

Instruction

Home and Hospital Instruction 1

A student who is absent from school, or whose physician anticipates that the student will be absent from school, because of a medical condition may be eligible for instruction in the student's home or hospital. ² Eligibility shall be determined by State law and the Illinois State Board of Education rule governing the continuum of placement options for home/hospital services. ³ Appropriate educational services from qualified staff will begin no later than 5 school days after receiving a physician's written statement. ⁴ Instructional or related services for a student receiving special education services will be determined by the student's individualized education program.

A student who is unable to attend school because of pregnancy will be provided home instruction, correspondence courses, or other courses of instruction (1) before the birth of the child when the student's physician indicates, in writing, that she is medically unable to attend regular classroom instruction, and (2) for up to 3 months after the child's birth or a miscarriage. ⁵

Periodic conferences will be held between appropriate school personnel, parent(s)/guardian(s), and hospital staff to coordinate course work and facilitate a student's return to school.

LEGAL REF.: 105 ILCS 5/10-22.6a, 5/14-13.01, 5/18-4.5, and 5/18-8.05.
23 Ill.Admin.Code §§1.610 and 226.300.

CROSS REF.: 6:120 (Education of Children with Disabilities), 7:10 (Equal Educational Opportunity), 7:280 (Communicable and Chronic Infectious Disease)

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¹ State or federal law controls this policy's content. The following State laws and ISBE rules govern homebound and hospital instruction: 105 ILCS 5/14-13.01, amended by P.A. 96-257 (reimbursement for home and hospital instruction along with factors to qualify for it); 105 ILCS 5/18-4.5 (governs reimbursement for home and hospital instruction); 105 ILCS 5/18-8.05 (an instructional session of one clock hour may be counted as ½ day of attendance, however, a student must receive 4 or more instructional clock hours to count as a full day of attendance); 23 Ill.Admin.Code §226.300 (home/hospital service for a special education student); ISBE General State Aid Claim form.

² 105 ILCS 5/14-13.01, amended by P.A. 97-123, redefines the standards for determining when a student is eligible to receive home or hospital instruction. A student now qualifies when a physician *anticipates* a student's absence due to a medical condition. The Act also defined "ongoing intermittent basis" to mean a medical condition of such a nature and severity that it is anticipated that the student will be absent from school due to the medical condition for periods of at least 2 days at a time multiple times during the school year totaling at least 10 days or more of absences.

³ 105 ILCS 5/14-13.01(a), amended by P.A. 96-257 and 23 Ill.Admin.Code §226.300 require, at a minimum, all students to provide a written statement from a physician licensed to practice medicine in all of its branches stating the existence of a medical condition, the impact on the student's ability to participate in education, and the anticipated duration or nature of the child's absence from school. A student with health needs may be protected by the Individuals with Disabilities Education Act (20 U.S.C. §1401(3)) or Section 504 of the Rehabilitation Act (29 U.S.C. §794(a)).

⁴ There is no longer a requirement that a student be absent from school for a minimum number of days before he or she qualifies for home or hospital instruction (105 ILCS 5/14-13.01(a), amended by P.A. 97-123). The Act now allows schools to begin home or hospital instruction upon receipt of a physician's written statement but requires it to begin no later than 5 school days after receipt of the physician's written statement.

²³ Ill.Admin.Code §226.300(g) also requires home or hospital instructors to meet the requirements listed in 23 Ill.Admin.Code §1.610, i.e., proper certification as required by 105 ILCS 5/21-1 and 23 Ill.Admin.Code §25.464.

⁵ 105 ILCS 5/10-22.6a. Number (2) does not require a physician's written statement.