

Bernards Township Public Schools
Guidance Department
268 South Finley Avenue
Basking Ridge, New Jersey 07920

HOME INSTRUCTION

CODIFICATION REFERENCE NUMBER: 2412
CODIFICATION REFERENCE NUMBER: 2481

RESPONSIBILITY:

The school nurse and a designated supervisor will be responsible for implementing the home instruction procedures in Bernards Township.

PROCEDURE:

See attached procedures.

Jillian Shadis
Supervisor of Guidance
Designated Supervisor of Home Instruction
jshadis@bernardsboe.com

Revised:
May 3, 2012

HOME INSTRUCTION

Parents, guardians, or the adult-aged student should initiate arrangements for home instruction with the school nurse and guidance counselor in the building in which instruction is normally received. This action should start as soon as the need for home instruction is apparent. Do not wait until absence from school has actually occurred if it can be anticipated.

Pupils are entitled to home instruction in cases when confinement at home for a period of 10 consecutive school days or 15 cumulative school days has been determined by the school physician, due to a suspension OR when it is the result of an IEP review according to NJAC 6A.

In the Bernards Township Public Schools, all home instruction programs are coordinated by the Supervisor of Home Instruction with the assistance of the school nurse, guidance counselors, and child study team staff. The Supervisor of Home Instruction is a supervisor designated by the Superintendent of Schools.

STEP-BY-STEP PROCEDURES FOR IMPLEMENTING HOME INSTRUCTION:

1. Parents, guardians, or adult students should contact the school nurse in the building in which instruction is normally received and discuss the need with the school nurse.
2. The school nurse will provide the parents, guardians, or adult student with an "Application for Home Instruction." The form should be completed by the parent or guardian and the family physician and returned to the school nurse.
3. The school nurse will forward the completed application to the school physician for his/her review and approval.
4. The school nurse will notify the Supervisor of Home Instruction when a student's confinement is expected to exceed 30 calendar days. The Supervisor of Home Instruction will schedule the student to be discussed with the I&RS committee to develop an Individualized Program Plan (IPP) based on information from parents, home instructors, and appropriate school personnel. The IPP will include a recommended educational program, goals for instruction, reasonable accommodations, and supports for transitioning back to the general education setting.
5. In the event that a non-disabled student is confined by a physician to home or a hospital for a period of more than 60 days, the school physician shall refer the student to the child study team. The school nurse shall notify the school physician, Supervisor of Home Instruction, and Director of Special Services of the referral.
6. When home instruction is being provided in the student's home, the Supervisor of Home Instruction will arrange for the services of Board of Education approved, certified instructors. Whenever possible, he or she will use the same teachers who work with the child in the regular classroom. If this is not possible, the Supervisor of Home Instruction will arrange for instructors by contacting properly certified persons who have been approved for substitute status in the school district.

7. Upon acceptance of the home instruction assignment, the home instructor will:
 - a. Contact the parent of the student.
 - b. Make arrangements for an instructional schedule, which shall not be less than five hours per week except when recommended otherwise by the child study team or physician. The instruction will take place over three or more separate days.
 - c. Pick up appropriate forms from the school nurse or on the Bernards Township Website: www.bernardsboe.com.
 - d. Establish and maintain contact with the pupil's teacher to determine the course of home instruction.

8. The instructor will also be responsible for informing the parent of his/her availability and direct means of contact in case of unforeseen cancellation of scheduled time.
 - a. If an appointment is canceled by the parent, it is the responsibility of the parent to notify the instructor at least 24 hours in advance, if possible, and make arrangements for rescheduling a mutually convenient date.
 - b. In the event that a student is not available for a scheduled appointment when the home instructor reaches the home, the home instructor should wait a minimum of fifteen (15) minutes. At this time, the home instructor should make a note of the situation on the time sheet and will be entitled to half of the payment for the scheduled visit.

9. Prior to instruction beginning, the Supervisor of Home Instruction will furnish the instructor with the student's:
 - a. HOME INSTRUCTION PLAN (HIP)
 - b. RECORD OF SERVICES RENDERED form
 - c. GRADE REPORTING FOR HOME INSTRUCTION form, and
 - d. A Bernards Township PAYROLL VOUCHER.

The home instructor should return the following completed forms to the Supervisor of Home Instruction

- a. RECORD OF SERVICES RENDERED form(s) --(cannot exceed HIP)
 - b. GRADE REPORTING FOR HOME INSTRUCTION form(s), and
 - c. The Bernards Township PAYROLL VOUCHER
10. The program will be terminated when the pupil is able to return to school. Occasionally, a special program or modified schedule will be arranged to facilitate the transition back to the regular program.

