Education Funding

Special Education Funding Guidelines

Special Incidence Portion (SIP)

2016-17

Spring 2016
Ministry of Education

This publication supersedes the *Special Education Funding Guidelines: Special Incidence Portion (SIP) 2015-16*

Une publication équivalente est disponible en français sous le titre suivant :
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Special Incidence Portion (SIP)

Special Incidence Portion (SIP) New for 2016-17

There are no changes for 2016-17.

Three Year Renewals for Students with Diagnosed Medical Conditions

A health claim or a health and safety claim may be submitted on behalf of a student who, as a consequence of their diagnosed medical condition, is dependent on more than two full-time board paid staff to provide intensive support for activities of daily living including health and/or safety at an age when they would not otherwise be so dependent.

Appendix E should be filled out for all Health and Health and Safety Claims. A claim should be considered a Health and Safety claim where the required level of support is due or partially due, to a condition diagnosed by a medical practitioner.

Applications for Health Claims must be accompanied by the Health and Health and Safety Claims Checklist (Appendix E). If the claim meets the criteria for the Health and Health and Safety Claim Checklist it may be considered for approval in 2016-17 for a three-year period. For year 2 and year 3 the amount of funding will be determined by the re-submission of the timetable (Appendix D).

Boards will receive a summary from the Ministry through their Regional Office in the fall of 2016 outlining the students that have been approved for three year renewals and where in the three year renewal process they currently stand.

For students who have completed one three year cycle and are beginning another, boards will be asked to resubmit all applicable documentation as per these guidelines.

Boards are also asked to record the status of a student's three year renewal on Appendix C: Special Incidence Portion (SIP) Application Form while ensuring that this is aligned with the Board summary provided by the Ministry.

In the event a student moves during the three year renewal cycle to another Ontario school board, and qualifies for SIP funding as per these guidelines, the claim will be considered a new claim, and all applicable documentation should be submitted to the Ministry with the board's other SIP claims.

Special Incidence Portion (SIP)

Continuing in 2016-17, school boards may apply for Special Incidence Portion (SIP) funding for staff support to ensure the health and safety both of students who have extraordinarily high needs related to their disabilities and/or exceptionalities and of others at school.

Where approved, the Ministry will grant up to a maximum of $27,000 per full time (1.0 ADE) student per year. . A student in a modified day/half day program is eligible for a maximum of $13,500 in funding.

For all SIP claims, the Ministry requires that the identified additional supports be in place to respond to the student's needs **prior to** submitting an application for additional funding for staff support. Submissions for 2016-17 SIP funding are due on December 15, 2016.

Boards will ensure that, in addition to any other obligations to give notice under the Municipal Freedom of Information and Privacy Act (MFIPPA), the board has informed the parent that a SIP claim had been submitted to the Ministry, in accordance with this guideline, to partially offset the cost of support and services provided by the board for their child.

The SIP allocation for the 2016-17 fiscal year is the sum of all approved special incidence claims for pupils of the board, after any adjustment required under section 25 of the Grants for Student Needs Regulation.

Eligibility Criteria for SIP

Health and Safety

School boards may apply for SIP funding on behalf of students who require more than two full-time equivalent board-paid staff providing intensive support for the health and safety of the applicant student, other students and/or staff. This additional support may be provided by behavioural assistants, teachers' assistants, education assistants, child and youth workers, health/personal care assistants or any other equivalent assistants.

The student will be enrolled in a regular class with special education support or a special education class.

A health claim may be submitted on behalf of a student who, as a consequence of their diagnosed medical condition, is dependent on more than two full-time board paid staff to provide intensive support for activities of daily living including health and/or safety at an age when they would not otherwise be so dependent.

Applications for Health Claims must be accompanied by the Health and Health and Safety Claims Checklist (Appendix E). If the claim meets the criteria for the Health and Health and Safety Claim Checklist it may be considered for approval in 2016-17 for a three-year period. For year 2 and year 3 the amount of funding will be determined by the re-submission of the timetable (Appendix D).

A safety claim may be submitted on behalf of a student who requires more than two full-time board paid staff to provide intensive support for the safety of the student and/or others from behaviour that is injurious to self and/or others.

