

SPECIAL EDUCATION ADVISORY COMMITTEE REGULAR MEETING

AGENDA APRIL 18, 2018

Marilyn Taylor, Chair
Community Representative

Rosanna Del Grosso
Association for Bright Children

Dario Imbrogno
Community Representative

John MacKenzie
FASWorld

Sandra Mastronardi
Autism Ontario

Ashleigh Molloy, Vice-Chair
AAIDD

Tyler Munro

Integration Action for Inclusion Representative

Gizelle Paine
LD Toronto Chapter Representative

Diane Montreuil
Indigenous Representative

Mary Pugh
VOICE for Hearing Impaired

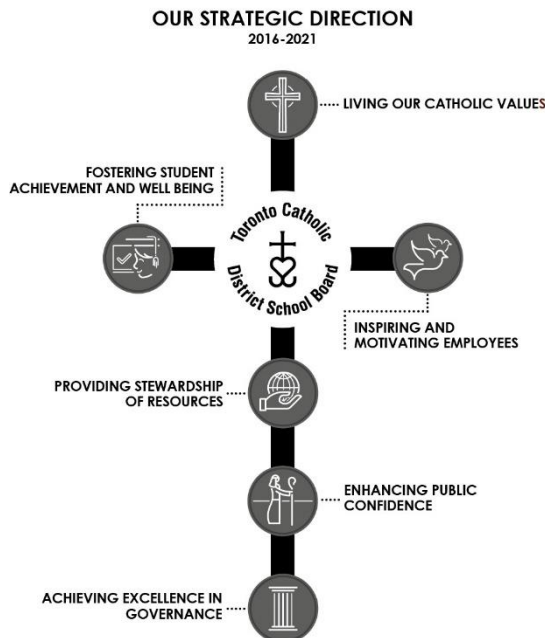
Laurie Ricciuto
Community Representative

Giselle Romanino
Community Representative

Raul Vomisescu
Community Living Toronto

Glenn Webster
Ontario Assoc. of
Families of Children
With Communication
Disorders

Trustee Members
Ann Andrachuk
Angela Kennedy
Garry Tanuan



MISSION

The Toronto Catholic District School Board is an inclusive learning community uniting home, parish and school and rooted in the love of Christ.

We educate students to grow in grace and knowledge to lead lives of faith, hope and charity.

VISION

At Toronto Catholic we transform the world through witness, faith, innovation and action.

Recording Secretary: Sophia Harris, 416-222-8282 Ext. 2293
Acting Asst. Recording Secretary: Colin Johnston, 416-222-8282 Ext. 2659

Rory McGuckin
Director of Education

Barbara Poplawski
Chair of the Board

OUR MISSION

*The Toronto Catholic District School Board is an inclusive learning community uniting home, parish and school and rooted in the love of Christ.
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OUR VISION

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through witness, faith, innovation and action.*



AGENDA THE REGULAR MEETING OF THE SPECIAL EDUCATION ADVISORY COMMITTEE

PUBLIC SESSION

Wednesday, April 18, 2018

7:00 P.M.

	Pages
1. Roll Call & Apologies	
2. Approval of the Agenda	
3. Declarations of Interest	
4. Approval & Signing of the Minutes of the Meeting held March 21, 2018 for Public Session	1 - 8
5. Delegations	
5.a Lisa Geelen regarding Toronto Catholic District School Board Diabetes Policy	9 - 10
5.b Matthew DeAbreu regarding Management of Diabetes at Toronto Catholic District School Board	11 - 12
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7. Unfinished Business	
8. Notices of Matters and Trustee Matters: (for which seventy-two hours' notice has been given)	
9. Communications	

