Home/hospital instruction for students

Questions and Answers

Home/hospital services are provided to a student when a physician licensed to practice medicine in all of its branches, a licensed physician assistant (PA), or a licensed Advanced Practice Registered Nurse (APRN) determines that the student will, or is anticipated to be, absent from school for a minimum of 10 days during the school year due to a medical condition. The goal of home/hospital instruction (HHI) is to afford the student experiences equivalent to those afforded to other students at the same grade level. It is designed to enable the student to return to the classroom without having fallen behind. Thus, the substance or content of the instruction, generally academic, is to enable the student to remain on pace with the other students in his or her class.

Rule 1.520 is being reviewed for revisions to bring it into compliance with both Public Act 100-443 and PA 100-465. Please refer to 105 ILCS 5/14-13.01 (from Ch. 122, par. 14-13.01) of the School Code for the legislative support to the following Q&A document. Please refer to https://www.isbe.net/Documents/226ark.pdf regarding all references to 23 Ill. Adm. Special Education Administrative Rule Part 226.

1. When must a district provide home/hospital services?

Section 14-13.01(a) of the School Code indicates that services are to be provided when a homebound or hospitalized student is unable to attend school due to a condition certified by a medical statement that indicates that the student will or is anticipated, due to the student’s medical condition, to be out of school for a minimum of 10 days of school with at least two days at a time multiple times during the school year for two weeks or more or on an “ongoing intermittent basis,” which are expected to total 10 days or more. An “ongoing intermittent basis” means that the student’s medical condition is of such a nature or severity that it is anticipated that the student will be absent from school due to the medical condition for periods of at least two days at a time multiple times during the school year totaling at least 10 days or more of absences. There shall be no requirement that a student be absent from school a minimum number of days before the child qualifies for home or hospital instruction. In other words, two days of absence at a time may be “anticipated,” but those days to not need to occur before services begin.

Home or hospital instruction may commence upon receipt of a written physician's statement, but instruction shall commence no later than five school days after the school district receives the medical statement. The medical statement must be signed by a physician licensed to practice medicine in all of its branches (as determined by the Medical Practice Act of 1987) or by a PA or by an APRN.

2. How often must the parent provide the written medical statement of need for home- or hospital-based instruction?

A written medical statement of need for HHI must be provided at minimum for the current school year, unless fewer than 10 days exist in the current school year. A district may require the statement to be

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submitted more often than for the current school year, such as quarterly or semi-annually (semester), if such instruction is normally under a quarterly or semester schedule.

3. **May a district consult with the physician, a PA, or an APRN who wrote the medical statement of need for HHI for more information about the condition or duration of HHI?**

A school must obtain a written permission from the parent or guardian of the student before providing any information to the student’s medical staff. Once that written release is on file, the school is encouraged to discuss the student’s academic and medical progress with both the medical staff and the parent/guardian (and student, if appropriate) to determine need for services to be provided at home or hospital or other location outside the campus. Services must be provided while such discussions are taking place and may not be withheld due to lack of written parental/guardian release or permission.

4. **What if a student who needs home- or hospital-based instruction has an Individualized Education Program (IEP) or federal Section 504 plan?**

Special education and related services required by the student’s IEP or services and accommodations required by the student’s federal Section 504 plan, if written, must be implemented as part of the student’s home or hospital instruction, unless the IEP team or federal Section 504 plan team determines that modifications are necessary during the home or hospital instruction due to the student’s condition. However, related services provided in school, such as nursing care or health services or nutritional services, are not required to be implemented at home by school staff.

5. **What if a hospital commences providing hospital-based instruction before the district receives a medical statement of need?**

Educational services provided by a hospital prior to receipt (or date of) the medical statement of need are the responsibility of the hospital.

6. **Is there a form on which the physician may certify the student for home/hospital educational services?**

There is no required form, but ISBE provides districts an optional form that is accessible at [https://www.isbe.net/Documents/Medical-certification-home-hospital-instruction.pdf?search=home%20hospital](https://www.isbe.net/Documents/Medical-certification-home-hospital-instruction.pdf?search=home%20hospital) that may be used. Any different form that is provided by the district or hospital must include all the required elements meeting Section 14.-13.01.