Health and safety claims are those combining aspects of both health and safety claims.

Staff Support Level Timetable

SIP is intended to offset the additional staff costs for a student who needs more than two full-time equivalent staff providing intensive support according to the formula in the SIP Staff Support Level Timetable (Appendix D). Funding approval will be based on the current school year timetable at the time of submission.

The SIP Staff Support Level Timetable submitted on or before December 15, 2016 in support of a claim for 2016-17 SIP funding (new or renewal) must demonstrate staff support in place in the 2016-17 school year.

Eligible Board-Paid Staff Support

Staff counted in the Staff Support Level Timetable must be supporting the student for at least 10% of the student's hours during a week on a regularly scheduled basis, for the entire school year.

Time spent by behavioural assistants, teachers' assistants, child and youth workers, health/personal care assistants or any other equivalent assistants may be included on the timetable, provided that these staff are spending regularly scheduled time with the applicant student and the support is documented in the current Individual Education Plan (IEP).

Classroom teacher time can be counted as intensive support where the teacher is a special education teacher in a special education class. A special education teacher providing support to the applicant student enrolled in a regular class can also be counted. The total number of students in the class must be shown in the appropriate column(s) in the timetable.

Only staff with a special education assignment can be included in the calculation of intensive support. Teacher time in a regular classroom is not included in the calculation of intensive support. These teachers' salaries are funded through the Foundation Grant.

The time that the student spends with other students can be counted as part of the claimed level of support as long as the assigned support person(s) are in attendance and small group interaction is part of the student's program.

The Staff Support Level Timetable should **not** include time spent by board-paid professional staff (e.g. psychologist, social worker, etc.) except in exceptional circumstances where the board documents that a student's program includes a significant level of regularly scheduled interactions with the student by board-paid professional staff. This support must total at least 10% of the student's hours during a week on a regularly scheduled basis and continue over the school year. The scheduled time must be shown on the timetable in column C and must be documented in the current IEP.

Start/Finish Times	Column A	Column B	Column C
	Educational Assistants	Teachers	Other Staff

Staff Support Calculation

It should be noted that "more than two full-time equivalent board-paid staff" does not necessarily mean that the same two or more people are assigned exclusively to one student. Rather, the total of all eligible board staff interacting with the student will be added up to arrive at the number of full-time staff supporting the student.

The Staff Support Level timetable will be used to report all staff supporting the student.

For all SIP applications the calculation formula uses a 300 minute student day to determine the amount of SIP funding to be provided for an eligible student up to a maximum of $27,000 per student for full-time students (1.0 ADE). A student in a modified day/half day program is eligible for a maximum of $13,500 in funding

Calculation of Staff Support Level per Activity (refer to Appendix D)		
# of staff _____ \# of students	x	# of minutes (activity) _____ 300 minutes (day)
or, Staff Support Level = #staff divided by # students, multiplied by #minutes divided by 300		

Total Staff Support Level _____

(as determined at time of application found in Appendix D: Staff Support Level Timetable Box "D")

(_____ total staff support - 2.0) x $27,000 = _____

Documentation Required for SIP Claims

All documents submitted to support SIP claims must reflect the student's programs and services for the current school year (2016-17).

December 15, 2016 is the submission deadline for the documentation in support of SIP applications. Only claims received on or before the December 15, 2016 submission deadline will be considered for funding in the 2016-17 school year.

A checklist of required documents has been provided for all claims (Appendix A). This checklist is to assist staff in claim preparation. Please note:

All SIP claims for the 2016-17 school year require **a current IEP** for the student, signed by the principal, documenting the student's need for staff support such that the IEP:

1. connects to program and report card,
2. reflects a logical thread from assessment data to the student's areas of strength and need, accommodation and program section,
3. provides, in the program section, measurable learning expectations related to Ontario curriculum for modified subjects/courses, and/or alternative skills areas as appropriate,
4. when the student has SEA equipment, documents the student is using the equipment and, where appropriate, that the student is using the SEA equipment for provincial testing, and
5. **documents, in the human resource section, the board-paid staff and support that are identified and shown in the staff support timetable.**

When determining if the SIP claim is a health, a safety or a health and safety claim, please determine the primary need for the staff support the student requires.