 11. In the event that home instruction at a facility concludes at the end of the school year, the Supervisor of Home Instruction will arrange a re-entry meeting with parents or guardians, guidance, and relevant school personnel to determine the appropriate academic placement for the upcoming year.

 12. A pupil on Home Instruction due to temporary illness may not return to school without approval of his/her physician and must report to the school nurse with a "Physician's Approval for Return from Home Instruction" form.

 13. When the pupil is readmitted to school, the school nurse will notify the Supervisor of Home Instruction and the respective school's attendance clerk.

STUDENTS WITH IEPs:

Home Instruction due to temporary illness or injury for students with disabilities according to NJAC: 6A: 14-4.9

To request home instruction due to temporary illness or injury, the parent shall submit a written determination from a physician documenting the need for confinement at the student's residence for at least a two week period of time. Home instruction for temporary illness or injury shall be provided according to the following:

1. The district board of education shall immediately forward the written request to the school physician, who shall verify the determination of the need for home instruction without delay;
2. Instructional services shall begin as soon as possible but no later than seven calendar days after the school physician's verification;
3. A record of the student's home instruction shall be maintained;
4. The teacher providing instruction shall be appropriately certified as teacher of the handicapped or for the subject or level in which the instruction is given;
5. Instruction shall be provided for no fewer than five hours per week. A certified teacher shall accomplish the five hours of instruction per week in no fewer than three visits on at least three separate days;
6. Instruction shall be provided at the student's place of confinement. If the student is confined to a hospital, convalescent home or other medical institution, the following criteria shall also apply:
 - a. Instruction shall be provided by a district board of education, educational services commission, state-operated facility, jointure commission, or approved clinic or agency at the student's place of confinement.
 - b. Instruction shall be provided through one to one instruction according to number 5 above, or through instruction to small groups as follows:
 - i. When instruction is provided in a small group, the number of hours of instruction per week for the group shall be determined by multiplying the number of students in the group by five hours. A certified teacher shall provide the hours of instruction in no fewer than three visits at three separate days.
 - ii. Instruction may be provided by direct communication to a classroom program by distance learning devices. If provided, such instruction shall be provided in addition to the one to one according to number 5 above, or small group instruction according to 6-b-i above;
7. Students shall receive a program that meets the requirements of the district board of education for promotion and graduation;
8. For students with disabilities, the district shall provide a program that is consistent with the student's IEP to the extent appropriate. When the provision of home instruction will exceed 30 consecutive school days in a school year, the IEP team shall convene a meeting to review and if appropriate, revise a student's IEP.

PARENTS CAN HELP BY:

- Making sure an adult is present for each scheduled instructional time. There must be a parent or responsible adult in the home for the whole time the instructor is there.
- Making sure the physical environment is such that the maximum benefit will be gained from the instruction.
- Notifying instructors in advance if the child will be unable to receive instruction on a particular day (be sure you have each instructor's phone number for that purpose).
- Notifying the school nurse promptly of the child's ability to return to the regular school program.

PROCEDURES FOR MAINTAINING RECORDS/PAPERWORK

- School Nurse forwards the START OF HOME INSTRUCTION FORM to the Guidance Office, along with a copy of the HOME INSTRUCTION PLAN (HIP) that was devised for the student on home instruction.
- Individual home instructors forward their RECORD OF SERVICES RENDERED form, along with their PAYROLL VOUCHER and GRADE REPORTING form to the Guidance Office. All three of these forms need to be received before the instructor can be reimbursed for services rendered.
- The designated supervisor will check the RECORD OF SERVICES RENDERED to make sure that the hours provided in a specific subject area are in accordance with the hours agreed upon and approved on the HOME INSTRUCTION PLAN (HIP). ***Hours should not exceed the time specified in a specific subject on the HIP.***
- The designated supervisor will check the math, and check the rate per hour for reimbursement (since this changes each year) and make corrections if necessary.
- The designated supervisor will sign the PAYROLL VOUCHER and RECORD OF SERVICES RENDERED.
- After they have been signed, the secretary will make file copies of GRADE REPORTING form, RECORD OF SERVICES RENDERED and PAYROLL VOUCHER for the Home Instruction Binder in the Guidance Office.
- The secretary will submit PAYROLL VOUCHER & RECORD OF SERVICES RENDERED to Payroll for reimbursement (Payroll Vouchers should be copied on green paper).
- The secretary will forward the GRADE REPORTING form to the appropriate Guidance Counselor (name is on the student's HIP) and Teacher.
- The school nurse will forward a TERMINATION OF HOME INSTRUCTION FORM to the Curriculum Office when home instruction for a student is complete. The secretary will paperclip this form to the top of all paperwork for that specific student and places it in the binder in the curriculum office. Clip all paperwork for that student together.
- The secretary will file all paperwork alphabetically in the binder according to the last name of the student.

