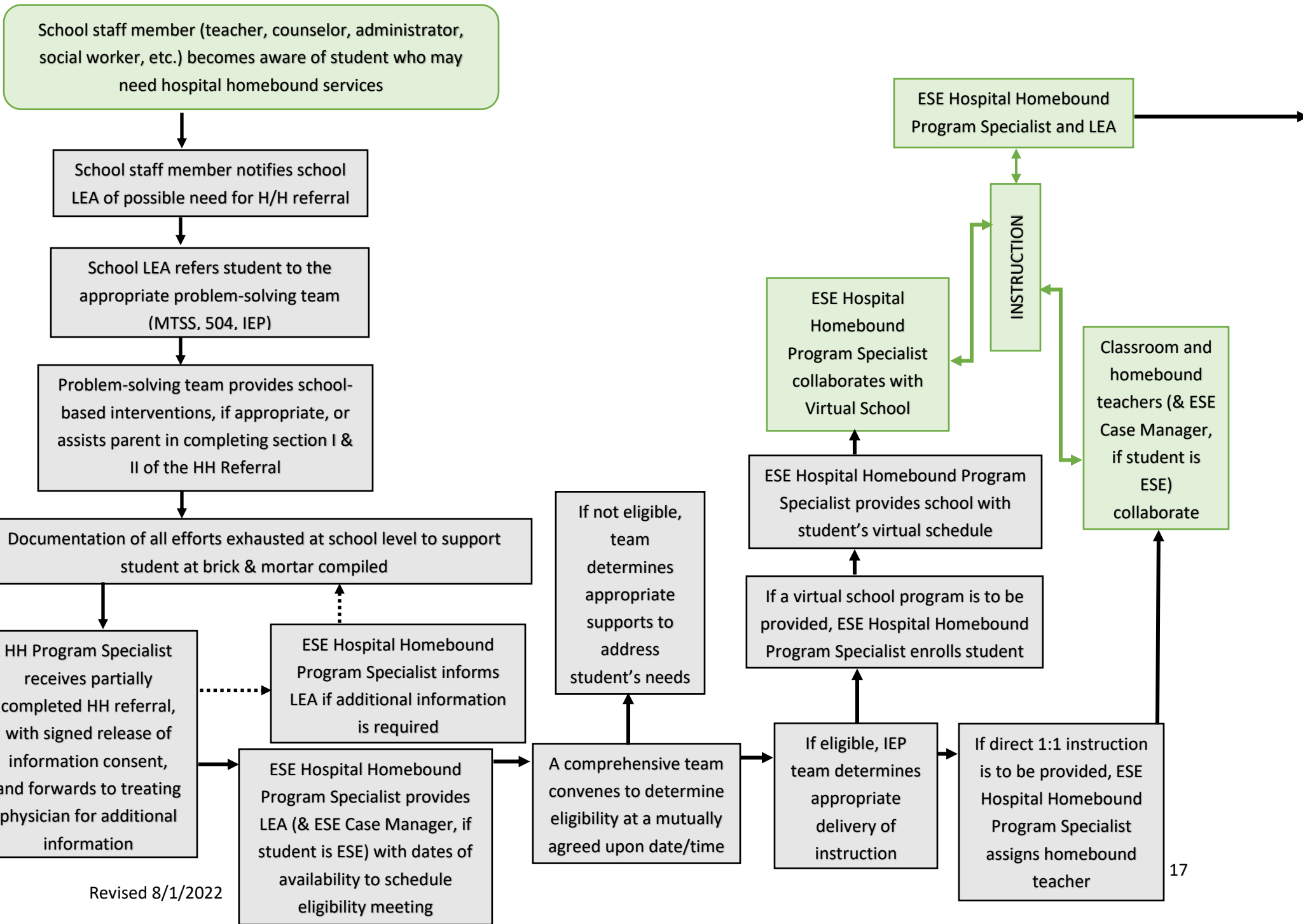
1. Make available, within 48 hours of being notified of the need for hospital homebound services, information and instructional materials, which may include a syllabus, textbooks, materials, on-line information, assignments, handouts, readings, quizzes, and tests.
2. Work collaboratively with the homebound teacher to exchange information, strategies, assessment tools, and instructional materials relative to the student's instructional needs and to facilitate use of technology for instruction (if applicable).
3. In collaboration with the homebound teacher, make modifications and accommodations regarding assignments and activities as necessary for the homebound setting without compromising educational integrity. Since not all classroom activities will be appropriate in a hospital homebound setting, some assignments may be eliminated, altered, or replaced for a student in the homebound setting.
4. Communicate with the homebound teacher, preferably weekly, to remain informed about the student's academic progress, effort, and circumstances and to keep the homebound teacher informed about classroom activities.
5. Receive all completed work from the homebound teacher within one week of its completion, unless other arrangements are made.
6. Grade work within an appropriate timeframe to ensure that the student is provided with timely feedback on academic progress.
7. Determine the student's quarter, semester, and final grades based on completed work, even if the student has not attended school during the school year. Note: hospital homebound students are marked as attending even if they do not come to the school. If the student received both classroom and homebound instruction during a given grading period, the quarterly, semester, and final grades assigned by the classroom teacher reflect grades earned in both settings.
8. If the student is expected to take a final examination, coordinate with the homebound teacher and provide a copy of the exam and all preparatory materials.
9. Ensure testing coordinator is including student on any district-wide and state-wide tests.
10. Encourage student engagement in appropriate and medically approved school activities.
11. Provide instructional materials and/or assignments for P.E., fine arts, and elective courses to the designated school staff member, when appropriate.
12. Immediately contact the ESE Hospital Homebound Program Specialist and the LEA if concerns arise.
13. Participate in the hospital homebound student's school reintegration process