7. **What amount of instruction, at a minimum, must be provided to a home/hospital student? What additional issues must be considered for a student with disabilities?**

Section 1.520 of 23 Illinois Administrative Code requires that “the amount of instructional or related service time provided through HHI shall be determined in relation to the child’s education needs and physical and mental health needs.” It is recommended that a student without an IEP receive at least one hour of instruction each school day or five hours in each school week unless the student’s medical statement indicates that the child should not receive that many hours in a week or day.
The IEP team for a student with disabilities shall consider the need for home or hospital services per Part 226.300 of the Special Education Administrative Rule. Such consideration shall be based upon a written statement from a physician licensed to practice medicine in all its branches, PA, or APRN that specifies:

i. The child’s medical condition, including diagnosis;

ii. The impact on the child’s ability to participate in education (the child’s physical and mental level of tolerance for receiving educational services); and

iii. The anticipated duration or nature of the child’s absence from school.

If an IEP team determines that home or hospital services are medically necessary, the team shall develop or revise the child’s IEP accordingly.

The amount of instructional or related service time provided through the home or hospital program shall be determined in relation to the child's educational needs and physical and mental health needs.

The amount of instructional time shall not be less than five hours per week unless the physician, PA, or APRN has certified in writing that the child should not receive as many as five hours of instruction in a school week.

Services required by the IEP shall be implemented as soon as possible after the district receives the physician’s statement.

8. May the instruction be provided via telecommunications?

A child whose home or hospital instruction is being provided via telephone or other technological device shall receive not less than two hours per week of direct instructional services. Instruction can also be provided by FaceTime, Skype, Go-To Meeting, or other types of electronic media communication either audio or video. If utilized, this method must be accompanied by no less than two hours per week or direct instructions service, unless the medical statement directs that the student is in medically required isolation. All district electronic data policies should be followed when instruction is provided via telecommunications.

9. May the instructional time be provided outside regular school hours or days?

Instructional time shall be scheduled during time convenient for both parties but only on days when school is regularly in session, unless otherwise agreed to by all parties.

10. Must the instructors meet the same credentials as classroom teachers?

Home or hospital instructors shall meet the requirements of 23 Ill. Adm. Code 1.610 (Personnel Required to be Qualified).
11. What is the obligation of a district when home/hospital services are requested at the end of the school year?

Section 14-13.01 indicates that a child must have a medical condition that will likely cause an absence for 10 or more days of school. There is no requirement to initiate home/hospital services if the referral is made with fewer than 10 days of school left in the school year.

12. What should a district do if a hospital provides instruction without the district’s knowledge and then bills the district for these services?

The district must receive a medical statement stating that the student will be absent for two or more consecutive weeks of school (10 days) or ongoing intermittent absences. The student’s resident district must be afforded the first opportunity to direct the student’s instruction before it is responsible for the costs. If no medical statement is provided, the district is under no obligation to pay. Further, the district may choose to provide its own instructors rather than use hospital staff.

13. What can a district do if the student is now homebound and needs a lab course to complete requirements for graduation?

The school district’s obligation is to provide instruction based on the student’s needs. Fulfilling graduation requirements is a student need. The curriculum can be modified to allow for an independent study or to allow another course to be substituted so that the student can meet requirements for graduation.

14. When a student is pregnant, what responsibility does the district have for providing homebound instruction?

There are two components to the district’s responsibility according to Section 10-22.6a of the School Code. Home instruction must be provided before the birth of the child if a doctor’s certificate states that the student is medically unable to attend regular classroom instruction. Second, the district is to ensure the provision of educational services to the mother for up to three months following the birth of a child or a miscarriage; the medical statement must state the duration of the post-partum period required for these services, which may be reduced or extended for up to three months by medical statement.

15. If the student who is eligible for home/hospital services is a special education student, must we reconvene the IEP team for a change of placement?

The IEP team shall develop or revise the child’s IEP accordingly if it determines that home or hospital services are medically necessary, based on a written statement from a qualified medical provider. (See Part 226.300(c).) However, services can be rendered before the IEP team meets and makes the revisions.

