



OFFICE OF SUPERINTENDENT OF PUBLIC INSTRUCTION
 School Apportionment and Financial Services
 Old Capitol Building
 PO Box 47200
 OLYMPIA WA 98504-7200
 360-725-6300 TTY 360-664-3631

ESD	CO	DIST
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REPORT OF FINAL HOME AND HOSPITAL (HH) SERVICES

(See reverse side for instructions)

SERVING DISTRICT, CHARTER SCHOOL, OR TRIBAL COMPACT SCHOOL NAME	COUNTY NAME	SERVING DISTRICT OR SCHOOL NO.	ESD NO.	YEAR 2017-18
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HOME AND HOSPITAL (HH) SERVICES	Total Actual Weeks of HH ¹ (rounded to the nearest tenth)
A. HH provide at home: For students enrolled in the district, charter school, or tribal compact school who are receiving HH services at sites with a single student (such as the student's home).	
B. HH provide at a hospital: For students enrolled in the district, charter school, or tribal compact school who are receiving HH services at sites such as in a children's ward of a hospital or a residential treatment center.	

¹ Actual weeks of HH services is calculated as:

- The number of **eligible school days** divided by five, rounded to the nearest tenth.
- The number of **eligible school days** is the number of school days between the start date the student was both eligible and received services and the end date the student was both eligible and received services.

See the reverse side for complete calculation steps.

CERTIFICATION

I hereby certify that all students reflected in this report are properly enrolled students, that conversions to weeks of attendance are in accordance with instructions, and that student records and other pertinent documents are readily available for audit.

Acknowledged:

ORIGINAL SIGNATURE OF DISTRICT, CHARTER SCHOOL, TRIBAL COMPACT SCHOOL SUPERINTENDENT OR AUTHORIZED OFFICIAL

DATE

INSTRUCTIONS FOR COMPLETING FORM SPI E-525

GENERAL INSTRUCTIONS

Who Should Complete Form E-525?

Districts, charter schools, and tribal compact schools claiming funding for home and hospital (HH) services provided to students per WAC 392-172A-02100 should complete Form E-525. Only serving entities report attendance.

Due Date and Routing of Form E-525

Form E-525 is not part of the electronic enrollment reporting system and should be submitted at the end of the school year on paper.

Districts, charter schools, and tribal compact schools complete one Form E-525 and send the signed form to OSPI, School Apportionment and Financial Services, by **July 6, 2018**. Form E-525 may be faxed to 360-664-3683 or mailed to:

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Purpose

Reported E-525 attendance will determine final HH allocations included in the July 2018 apportionment calculation. HH allocations appear on Line B of Report 1191SE.

Prior to OSPI receiving Form E-525, HH allocation is paid based on a projected HH amount submitted in the annual F-203. HH services including eligible summer HH received after the published August deadline will be included in scheduled end-of-year adjustments to apportionment.

HH allocations are made in two categories. The distinguishing factor is related to economies of scale for mileage.

Each reported week of HH services on Line A generates \$60, and each reported week of attendance reported on Line B generates \$55 in HH program allocations.

Limitations on Enrollment Counts

- Refer to Secondary Education and Student Support's annual home hospital bulletin for program procedures.
- Students reported for HH services can be claimed for two additional monthly count days after their last day of attendance at school on Form P-223 for Basic Education funding, provided that the student returns to school prior to the end of the school year.
- Students reported for HH services but qualifying for Special Education funding can be claimed on the monthly Form P-223H provided that they receive special education services in the prior month.
- See WAC 392-122-140 and WAC 392-172A-02100 for fiscal eligibility requirements for HH funding.

References

- Annual Enrollment Bulletin available online at OSPI's [2017 Bulletin website](#).
- Questions may be directed to **Becky McLean**, School Apportionment and Financial Services, at **360-725-6306**.

DETAILED INSTRUCTIONS

For districts, enter district name, county, district number, ESD number, and report month in the boxes provided. For charter schools and tribal compact schools, enter school name, county, school number, ESD number if applicable, and report month.

Line A

Report, to the nearest tenth, the total number of HH service weeks provided at sites with a single enrolled student, such as the student's home. Calculate weeks of HH services as described below. Do not include students reported on Line B.

Each such week of HH services generates \$60 in HH program allocations.

Line B

Report, to the nearest tenth, the total number of HH service weeks provided at sites such as a children's ward of a hospital or a residential treatment center. Calculate weeks of HH services as described below. Do not include students reported on Line A.

Each such week of HH services generates \$55 in HH program allocations.

Weeks of HH Calculations

Total weeks of HH is calculated in the following method:

1. Determine the first regularly scheduled school day on which the student was both eligible for HH services and began to receive HH services.
2. Determine the last regularly scheduled school day on which the student was both eligible for HH services and received HH services.
3. Count the number of regularly scheduled school days that the student did not attend, as defined in WAC 392-121-033, between the dates determined in Nos. 1. and 2.
4. Divide the number of days in No. 3. by five to determine weeks of HH.
5. Use the lesser of weeks in No. 4. or 18. Total weeks of HH for any individual may not exceed 18.
6. Total the number of weeks for each category for both Line A and B.

Certification

Provide an original signature and date the completed Form E-525.



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