Homebound Teacher Responsibilities

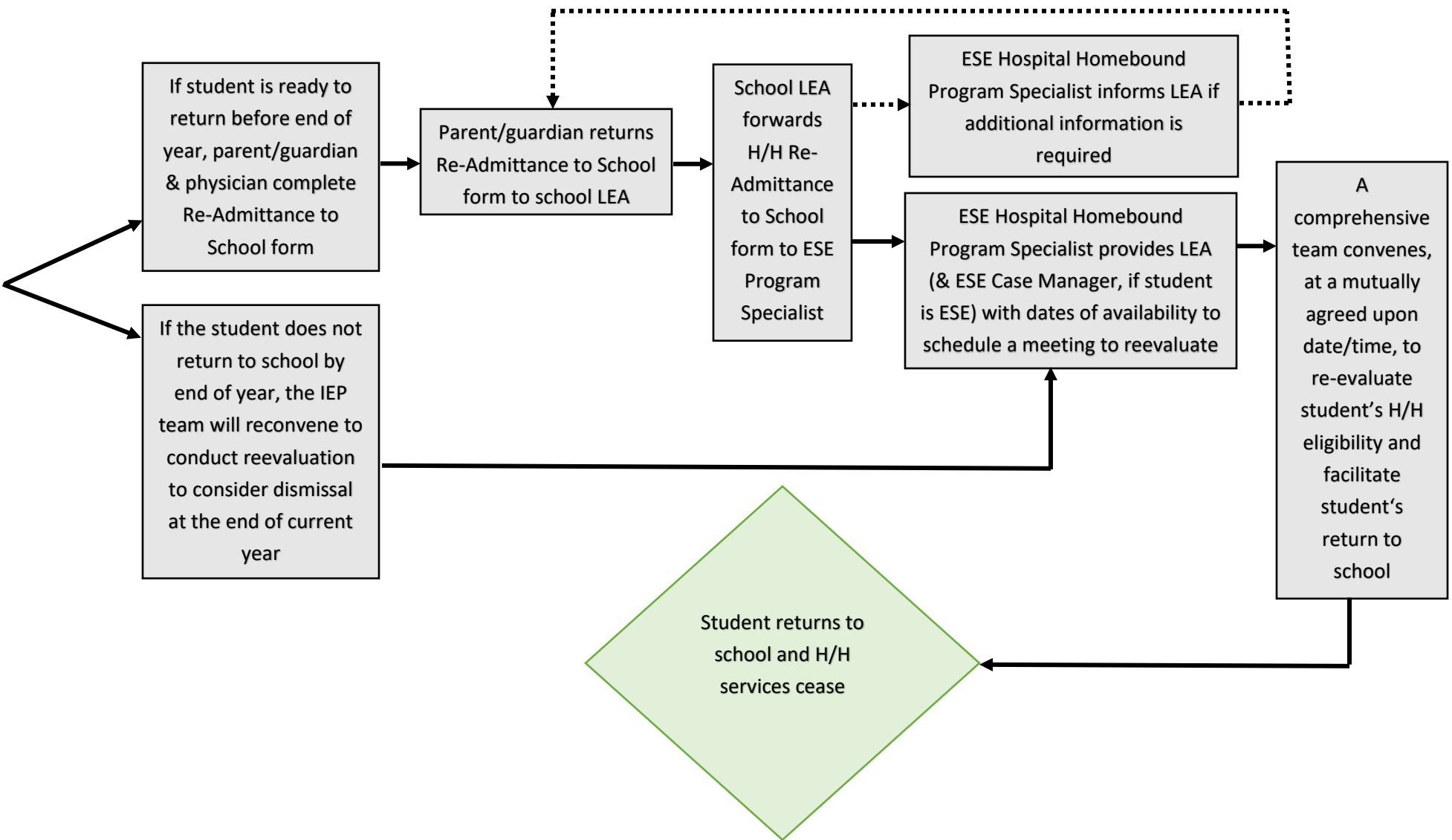
1. Within 24 hours of accepting a student assignment, contact the parent or guardian and schedule hospital homebound instruction. When scheduling sessions, take into consideration, when possible, the requests of the parent or guardian.
2. If contact is not made with the parent or guardian within 48 hours of assignment, document all attempts and contact the ESE Hospital Homebound Program Specialist.