9.a	SEAC Monthly Calendar Review	13 - 16
9.b	Special Services Superintendent Update, April 2018	17 - 18
9.c	2018-19 School Year Education Programs - Other (EPO) Funding - Memo from Bruce Rodrigues, Deputy Minister	19 - 34
9.d	Grants for Student Needs (GSN) for 2018-19: Memo from Andrew Davis, Assistant Deputy Minister, Education Labour and Finance Division	35 - 61
9.e	Ministry of Education 2017 Governance Engagement - Letter from Bruce Drewett, Director, Leadership, Collaboration and Governance Branch	62 - 64
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9.h	March 31st Enrolment - Special Education	95
9.i	Staff Shortage - Verbal Discussion	
10.	Matters Referred/Deferred to the Committee by the Board and Other Committees	
11.	Reports of Officials, and Special and Permanent Committees Requiring Action	
12.	Reports of Officials for Information	
12.a	Budget Report: Financial Planning and Consultation Review	96 - 111
12.b	Budget Report: 2018-19 Grants for Student Needs Update	112 - 121
12.c	Verbal Update from Tyler Munro regarding Safe Schools Committee	
13.	Inquiries and Miscellaneous	
14.	Association Reports	
14.a	Association Report for Autism Ontario	122 - 167

- | | | |
|------|--------------------------------------------------------------------------------------|-----------|
| 14.b | The Learning Disabilities Association of Ontario (LDAO) SEAC Circular, April 2018 | 168 - 170 |
| 15. | Update from Trustees on resolutions recommended to the Board by the Committee | |
| 16. | Pending List | 171 |
| 17. | Adjournment | |

**MINUTES OF THE REGULAR MEETING
OF THE
SPECIAL EDUCATION ADVISORY COMMITTEE**

HELD WEDNESDAY, MARCH 21, 2018

PUBLIC SESSION

PRESENT:

External

Members: Marilyn Taylor, Chair
Rosanna Del Grosso
John MacKenzie
Sandra Mastronardi
Tyler Munro
Gizelle Paine
Mary Pugh
Laurie Ricciuto
Giselle Romanino
Glenn Webster

Trustees: A. Andrachuk
A. Kennedy
G. Tanuan

Staff: C. Fernandes
A. Coke
M. Kokai
D. Reid
P. Stachiw
R. Macchia

S. Harris, Recording Secretary

1. Roll Call and Apologies

The meeting was called to order at 7:11 pm.

Apologies were tendered on behalf of Dario Imbrogno, Ashleigh Molloy, Diane Montreuil and Raul Vomisescu.

MOVED by Trustee Andrachuk, seconded by Sandra Mastronardi, that request for leave of absence from Dario Imbrogno until September 2018, to support his wife who is ill and will be undergoing surgery, be approved.

The Motion was declared

CARRIED

2. Approval of the Agenda

MOVED by Giselle Romanino, seconded by Tyler Munro, that the Agenda be approved.

The Motion was declared

CARRIED

3. Declarations of Interest

There was none.

4. Approval and Signing of the Minutes

MOVED by Trustee Andrachuk, seconded by Sandra Mastronardi, that the Minutes of the Regular Meeting held on February 21, 2018, be approved, with the following amendment:

Page 4 – Item 9c) *Sandra Mastronardi wished for it to be recorded that she was not in favour to be replaced with Sandra Mastronardi wished for it to be recorded that she was not in favour of the Accountability Framework for Special Education Draft.*

The Motion was declared

CARRIED

9. Communications

MOVED by John MacKenzie, seconded by Trustee Andrachuk, that Item 9a) be adopted as follows:

9a) SEAC Monthly Calendar Review received.

The Motion was declared

CARRIED

MOVED by Mary Pugh, seconded by Giselle Romanino, that Item 9b) be adopted as follows:

9b) Special Services Superintendent Update – March 2018 received.

The Motion was declared

CARRIED

MOVED by Sandra Mastronardi, seconded by Gizelle Paine, that Item 9c) be adopted as follows:

9c) Accountability Framework for Special Education 2017-2018 received.

MOVED by Sandra Mastronardi that SEAC recommend to the Board of Trustees that secondary teachers also receive professional development in Special Education.

With the consent of the Committee, Sandra Mastronardi withdrew her Motion.

The Motion was declared

CARRIED

MOVED by Sandra Mastronardi, seconded by Trustee Andrachuk, that the Singapore Math, Beast Canada and the Spirit of Math programs be added as parent resources on the Toronto Catholic District School Board's website.