**APPLICATION FOR HOME
INSTRUCTION**

SECTION A: TO BE COMPLETED BY PARENT

Student's Last Name	
Student's First Name	
Student's D.O.B.	
School of Attendance	
Last Date of Attendance	
Grade Level	
Home Address	
Name of Parent(s)/Guardian(s)	

I authorize the school nurse(s) and school physician to contact the treating physician(s) for the release of medical information that would impact on a student's academic program.

Parent/Guardian Signature

Date

SECTION B: TO BE COMPLETED BY SCHOOL NURSE

Date of Return to School	
Nurse's Signature	

START OF HOME INSTRUCTION

Name of School

Student's Last Name _____

Student's First Name _____

Student's D.O.B _____

Current Instruction Mainstream
 Special Education
 Other

Place where instruction will be given _____

Home instruction counseling meeting required? Yes
 No

Last day counted as absent from school (date) _____

Start of Home Instruction (date) _____

School Nurse

Date

School nurse: Please send one copy to your school's attendance secretary, and one copy to Jillian Shadis, Supervisor of Home Instruction (RHS Guidance).

INDIVIDUALIZED PROGRAM PLAN (IPP)

Student's Last Name		School	
Student's First Name		Grade Level	
Student's D.O.B.		Meeting Date	

I. Describe the nature of the concern	Duration of home instruction due to exceed 30 days.
II. Identify recommended educational program(s)	
III. Describe goals for home instruction	
IV. Describe the reasonable accommodations that are necessary	
V. Describe supports for transitioning to the general education setting	

Start of Home Instruction Date	
Initial Plan Date	
60-Day Review Due	

PARTICIPANTS (NAME & TITLE):

Parent Acknowledgement of the Development of the Student's IPP:

I agree with the Individualized Program Plan for my child. I understand that if home instruction extends beyond 60 days, there is a legal requirement to make a referral to the child study team to determine eligibility for special education and/or related services.

 Parent Signature of Acknowledgement

 Date

 Principal's Signature of Approval

 Date

TERMINATION OF HOME INSTRUCTION

Name of School

Student's Last Name _____

Student's First Name _____

Grade Level _____

Re-entry meeting required? Yes
 No

**Last Date on Home Instruction
Register (mm-dd-yy)** _____

School Nurse

Date

School nurse: Please send one copy to your school's attendance secretary, and one copy to Jillian Shadis, Supervisor of Home Instruction (RHS Guidance).

READMITTANCE TO SCHOOL

Date: _____

Once a student has been moved to the Home Instruction register, he/she must receive medical clearance from the attending physician before he/she may be reactivated on the regular school register and admitted to homeroom or class. The student must report to the school nurse with this completed form, signed by the physician immediately upon return. Parent(s)/Guardian(s), please complete Section A, and ask your child's physician to complete Section B.

SECTION A: TO BE COMPLETED BY PARENT/GUARDIAN

Student's Last Name	
Student's First Name	
School of Attendance	
Grade Level	
Teacher (if elementary school)	

SECTION B: TO BE COMPLETED BY ATTENDING PHYSICIAN

The above-named student is no longer restricted from attending school because of medical reasons.

Attending Physician's Signature

Date

If modifications or restrictions are necessary in order to return to school, please submit specific details on letterhead and attach to this form.

GRADE REPORTING FOR HOME INSTRUCTION

Student's Last Name	
Student's First Name	
Counselor	
Subject/Level	
Classroom Teacher	
Home Instructor	
Home Instructor's Phone	
Beginning Date of Home Instruction	
Termination Date of Home Instruction	

Recommended Grade (circle one): **A** **B** **C** **D** **E**

- A = Excellent
- B = Good
- C = Satisfactory
- D = Poor
- E = Failure

Assignments that were averaged in HI grade (please list and attach graded work if applicable):

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Signature of Home Instructor

Date

This form must be completed for each subject and returned to Jillian Shadis before payment for home instruction can be approved.
Jillian Shadis, Supervisor of Home Instruction
Ridge High School Guidance Department
268 South Finley Avenue
Basking Ridge, NJ 07920

Bernards Township Public Schools
 Guidance Department
 268 South Finley Avenue
 Basking Ridge, New Jersey 07920

PAYROLL VOUCHER

Name	
Address	
Social Security Number	

Approval Principal/Supervisor	Payroll Dept. Received
Date Paid	Account # 11-150-100-101-00-10

Service Performed	Salary	Hourly Rate	Total Hours	Total Amount
Home Instruction (Subject Area: _____)		\$75.32		

Date

Employee's Signature