16. Can the district provide homebound services during the summer if a student has been receiving homebound instruction and, at the end of the school term, needs to continue instruction in order to be able to complete the assigned grade and move into the next year with his class?

It is recommended that homebound instruction be provided, particularly if summer school is being provided in the student’s home school building or in the resident district and if the student meets the

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district criteria for summer school attendance. Per Part 226.300(e), instruction shall occur only on the days when school is regularly in session unless otherwise agreed to by the parties. Additionally, a medical certificate should be on file to verify the need for homebound tutoring (i.e. that the child cannot attend school for medical reasons).

17. Must a district provide home/hospital instruction for a student who is enrolled in a private/parochial school and who now requires such services?

A private/parochial student with disabilities who has an approved Individual Services Plan (ISP) may be provided services by the district using federal Individuals with Disabilities Education Act nonpublic proportionate share funds. However, per 34 CFR 300.137, no private/parochial student with an ISP has an individual right to receive some or all of the special education and related services that the child would receive if enrolled in the district. Further, there is no general state aid or home/hospital reimbursement to a district for any services provided for a student not enrolled in the district.

18. Must a district provide homebound instruction if a student is suspended or expelled from school, such as for a rule infraction or for not meeting requirements for student health examinations or vaccinations?

There is no requirement for home instruction if there is no medical statement requiring the student’s absence from school.

19. Does a teacher have to be licensed in special education to provide home/hospital services if the student has an IEP?

Yes. Teachers who provide home/hospital instruction to students with disabilities and a written IEP must possess a teaching license with an endorsement that is sufficient to completely fulfill the student’s IEP.

20. Can a district employ a person with a substitute teaching license as a home/hospital instructor?

Yes. Per 23 Illinois Administrative Code 1.520, f), home or hospital instructors shall meet the requirements of 23 Ill. Adm. Code 1.610 (Personnel Required to be Qualified), except that the use of an individual who holds only a substitute teaching license is permissible if the individual provides instruction under the supervision of an individual who holds a Professional Educator License (PEL) endorsed in the teaching field and is the teacher in whose class the student is enrolled.

21. Does an educator with a School Support Personnel or an Administrative endorsement qualify the employee to instruct home/hospital students?

A PEL with a School Support Personnel endorsement or an Administrative endorsement does not qualify an employee to teach home/hospital students. The instructor must have a valid teaching license.

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22. **What should a district do if a student has a medical condition that allows partial attendance? In other words, can the student attend school for a limited part of the day and also receive homebound instruction?**

Both instruction at school and in the home may be provided, assuming a medical statement is on file stating that this is necessary.

23. **What should a district do if a student has a medical condition and is only able to attend school intermittently?**

Section 14-13.01(a) addresses home/hospital situations for students who are absent on an “ongoing intermittent basis.” An ongoing intermittent basis means that the student’s medical condition is of such a nature or severity that it is anticipated that the student will be absent from school due to the medical condition for periods of at least two days at a time one or more times during the school year totaling at least 10 days or more of absences. There shall be no requirement that a student be absent from school a minimum number of days before the child qualifies for home or hospital instruction.

Home or hospital instruction may commence upon receipt of a written physician's statement, but instruction shall commence not later than five school days after the school district receives the physician's statement. Special education and related services required by the student’s IEP or services and accommodations required by the student’s federal Section 504 plan must be implemented as part of the student’s home or hospital instruction, unless the IEP team or federal Section 504 plan team determines that modifications are necessary during the home or hospital instruction due to the student’s condition.

24. **May a medical statement that extends beyond the current school year be accepted?**

No, a medical statement serves for the current school year only. A medical statement indicates that the student must be absent 10 or more days this school year.

25. **Is the district required to provide homebound instruction if the student is excluded from school during an outbreak of a disease based on the fact that the student lacks the required immunization for that disease?**

The services are to be provided if the reason for the inability of the student to attend school during an outbreak of a vaccine-preventable disease is related to a medical condition and the medical statement is written and submitted. The services may be, but are not required to be, provided if the reason is related to a non-medical condition (i.e., religious objection).

If you have further questions, contact: schoolnurse@isbe.net