For SIP claims on behalf of students with a health claim or a health and safety claim, the Characteristics Checklist for Health and Health and Safety Claims (Appendix E) must be completed (with all applicable boxes checked). The form must be signed by the Supervisory Officer of Special Education.

For previously approved health claims and health and safety claims that are on a three-year renewal cycle, boards are to submit application form (Appendix C) and a revised timetable for the current academic year (Appendix D). No further documentation will be required.

Claims Process

For each SIP claim the Board will submit to the Ministry by December 15, 2016:

- **one paper copy** of the relevant documents listed in Appendix A (signed, where appropriate); and
- electronic submissions of Appendices B, C and D, and as appropriate, Appendix E.

SIP Approval Summary for All Claims

The board will submit by December 15, 2016, to the Ministry the following SIP Approval Summary (Appendix G):

- a paper copy that shows all new and renewal claims, signed by the Supervisory Officer certifying that the claims submitted are in compliance with this Guideline; and
- an electronic copy of the same.

Business Cycle/Application Process

Business Cycle

The application process for SIP will continue to be connected to the Ministry's financial reporting cycle.

Connection to Financial Reporting

In order for school boards to receive SIP funding as part of their regular payments from the Ministry, it is important that board staff provide appropriate information on the expected number of claims and financial allocations within the board's standard financial reports to the Ministry.

In June of each year, boards should include estimated funding for all SIP claims for the following school year in their Estimates submission for education funding.

In December of each year, boards need to include estimated funding for all SIP claims in their Revised Estimates. This financial information should be provided to each board's finance department in a timely manner and should be based on the expected number of approved claims and the anticipated amount of funding for these claims.

In the winter of the next year, boards need to include in financial statements their final SIP funding allocation.

Ministry Review

During the school year, the Ministry will conduct a review of SIP claim documentation which may include classroom, school and/or board visits. It is

expected, at a minimum, that school boards will retain a copy of all documentation to support the claim.

At any time, the Ministry may review any documentation in support of the SIP claim and may conduct classroom, school and/or board visits which may include reviewing:

- safety and/or behaviour logs (updated where appropriate after application has been submitted);
- other relevant documentation maintained by the board documenting the student's academic program and progress; and
- board training and/or professional development to ensure staff are aware of and trained in appropriate health and/or safety intervention approaches.

SIP Application Process for School Boards for the 2016-17 school year

The business cycle for the SIP application process will be the following:

June 30, 2016

- Boards will submit in their Estimates financial report to the Ministry their projected SIP funding for the next school year.

December 15, 2016

- Boards will submit to the Regional Office:
  - the SIP Approval Summary (see Appendix E) of their SIP new and renewal claims; and
  - all documentation required for each individual claim as per checklist (Appendix A).

- Boards will submit in their Revised Estimates financial report to the Ministry their revised SIP funding projection for new and renewal claims, for the current school year.

June 30, 2017

- The Ministry will have reviewed, approved and finalized all new and renewal SIP claims.
- The Ministry will notify boards of the decisions made.

Fall/Winter 2017

- Financial statements of boards will identify the final SIP funding allocation.

Appendix A: Special Incidence Portion (SIP) Checklist of Documentation for All Claims

Note: An electronic version will be available through the Ministry's Regional Offices

Please fill out the Student's Information on the Application Form (Appendix C) First.		
	Student Name : School Number : School Name : School Board : Application Type : Claim Type :	**Previously Approved For a 3 Year Renewal**
1.	Checklist of Documentation (Appendix A)	
2.	Summary of student's need for intensive staff support or other relevant information (Appendix B) - *signed by the Principal*	
3.	SIP Application Form (Appendix C) - *signed by the Supervisory Officer*	
4.	SIP Staff Support Level Timetable (Appendix D) - *signed by the Principal*	
5.	Characteristics for Health Claims Checklist (Appendix E), for Health or Health & Safety needs - *signed by the Supervisory Officer*	
6.	Individual Education Plan (IEP) *(Current Year)*	
7.	Behaviour Support Plan *(Updated for Renewals)* and/or Health/Medical Management Plan *(Updated for Renewals)*	
8.	Safety Plan, where applicable *(Updated for Renewals)*	
9.	Assessments *(Updated for Renewals)* if available	
10.	Documentation of Inter-Agency Involvement *(Updated for Renewals)*	

Please Note:

Behaviour Support Plan (BSP)
A behaviour support plan is a written plan that is designed to target the underlying reason for behaviour, replace the inappropriate behaviour with an appropriate behaviour that serves the same function, and reduce or eliminate the challenging behaviour. In school boards, behaviour support plans are sometimes referred to as behaviour management plans.

