

PIKE COUNTY SCHOOL DISTRICT PUPIL SERVICES

HOSPITAL/HOMEBOUND INSTRUCTION GUIDELINES



SCHOOL COORDINATORS

Eve Booker – Primary School
Patti Hester – Elementary School
Carrie Dawson – Middle School
Lindsay Busby – Ninth Grade Academy
Mandy Osbolt – High School

SCHOOL COUNSELORS

Betsy Burford – Primary School
Patti Hester – Elementary School
Marci Daniel & Tim Zellner – Middle School
Tante Colquitt – Ninth Grade Academy
Holly Cantrell & Liz Fordham – High School

DEPARTMENT: SPECIAL EDUCATION & HH/B COORDINATORS

Dr. Jenney Allison – Director of Teaching / Learning & 504 Students
Jessica McEntyre – Director of Special Education

DEPARTMENT: PUPIL SERVICES & HH/B COORDINATOR

Gregory T. Greene – Director of Pupil Services

1. GENERAL INFORMATION

A. Definition

Hospital/Homebound refers to those instructional services made available to students who are able to participate in educational instruction but who are medically unable to attend school for a minimum of ten consecutive days or intermittent periods of time throughout the school year.

B. Eligibility

To be enrolled in the Hospital/Homebound Instruction Program, a student must:

1. Be enrolled in the Pike County Public School;
2. Intend to return to school when released to do so;
3. receive certification from a Georgia Board Certified licensed physician that the student will be medically unable to attend school for a minimum of ten (10) consecutive school days;
4. Not be absent due to a communicable disease, expulsion, suspension, or uncomplicated cases of pregnancy;
5. Not be employed in any capacity or regularly participating in extracurricular activities

C. Application for Service:

1. The parent should contact the program coordinator/counselors to discuss Hospital/Homebound services and to obtain the Application for Hospital / Homebound Instructions. After the school completes Section I, the parent / guardian(s) should take the application to the physician for completion of Section 2. Once section 2 is completed and returned to the school, the program coordinator/counselor will schedule a meeting with the parent / guardian(s) and HHB Committee which includes a school counselor, school coordinator, principal / designee and pupil services director to determine eligibility and services. The meeting must be held within ten (10) school days upon receiving section 2.
2. The school counselor, school coordinator and the student's assigned instructor will work with the family to determine appropriate course load. SEMS tracker will be used by school counselor/coordinator for follow-up conferences and documentation purposes. Signed medical release information and the student's treatment plan must be completed by the parent and the referring physician for all illnesses that exceed six (6) weeks in duration. School re-entry plan and immediate initiation of the Tier 2 or 3 / Student Support Team process will be developed as well.

D. Attendance Credit:

The student is counted present for the entire week when s/he is seen on an individual basis by the hospital/homebound teacher three hours per week. A student is counted absent for the week when the instructor's visit with the student is cancelled. The FTE of a Hospital/Homebound student is treated the same as any other student on roll. The homebound teacher also keeps a class roll and a daily record of home visits.

E. Scheduling:

Upon receipt of the approved application, the instructor will promptly notify the parents and the school of the time when the work can begin. The time for appointments will be arranged by the instructor in cooperation with the family. A responsible adult (21 year of age or older) is required in the home during the instruction. If the family is unwilling or unable to work within the constraints of Hospital/Homebound scheduling, the opportunity for services may be rescinded.

F. Assignments:

When a student is approved for Hospital/Homebound instruction, the classroom teachers are required to send assignments and test in a timely manner to the Hospital/Homebound instructor. All state mandated tests such as End of Course Test (EOCT), or Georgia High School Graduation Test, (GHS GT), must be administered unless the student is taking an alternate assessment. The decision to administer final exams is made by the local school with input from an administrator, classroom teacher, and counselor.

G. Academic Credit:

Full credit will be given for work completed under the Hospital/Homebound program.

H. Sources of Textbooks:

The Hospital/Homebound student will use textbooks issued by the classroom teacher. It is the family's responsibility to obtain all the student's books from the school to be available for hospital/homebound instruction

I. Report Cards:

The Hospital/Homebound student's report card is issued at the end of each Grading period. It is the responsibility of the classroom teacher to prepare and issue the report card. Grades are based on the performance of the student as reflected in her/his work and tests. The report card may be mailed to the student's parents.