The Motion was declared

CARRIED

MOVED by Rosanna Del Grosso, seconded by Gizelle Paine, that we look at the Singapore Math, Beast Canada and Spirit of Math programs as possibilities vetted by the Math Curriculum Department.

The Motion was declared

CARRIED

MOVED by Gizelle Paine, seconded by Giselle Romanino, that Item 9d) be adopted as follows:

- 9d) Questions and Answers – Accountability Framework for Special Education 2017-2018** received.

The Motion was declared

CARRIED

Rosanna Del Grosso left the meeting at 9:00 pm.

MOVED by Gizelle Paine, seconded by Tyler Munro, that Item 9e) be adopted as follows:

- 9e) Parents Reaching out Grant – Memo dated February 22, 2018 from Denise Dwyer, Assistant Deputy Minister, Indigenous Education and Wellbeing Division, Ministry of Education** received.

The Motion was declared

CARRIED

MOVED by Giselle Romanino, seconded by Trustee Andrachuk, that Item 9f) be adopted as follows:

- 9f) Update form Tyler Munro regarding Safe Schools Committee received.**
The Motion was declared

CARRIED

MOVED by Trustee Tanuan, seconded by John MacKenzie, that Item 9g) be adopted as follows:

- 9g) Update from Glenn Webster regarding Mental Health Committee received.**

The Motion was declared

CARRIED

10. Matters Referred/Deferred to the Committee by the Board and Other Committees

From Student Achievement and Wellbeing Catholic Education and Human Resources Committee Meeting held March 1, 2018

MOVED by Trustee Andrachuk, seconded by Gizelle Paine, that Item 10a) be adopted as follows:

- 10a) Accountability Framework for Special Education 2017-2018 received.**

MOVED in AMENDMENT by Sandra Mastronardi, seconded by Giselle Romanino, that SEAC agrees with the recommendations put forward by the Board of Trustees that the provincial data be included where available, and that the outcome of the recommendations be brought back to SEAC.

The Amendment was declared

CARRIED

The Motion, as amended, was declared

CARRIED

13. Inquiries and Miscellaneous

13a) Inquiry from Tyler Munroe regarding Principals Assigned to Special Education Programs and IPRC Meetings noted

13b) Inquiry from Sandra Mastronardi regarding Invitation to SEAC for an Event from Trustee Carlisle noted.

MOVED by Sandra Mastronardi, seconded by Gizelle Paine, that Item 13c) be adopted as follows:

13c) Inquiry from Sandra Mastronardi regarding Student Trustees that SEAC recommend that the Superintendent of Special Education reach out to Student Trustees to strike a Special Education Sub-Committee so that student voices can be represented.

The Motion was declared

CARRIED

Trustee Andrachuk and Glenn Webster wished to be recorded as not in favour.

14. Association Reports

14a) From Sandra Mastronardi regarding GWL Transition Course noted.

16. MOVED by Sandra Mastronardi, seconded by Tyler Munro, that Item 16a) Pending List be received.

17. **Adjournment**

MOVED by Trustee Andrachuk, seconded by John MacKenzie, that the meeting adjourn.

The Motion was declared

CARRIED

SECRETARY

CHAIR



TORONTO CATHOLIC DISTRICT SCHOOL BOARD

DELEGATION REGISTRATION FORM FOR STANDING OR OTHER COMMITTEES

PLEASE BE ADVISED THAT ALL STANDING COMMITTEE MEETINGS ARE BEING RECORDED

For Board Use Only
Delegation No. _____
<input type="checkbox"/> Public Session
<input type="checkbox"/> Private Session
<input type="checkbox"/> Three (3) Minutes