Safety Plan
A safety plan is a plan developed for a student whose behaviour is known to pose an ongoing risk to him or herself, other students, staff, or other people in general. It can serve as a crisis-response plan that outlines the roles and responsibilities of the staff in dealing with specific problem behaviours. The development of a safety plan involves all staff who work on an ongoing basis with a student, as well as parents and the representatives from any community agencies working with the student/family.

Appendix B: Summary of Student's Needs

Note: An electronic version will be available through the Ministry's Regional Offices

Student Name:

School Name:

DSB No.:

DSB Name:

Please provide a brief description of the health and/or safety needs of the student.

How does the assigned staff work with this student to support the student's health and/or safety needs during a typical school day?

Certification
I certify that the information contained in this document is to the best of my knowledge a reflection of the students needs for intensive staff support.

SCHOOL PRINCIPAL (Please Print)	**DATE** (YYYY/MM/DD)	**SIGNATURE OF SCHOOL PRINCIPAL**

Appendix C: Special Incidence Portion (SIP) Application Form

Note: An electronic version will be available through the Ministry's Regional Offices

DSB INFORMATION

Board Number :				
Board Name :				
Contact Person (name, job title, phone) :				
	Last Name	*First Name*	*Job Title*	*Phone*

STUDENT INFORMATION

Last Name :				**Panel** (Elem = 1, Sec = 2) **:**	
First Name :				**School Number :**	
Middle Name :				**School Name :**	
	Year	*Month*	*Day*	**Teacher Name :**	
Birth Date :				**Placement :**	
Sex (M/F) :				**Starting Year of Renewal :** (for 3 year renewals only)	
OEN : (No dashes or spaces)				**Claim Type :** (Health, Safety, Health & Safety)	
IPRC (Y/N) :					
Exceptionalities : If multiple or non-identified, provide additional details				**Additional Details Pertaining to Multiple Exceptionality or Non-Identified Students** 1. 2. 3.	
Application Type : (New, Renewal)					
Modified Schedule (Full-Day) : (If Applicable, Enter the Number Days in Attendance / Week)					
Modified Schedule (Part-Day) : (If Applicable, Enter the Number of Minutes / Days in Attendance)					

SIP funding calculation based on Staff Support Level Timetable (Appendix D)	$ 0	

OTHER SUPPORTS IN PLACE FOR THE STUDENT

Equipment :					
SEA Equipment current year (Y/N)					
School Allocation of Educational Assistants :			**Classroom Allocation of Educational Assistants :**		
Board-Paid Professionals/Paraprofessionals providing support (including contracted staff) :					
Services provided by other Ministries/ other Agencies (specify) :					
Transportation Arrangements (dedicated to the applicant student) :	To School	# Board-paid staff	# SIP Students	Minutes	
	From School	# Board-paid staff	# SIP Students	Minutes	

Certification:

I certify that the information contained in this document is a true reflection of the program provided to the student at the time of application.

SUPERVISORY OFFICER (Please Print)	**DATE** (Year, Month, Day)	**SIGNATURE OF SUPERVISORY OFFICER**

Appendix D: Special Incidence Portion (SIP) Staff Support Level Timetable

Note: An electronic version will be available through the Ministry's Regional Offices

Last Name :		**Board Number :**	
First Name :		**Board Name :**	
		School Name :	
Year *Month* *Day*			
Birth Date :		**Placement :**	**Teacher Name:**
Sex (M/F) :		**Claim Type :** (Health, Safety, or Health & Safety)	**School Allocation of EAs:**
OEN : No Dashes or Spaces		**Modified Schedule (Full-Day) :**	**Classroom Allocation of EAs:**
		Modified Schedule (Part-Day) :	