J. Termination of Services:

A student is released from the Hospital/Homebound Program when the following occurs:

1. As of the projected return date listed on the Application for Hospital/Homebound Instruction in Section 2, Medical Referral;
2. When the student is employed in any capacity or regularly participating in extracurricular activities;
3. As of the last day of school of the regular school year;
4. Sign release from his/her doctor or able to return to school for any portion of the school day other than to participate in state-mandated standardized testing.
5. Under any investigation that is proven that the student is working, participating in any extra-curricular activities, present on campus at any time that is not authorized by the principal or any other false pretense that is discovered by school officials

K. Contacts

List of Schools: Addresses and Phone Numbers

Pike Primary School7218 US Hwy. 19 P.O. Box 329 Zebulon, Ga. 30295 / Phone # 770-567-8443

Pike Elementary School ...607 Pirate Drive P.O. Box 407 Zebulon, Ga. 30295 / Phone # 770-567-4444

Pike Middle School406 Hughley Road P.O. Box Zebulon, Ga. 30295 / Phone # 770-567-3353

Pike High School331 Pirate Drive P.O. Box 819 Zebulon, Ga. 30295 / Phone # 770-567-8770

Ninth Grade Academy7360 Hwy 19S Zebulon, Ga. 30295 / Phone # 770-567-2960

Jessica McEntyreSpecial Education Coordinator P.O. Box 386 Zebulon, Ga. 30295 / Phone # 770-567-8489

Gregory T. GreeneDirector of Pupil Services P.O. Box 386 Zebulon, Ga. 30295 / Phone # 770-567-8489

For Georgia Board of Education Rules Governing Hospital/Homebound Instruction

Regular Education [Go to www.doe.k12.ga.us](http://www.doe.k12.ga.us), 160-4-2-, 31 HOSPITAL/HOMEBOUND INSTRUCTION, Code IDDC

For Georgia Board of Education Rule Governing Hospital/Homebound Instruction Special Education
Go to www.doe.k12.ga.us, 160-4-7-.07 LEAST RESTRICTIVE ENVIROMENT Code IDDF (10)



Pike County Public Schools

L. Application:

ATTENTION: GREGORY T. GREENE,
Pupil Services Director: Ph. 770-567-8489
P. O. BOX 386 / 16 Jackson St. Fax: 770-567-8349 ZEBULON, GEORGIA 30295

REFERRAL FOR HOSPITAL/HOMEBOUND INSTRUCTION CODE: IDDC

I. PUPIL INFORMATION (to be completed by parent/guardian. All boxes must be checked)

Student ID # _____ School: _____ // Grade: _____

Student's Name _____ DOB: _____

Parent or Guardian: _____

Address: _____

Street: _____, City, _____

Home Phone #: _____ Cell Phone #: _____

Homeroom Teacher: _____

Last date of Pupil's attendance: _____ Regular Education _____ Special Education _____

Date Forms Given to Parents: _____

Principal or Designee – Signature _____

II. PARENTAL PERMISSION

- I request Hospital/Homebound Instruction for the above named student.
- I have read and understand the eligibility criteria for H/H Instruction.
- I authorize the physician listed below to release medical information to H/H Personnel.
- I understand that an adult, 18 years or older, must be in the home when the H/H teacher is present.

Date: _____ //Parent's Signature: _____

III. MEDICAL CERTIFICATION

(To be completed by a current medical attending physician and returned).

Diagnosis of physical illness/injury: _____.

If Pregnancy – Delivery Date: _____ Complication of Pregnancy _____ (yes) _____ (no)

How long is it estimated (in weeks) that the student may require homebound Instruction? _____

Approximate date student may be ready for instruction: _____.

Date to return to school _____.

If the diagnosis is pregnancy the student **will not** be approved for services until after delivery, unless there are complications. Students, who will be absent due to psychiatric/emotional disorder, as defined by the latest edition of the *Diagnostic and Statistical Manual (DSM)*, may be eligible for Hospital-Homebound instruction. They will be referred to the Student Support Team for assistance. Students diagnosed with a contagious disease will not be served while contagious. Please check the following appropriate boxes.

I have read and understand the eligibility criteria for Hospital/Homebound Instruction.

I certify this student is unable to attend school for minimum 10 consecutive days due to illness/injury and/or chronic health conditions receiving intermittent HHB services that anticipate at least three consecutive school days for each occurrence.

Physician's Name: _____

Address: _____

Physician's Signature: _____

Phone # _____ Date: _____

DATE _____

IV. DIRECTOR'S EVALUATION: Approved _____ // Not Approved _____

(DIRECTOR'S SIGNATURE or PROGRAM FOR EXCEPTIONAL CHILDREN