Name	Lisa Geelen
Committee	SEAC
Date of Presentation	4/9/2018
Topic of Presentation	TCDSB Diabetes Policy
Topic or Issue	TCDSB currently does not have a policy to support children with Diabetes in school.
Details	<p>Type 1 diabetes impacts 1 in 300 children in the TCDSB system, each having individualized medical needs that require appropriate supervision and daily management at any hour of the day.</p> <p>Management of this disease involves daily blood sugar checks, insulin injections, meal planning, carbohydrate counting, and monitoring for symptoms of dangerous low blood sugars which require immediate attention and treatment.</p> <p>The most concerning danger with a child with type 1 diabetes is a hypoglycemic (low blood sugar) episode, which requires immediate first aid and can be fatal if preliminary symptoms are missed. The speed at which a low blood sugar transitions to an emergency situation adds to the prevalence for a structured diabetes management plan at all TCDSB schools.</p> <p>On October 24th, 2017, the Ministry of Education (MOE) released a PPM 161 (Draft) – Supporting Children and Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and/or Epilepsy) in Schools. The PPM 161 requires school boards to develop much needed policies to support the aforementioned medical conditions. It describes what should be included in the policies, among other things, school boards are expected to detail the following:</p> <ul style="list-style-type: none"> • The roles and responsibilities of parents, school staff, principal, students, and

	<p>school boards;</p> <ul style="list-style-type: none"> · How training and education for school staff will be maintained; · What a student’s Plan of Care should include; · How daily management of the student’s condition will be supported; · How emergencies will be handled. <p>School boards are expected to have their policies on prevalent medical conditions implemented no later than September 1, 2018.</p>
Action Requested	<p>As mentioned above, school boards are expected to have their policies on prevalent medical conditions implemented no later than September 1, 2018.</p> <p>In order to facilitate school boards achieving this expectation, the MOE recommends consulting with appropriate groups to guide the development of the aforementioned policies.</p> <p>My ask is that: TCDSB establishes a working group (which includes both myself and Matthew DeAbreu as parent representatives and T1D subject matter experts) , to develop a TCDSB diabetes policy to meet the ministry implementation deadline of September 1, 2018.</p>
I am here as a delegate to speak only on my own behalf	{ 1) I am here as a delegation to speak only on my own behalf }
I am an official representative of the Catholic School Parent Committee (CSPC)	
I am an official representative of student government	
I am here as a spokesperson for another group or organization	
I have read, understand and agree to comply with the rules for Delegations as per the TCDSB Delegations Policy T.14.	I Agree
Submittal Date	4/4/2018



TORONTO CATHOLIC DISTRICT SCHOOL BOARD

DELEGATION REGISTRATION FORM FOR STANDING OR OTHER COMMITTEES

PLEASE BE ADVISED THAT ALL STANDING COMMITTEE MEETINGS ARE BEING RECORDED

<u>For Board Use Only</u> Delegation No. _____ <input type="checkbox"/> Public Session <input type="checkbox"/> Private Session <input type="checkbox"/> Three (3) Minutes

Name	Matthew DeAbreu
Committee	SEAC
Date of Presentation	4/18/2018
Topic of Presentation	Management of diabetes at TCDSB
Topic or Issue	Development of a policy to support students managing diabetes while at school.
Details	<p>Since children spend 30 to 35 hours per week at school, effectively managing their diabetes while there is integral to their short- and long-term health.</p> <p>Type 1 diabetes (T1D) impacts 1 in 300 children in the TCDSB system, each having individualized medical needs that require appropriate supervision and daily management at any hour of the day.</p> <p>Support for students with T1D is inconsistent across TCDSB. There are discrepancies in teacher education and student support systems across the TCDSB, even among schools in the same jurisdiction.</p> <p>Management of this disease involves daily blood sugar checks, insulin injections, meal planning, carbohydrate counting, and monitoring for symptoms of dangerous low blood sugars which require immediate attention and treatment.</p> <p>The most concerning danger with T1D is a hypoglycemic (low blood sugar) episode, which requires immediate first aid and can be fatal if preliminary symptoms are missed. The speed at which a low blood sugar transitions to an emergency situation adds to the prevalence for a structured diabetes management plan at all TCDSB schools.</p> <p>On October 24th, 2017, the Ministry of Education (MOE) released a PPM 161 (Draft) – Supporting Children and Students with Prevalent Medical Conditions</p>