Note: 24 Hour Format			"A"				"B"				"C"					"D"
Start Time (i.e. 09:00 = 9:00 AM)	**Finish Time** (i.e. 15:00 = 3:00 PM)	**Activity Description**	# EAs	# students	# minutes	**Total EA Staff Support Level**	# Spec Ed Teachers	# students	# minutes	**Total Spec Ed Teacher Support Level**	# Other Staff	# students	# minutes	**Total Other Staff Support Level (excluding regular classroom teacher)**	**Specify Role/ Job Title of Other Staff Reported in Col. C.**	**Total**
					-				-				-			
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Timetable should include support provided by education assistants, special education teachers and other board-paid support staff who work with the student for at least 10 percent of the student's hours on a regular basis during the school year.

SIP Funding Calculation:

Total staff support level "D" minus 2.0 multiplied by $27,000 (to maximum $27,000)

Total Staff Support Level	"A"	+	"B"	+	"C"	=	"D"	
	0.000		0.000	"B" is automatically multipled by 2.5	0.000		0.000	
					SIP funded staff level support : "D" minus 2.0 =			

Staff Support Level = # staff divided by # students multiplied by # minutes divided by 300

SIP funded staff support level multiplied by $27,000 : (maximum $27,000) **$ -**

Actual Student Day Minutes 0

Formula uses student day of 300 **minutes**

Certification:

I certify that the information contained in this document is a true reflection of the program provided to the student at the time of application

SCHOOL PRINCIPAL (Please Print)	**DATE** (Year, Month, Day)	**SIGNATURE OF SCHOOL PRINCIPAL**

Appendix E: Characteristics Checklist for Health Claims

Note: An electronic version will be available through the Ministry's Regional Offices

Last Name :

First Name :

Birth Date : Year Month Day

Sex (M/F) :

OEN :
No Dashes or Spaces

Board Number :

Board Name :

Placement :

Claim Type :
(Health, Safety, or Health & Safety)

Adapted from the Report of the Paediatric Complex Care Coordination Expert Panel May 2008

CHECK all characteristics that apply:

1. Technology dependent and/or users of high intensity care during the school day

- ☐ Child is dependent at least part of each school day on mechanical ventilators.
- ☐ Child requires prolonged intravenous administration of nutritional substances, or drugs.
- ☐ Child has prolonged (≥1 month) dependence on other device-based support, including:
  - tracheostomy tube care,
  - suctioning,
  - oxygen support, or
  - tube feeding.
- ☐ Child has prolonged (≥1 month) dependence on any other medical devices to compensate for vital bodily functions, and requires daily or near daily nursing care, e.g.,
  - apnea (cardiorespiratory) monitors
  - renal dialysis due to kidney failure
  - urinary catheters or colostomy bags plus substantial nursing care.
- ☐ Child is not technologically dependent but has any chronic condition that requires as great a level of care as the above group, such as:
  - children who, as a consequence of their diagnosed medical condition, are dependent on others to provide intensive support for activities of daily living including health and/or safety at an age when they would not otherwise be so dependent.
  - children who require constant medical or nursing supervision or monitoring resulting from the complexity of their condition and/or the quantity of oral drugs and therapy they receive.

AND

2. Fragility

- ☐ The child has severe and/or life-threatening disease.
- ☐ Failure of equipment or treatment places the child at immediate risk.
- ☐ Short-term changes in the child's health status (e.g., an intercurrent illness) puts them at immediate serious health risk.
- ☐ As a consequence of the child's illness, the child remains at significant risk of unpredictable life-threatening deterioration, necessitating round-the-clock monitoring by a knowledgeable caregiver.
- ☐ The child has had 2 or more admissions to hospital lasting 10 or more days in the past year.
- ☐ The child has had 10 or more outpatient clinic visits in the past year.

AND

3. Chronicity

- ☐ The child's condition is expected to last at least 6 more months.

AND

4. Complexity

- ☐ Involvement of multiple health and/or community care services.
- ☐ Health care services delivered in at least 3 of the following locations:
  - Home
  - School
  - Hospital
  - Children's Treatment Centre
  - Community-based clinic (e.g. doctor's office)
  - Other (at clinician's discretion).