3. Within 48 hours of accepting the student assignment, initiate a conference with classroom teacher(s) for the purpose of exchanging information and materials related to the curriculum.
4. Notify the ESE Hospital Homebound Program Specialist of time and location of scheduled instructional sessions and immediately notify the ESE Hospital Homebound Program Specialist of any changes in scheduled sessions.
5. Provide instruction to student and administer tests, exams, or other assessments with the goal of keeping the student as current as possible with classroom instruction.
6. After each instructional session, assign work to be completed by the student before the next instructional session.
7. In collaboration with the classroom teacher, make modifications and accommodations regarding assignments and activities as necessary for the hospital homebound setting without compromising educational integrity.
8. Communicate with the classroom teacher, preferably weekly, but at least every other week to remain informed about classroom activities and to keep the classroom teacher informed about the student's academic progress, effort, and circumstances.
9. Return all work to the classroom teacher within one week of its completion, unless other arrangements are made, keeping a record of all returned work.
10. Determine jointly with the classroom teacher how and by whom individual work products will be graded.
11. Provide data regarding progress toward meeting IEP goals and objectives, if applicable.
12. If the student is expected to take a final examination, coordinate with the classroom teacher to obtain a copy of the exam and all preparatory materials.
13. Obtain the signature of the parent or guardian documenting instructional time and subjects taught on the *Teacher Contact Log* and the *Student Contact Log* at the conclusion of each session.
14. Provide the allotted instruction for each student, as documented in the IEP. Homebound teachers may not shorten approved instructional time, even at the request of the parent or guardian, and then request payment for the full time allocated. The time indicated on the time sheet must be the same as that provided unless it is a "cancellation/no-show" situation.
15. If student is unavailable or the required adult is not in the home, wait 15 minutes before leaving, mark the session as a "cancellation/no show," and contact the ESE Hospital Homebound Program Specialist.
16. Refrain from providing private tutoring to students for whom you are currently providing homebound services.
17. Immediately contact the ESE Hospital Homebound Program Specialist if concerns arise.
18. Participate in the hospital homebound student's school reintegration process as appropriate.
19. Participate in staff development activities associated with hospital homebound instruction.
20. Provide documentation regarding instructional activities as requested by the ESE district office.

Hospital Homebound Instruction



Hospital Homebound Instruction Continued



Section 2

Hospital Homebound Teacher Requirements

Professional Qualifications

An individual employed as a homebound teacher must hold a current Florida teacher's license.

Homebound teachers should have a broad background of professional training and experience to be able to adapt instruction to each student's needs and to work with a variety of classroom teachers in a modified team-teaching situation. Homebound teachers need to be able to work independently in home or community settings, should be able to adjust to a variety of situations, and be knowledgeable of cultural uniqueness.

Requirements established by the Department of Human Resources must be met, and teachers that will serve as the teacher of record must be prepared to provide information regarding subjects in which they meet highly qualified teacher status.

All homebound teachers must be able to access e-mail as a means of communication with classroom teachers and the ESE Program Specialist.

Compensation

Travel Reimbursement

Part-time homebound teachers are not eligible for travel reimbursement for travel, as this is considered a part-time job.

Planning

Each homebound teacher is allowed one-half ($\frac{1}{2}$) hour per every 4 hours of direct instruction provided to a student (i.e., coordinating lesson plans/instruction, securing books and other materials).

Instructional Sessions

Teachers will be compensated for no more than the number of hours per week established when the student is determined eligible unless additional time is authorized by the ESE Program Specialist. Instructional sessions on unauthorized days will not be approved for payment. Make-up sessions during the same week as a missed session are authorized, but the ESE Hospital Homebound Program Specialist must be informed of the change.

Examinations

Homebound teachers will be compensated for any additional time required to administer FSA or other state tests with approval of the ESE Hospital Homebound Program Specialist.

Reporting Time and Attendance

1. *Timesheets, Teacher Contact Log and Student Contact Log* should be faxed to the ESE district office at 904-547-7544 in the middle and at the end of every month as outlined on the payroll calendar. Once timesheets are approved, timecards should be entered into SunGard.
2. If you are providing instruction to more than one hospital homebound student, please record instructional time for each student on a separate worksheet. Do not combine students' names on the same worksheet.

3. Compensation is provided only for services delivered. Homebound teachers may not shorten approved instructional time and request payment for the full time allocated.
4. If the homebound teacher reports to the instructional site at the appointed scheduled time and the student and/or designated adult are not available, the homebound teacher is only allowed to report one hour. "No-show" should be indicated on the signature line.
5. The homebound teacher will complete a *Student Contact Log* and a *Teacher Contact Log* (with signature, dates, times, number of hours of instruction provided, subjects taught, indication if work was assigned to be completed before next instruction session, and indication if there has been communication with classroom teacher since last session) and obtain the signature of the designated adult after each instructional session. The worksheet must **only** be signed by the parent, guardian, or designated adult. Homebound teachers must not request signatures on blank forms or prior to the provision of instruction.
6. Homebound teachers may be reimbursed for planning time related to their work with homebound students at a rate of one-half ($\frac{1}{2}$) hour per every 4 hours of direct instruction provided.