	<p>(Anaphylaxis, Asthma, Diabetes, and/or Epilepsy) in Schools. The PPM 161 requires school boards to develop much needed policies to support the aforementioned medical conditions. It describes what should be included in the policies, among other things, school boards are expected to detail the following:</p> <ul style="list-style-type: none"> • The roles and responsibilities of parents, school staff, principal, students, and school boards; • How training and education for school staff will be maintained; • What a student’s Plan of Care should include; • How daily management of the student’s condition will be supported; • How emergencies will be handled. <p>School boards are expected to have their policies on prevalent medical conditions implemented no later than September 1, 2018.</p> <p>In order to facilitate school boards achieving this expectation, the MOE recommends consulting with appropriate groups to guide the development of the aforementioned policies.</p>
Action Requested	<ul style="list-style-type: none"> • TCDSB establishes a diabetes policy working group, inclusive of both myself and Lisa Geelen as parent representatives and T1D subject matter experts, to develop a TCDSB diabetes policy for implementation on September 1, 2018. • Make the current draft of a TCDSB diabetes policy immediately available to both myself and Lisa Geelen for our review to ensure there are no gap areas. • A meeting with the Superintendent of Special Services within the next 10 business days to; <ul style="list-style-type: none"> · Establish a diabetes policy working group and, · Develop an aggressive plan of action to implement a TCDSB diabetes policy by the MOE deadline of September 1, 2018.
I am here as a delegate to speak only on my own behalf	{ 1) I am here as a delegation to speak only on my own behalf }
I have read, understand and agree to comply with the rules for Delegations as per the TCDSB Delegations Policy T.14.	I Agree
Submittal Date	4/11/2018

Annual Calendar of SEAC Business for 2018

Month	Annual Activities/Topics	Board Events/Deadlines	Items to be Addressed from the Pending List	Status of Pending Items
January	<ul style="list-style-type: none"> - Review of Draft SEAC Calendar - Set SEAC goals for the year - Annual Accessibility Report 2017 - Mental Health Report 2016-17 - Auditor Report – Ministry Funding and Oversight of School Boards - Special Education Plan: special education staffing 2017 	<ul style="list-style-type: none"> - Grade 9 EQAO Testing takes place in Secondary Schools - Long Term Accommodation Program Plan (ongoing) 	<p>SEAC requested that the Board to seek a representation of indigenous persons from various organizations at SEAC. (November 2016)</p> <p>SEAC recommends to the Board of Trustees that the community assessment consultation be distributed immediately to Trustees and parents. (December 2017)</p> <p>SEAC recommends to the Board of Trustees that Student Trustees membership in SEAC be considered. (December 2017)</p> <p>SEAC recommend to the Board that the principals, resource teachers and guidance counsellors ensure that parents receive the information from community colleges and universities regarding summer transition programs for the special needs students. (Nov.2017)</p> <p>SEAC recommend to the Board of Trustees that the Accessibility Working Group Committee also include parent representation. <i>“That SEAC recommend to the Board of Trustees that IT services, but not limited to, be included in the list of Commitments to Accessibility Planning, Section 2.4, page 26. (December 2017)</i></p> <p>SEAC recommends that Special Education Programs (S.P.01) policy be renamed to <i>Special Education Programs and Services</i>. Also that the term <i>Special Education Programs and Services</i> throughout the policy. SEAC recommends that</p>	<p>Completed Jan 2017</p> <p>Completed Dec 2017</p> <p>Reviewed in Jan 2017</p> <p>Communicated Jan 2018</p> <p>Communicated to pertinent staff for consideration Dec 2017</p> <p>Communicated to pertinent staff for inclusion in the</p>

