

What is Medical Homebound Instruction?

CCSD Policy IHBF

South Carolina's mandates regarding medical homebound instruction appear in the State Board of Education (SBE) Regulation 43-241. Regulation 43-241 states that students who cannot attend public school because of illness, accident or pregnancy, even with the aid of transportation, are eligible for medical homebound or hospitalized instruction. A physician, nurse practitioner, and physician assistant are medical providers who may sign the homebound form recommending medical homebound instruction. The district superintendent or his/her designee may approve or deny any student requesting homebound instruction. A school or district representative may contact the parent and doctor to request additional information and discuss strategies to maintain the student in the school environment.

The parent has the right to appeal the homebound decision made by the superintendent or designee and school team. The appeal must be made in writing to the Department of Alternative Programs and Services (DAP) within 10 days of receipt of the homebound denial letter from the school.

Homebound service is appropriate for short term intervention and should not be viewed as a long term placement for regular school attendance. Homebound instruction is designed so the student does not fall significantly behind during the period of confinement. The district's attendance (and truancy) policy does apply to homebound students. If a student misses 3 consecutive or 5 cumulative homebound sessions, the school is expected to follow the CCSD truancy protocol. Students receiving homebound instruction should return to school-based instruction as soon as possible.

Homebound services are approved for 45 instructional days at a time. If it is necessary for homebound instruction to continue beyond the approved period of time, a new Medical Homebound Instruction Form will be required. The school or district representative may ask for additional information regarding the student's individual health/treatment plan, progress towards treatment goals, and specific plans to transition the student back to the school setting in order to justify the need for extended services.