Certification:
I certify that the information contained in this document is to the best of my knowledge a reflection of the student's health at the time of application.

SUPERVISORY OFFICER
(Please Print)

DATE
(Year, Month, Day)

SIGNATURE OF SUPERVISORY OFFICER

Appendix G: SIP Approval Summary

Note: An electronic version will be available through the Ministry's Regional Offices

APPENDIX G: SIP APPROVAL SUMMARY / ANNEXE G: SOMMAIRE DES APPROBATIONS DE LA SIS

Note: An electronic version will be available through the Ministry's Regional Offices / À noter: Une copie électronique est disponible aux bureaux régionaux du ministère.

I certify that we are in compliance with the Special Education Funding Guidelines: Special Incidence Portion (SIS) 2016-2017, Spring 2016.
Je, soussigné(e), certifie que nous sommes en conformité avec les Lignes directrices sur le financement de l'éducation de l'enfance en difficulté
La somme liée à l'incidence spéciale (SIS) 2016-2017, Printemps 2016.

Name / Nom

Signature of Supervisory Officer / Signature de l'Agente / Agent de supervision

Date

Total Board Requested Amt ($) / Demande du conseil scolaire ($): 0.00

Total Ministry Approved Amt ($) / Montant approuvé par le ministère ($): 0.00

Regional Office / Bureau régional :

Board Number / Numero du conseil scolaire :

Board Name / Nom du conseil scolaire :

Contact Person (name, job title, phone) / Personne-ressource (nom, titre, téléphone): Last Name / Nom de famille | First Name / Prénom | Job Title / Titre | Phone / Téléphone

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Student Information / Renseignements sur l'élève																	
OEN / NSO (No Dashes or Spaces / Pas de traits ou d'espaces)	School Number / Numero de l'école	Panel / Panel (Elementary = 1, Sec = 2)	Last Name / Nom de famille	First Name / Prénom	Sex / Sexe	Date of Birth / Date de naissance: YYYY / AAAA	Date of Birth / Date de naissance: MM	Date of Birth / Date de naissance: DD / JJ	Application Type (New / Renewal) / Type de demande (Nouvelle demande / Renouvellement)	Claim Type (Health or Health & Safety) / Type de demande (Santé ou santé et sécurité) Indicator 1 or 2 / Indicateur 1 ou 2 Year Renewal / Type de demande d'un renouvellement de 3 ans	Type of Placement / Type de placement	Exceptionality / Anomalie	Additional Details Pertaining to Disability and/or Multiple Exceptionality and/or Non-identified Students / Renseignements supplémentaires en ce qui concerne le handicap et/ou les anomalies multiples et/ou les élèves non identifiés	Modified Day / Journée modifiée	Board Requested Amount / (e.g., 27000) Demande du conseil scolaire (p. ex., 27000)	Ministry Approved Amount / (e.g., 27000) Montant approuvé par le ministère (p. ex., 27000)	Comments / Commentaires	3 Year Renewal (Starting Year of Renewal) / Renouvelle-ment de 3 ans (Première année du cycle)	Ministry Initials / Paraphe de l'agente ou de l'agent (EDU)

Ministry of Education Regional Offices

Barrie Regional Office
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Acronyms

ADE	**Average Daily Enrolment**
ADP	**Assistive Devices Program**
CCAC	**Community Care Access Centre**
EA	**Education Assistant**
FTE	**Full-Time Equivalent**
GSN	**Grants for Student Needs - Legislative Grants for the 2016-17 School Board Fiscal Year**
IEP	**Individual Education Plans**
IPRC	**Identification, Placement and Review Committee**
IT	**Information Technology**
MOHLTC	**Ministry of Health and Long-Term Care**
OEN	**Ontario Education Number**
OESS	**Ontario Educational Software Service**
OHIP	**Ontario Health Insurance Plan**
OSAPAC	**Ontario Software Acquisition Program Advisory Committee**
SEA	**Special Equipment Amount**
SIP	**Special Incidence Portion**
TA	**Teacher Assistant**