			an example of blind/low vision be included as an example. (December 2017)	policy Dec. 2017
February	<ul style="list-style-type: none"> -Review of SEAC Calendar - Special Education Plan: Review Program Specific Resources for Parents -TCDSB Equity Plan Presentation -Accountability Framework for Special Education -Auditor Report – School Board’s Management of Financial and Human Resources -Student Trustees Eligibility to sit on SEAC -Special Education Parent Fair 	<ul style="list-style-type: none"> -Multi-Year Strategic Plan (MYSP) -New term begins in Secondary Schools that operate on semesters -Report Cards are distributed (Elementary and Secondary) -Parent-Teacher Conferences 	<p>SEAC recommends to the Board of Trustees that Student Trustees membership in SEAC be considered. (December 2017)</p> <p>Investigate SEAC setting up a working sub-committee to propose items related to the suggestions from the Transportation Steering Committee for discussion at the SEAC January 2018 meeting. (December 2017)</p>	<p>Update since January 2018</p> <p>February 2018</p>
March	<ul style="list-style-type: none"> -Review of SEAC Calendar -Continue consultation on Special Education Programs and Services -Safe Schools Committee Update -Mental Health Committee Update 	Ontario Secondary School Literacy Test (OSSLT) takes place		
April	<ul style="list-style-type: none"> - Review of SEAC Calendar - Financial Report as at January, 2016 2017-18 Budget Consultation - GSN – - March 31st special ed student count - Update to Special Education Programs for 2018-19 - Verbal update on Medical Conditions Forms 	<p>ONSIS report on identified students</p> <p><i>Autism Awareness Month</i></p>	Number of Identification Exceptionalities by Grade Report submitted to the Ministry of Education’s Ontario Student Information System (ONSIS) as of October 2017 that we have this as a standing item, with a first report in October and a second report in March. (January 2018)	Added to Agenda in November and April as the report is sent the following month.
May	<ul style="list-style-type: none"> -Review of SEAC Calendar -Special Education Plan: Handbook update -Secondary School Safe Arrival procedures for ISP students -SEAC Orientation -ISP class changes - SO update 	<p><i>Budget Consultation continues</i></p> <p><i>Secondary School Admission Policy Consultation</i></p>		

	- Pro Grants Application			
June	<ul style="list-style-type: none"> • Review of SEAC Calendar • Monthly Update from the Superintendent of Special Services • Special Education Parent Guide 2017 • Budget approval update • Status of PRO Grant application 	<i>EQAO Grade 3 and 6 Testing</i>		
July		<i>School Board Submits balanced Budget for the following year to the Ministry</i>		
August		<i>Year End for School Board Financial Statements</i>		
September	<ul style="list-style-type: none"> - Review Special Education Checklist - Review TCDSB accessibility Plans - Updates from MACSE Meeting Highlights - Update re Special Needs Strategy - Develop or review SEAC annual Agenda/Goals -Association Reports: Autism Ontario and LDAO 	<i>Special Education Report Checklist submitted to the Ministry of Education</i>		
October	<ul style="list-style-type: none"> - Education Quality and Accountability Office (EQAO) Primary Division, Junior Division, Grade 9 and OSSLT Assessment Results -Representation sought for Mental Health and Safe Schools Committees - Review of Special Education Plan – Model for Special Education - Review of Special Education Plan – Transportation -Review of Special Education Plan – Categories and Definitions of Exceptionalities 	<ul style="list-style-type: none"> -EQAO Results for Gr. 3 and 6 Received and OSSLT -Reports on Student Numbers of Elementary and Secondary School Students to be submitted the Ministry of Education -Engagement and Governance Supports Discussion Guide 		
November	<ul style="list-style-type: none"> -Review EQAO results including deferrals, exemptions, participation rates, and accommodations provided for Special Ed. Students and Achievement levels 	<ul style="list-style-type: none"> -Engagement and Governance Supports Discussion Guide ONSIS report on identified students 		

	<ul style="list-style-type: none"> -Continue to Review elements of the Special Education Plan - Engagement and Governance Supports Discussion -Review of elements of the Special Education Plan (Model for Special Education; Transportation; Categories of Definitions of Exceptionalities) -Professional Learning Plan -Review of Anaphylaxis Policy, Protocol and Guidelines 			
December	<ul style="list-style-type: none"> -SEAC Elections -SEAC Mass and Social -Policy review of Special Education Programs (S.P.01) -Multi-year Accessibility Plan 	Independent review of assessment and reporting		



Special Education Superintendent Update

April 2018

Psychology & Social Work

Psychology and Social Work staff are participating in professional development in the effective delivery of evidence based mental health intervention using cognitive behavior therapy principles. The professional development sessions are on April 20th and 23rd.

Autism

On Monday April 9, 2018 staff, students, parents and special guests gathered at the Catholic Education Centre for the Autism Awareness Flag Raising ceremony. Staff and students from St. Edward Catholic School, Blessed Trinity Catholic School & St. Gabriel Catholic School along with Fr. Obinna Ifeanyi led everyone in prayer and song, before the flag was raised. The Chair and Director of the Board were on hand to welcome staff, students and parents.





Autism continued...

The Autism Department held its annual Autism Awareness Evening on April 9th. Parents, students and staff were entertained by Michael McCreary, known as the Aspie Comic, and his father Doug McCreary. The families that attended viewed student artwork and stayed for refreshments afterwards.

All who attended had a wonderful evening.



Ministry of Education

Deputy Minister

Mowat Block
Queen's Park
Toronto ON M7A 1L2

Ministère de l'Éducation

Sous-ministre

Édifice Mowat
Queen's Park
Toronto ON M7A 1L2



Memorandum To: Directors of Education
Secretary/Treasurers of School Authorities

From: Bruce Rodrigues
Deputy Minister

Date: March 26, 2018

Subject: 2018-19 School Year Education Programs – Other (EPO)
Funding

The Ministry of Education is pleased to announce its 2018-19 projected EPO funding in conjunction with the release of Grants for Student Needs (GSN) funding.

Context

The ministry's vision for education, *Achieving Excellence: a Renewed Vision for Education in Ontario*, is about creating the best possible teaching, learning, and assessment experience to position students in Ontario as the next generation of leaders and citizens. The four goals of the renewed vision are:

- Achieving Excellence
- Ensuring Equity
- Promoting Well-Being
- Enhancing Public Confidence

This vision for public education includes a renewed emphasis on providing students with the knowledge and skills to adapt to a modern, highly skilled workforce rooted in a knowledge-based global economy.

EPO funding will continue to support school boards' ability to implement targeted programs to both advance and protect the gains made under the ministry's Renewed Vision.

As in past years, the ministry will strive to simplify the reporting processes and requirements for EPO transfer payments. The goal of this is to reduce administrative burden, improve financial resource management and better support the Renewed Vision.

The ministry will also continue to examine opportunities to streamline EPO by transferring programs to the GSN. Starting in the 2018-19 school year, Autism Supports and Training and Early Years Leads will be transferred from EPO to GSN (please refer to GSN B memo 06).

Funding Allocations

To facilitate school boards' budget planning for the 2018-19 school year, we confirm that \$246.9 million of EPO funding will be allocated to school boards and school authorities to support ministry priorities. Within this amount:

- \$145.0 million is allocated by program and by school board in this memorandum; and
- \$101.9 million has been allocated by program, with school board allocations to be confirmed later in the year.

The following tables illustrate the above allocations by initiative:

Section 1: Program Allocation (Details by School Board in Appendix A)	Amount (\$M)
A. After School Skills Development (ASSD) Programs for Students with Autism Spectrum Disorder (ASD)	3.3
B. Community Use of Schools: Outreach Coordinators	6.4
C. Community Use of Schools: Priority Schools	7.5
D. Focus on Youth Program	8.0
E. French-Language eLearning Strategy	0.1
F. Highly Skilled Workforce Strategy K-12: Experiential Learning	12.0
G. Indigenous Support and Engagement Initiative	1.9
H. Innovation in Learning Fund	8.0
I. Managing Information for Student Achievement (MISA) Professional Network Centres	1.4
J. Mental Health Workers in Schools	24.2
K. Pilot to Improve School-based Supports for Students with ASD	3.8
L. Politique d'aménagement linguistique (PAL) Initiatives	0.2
M. Renewed Mathematics Strategy (RMS)	55.2
N. Supporting French-Language Learners and Newcomer Students	0.2
O. Supporting Implementation of French-Language Policies and Programs	0.4
P. Supporting Implementation of Revised Kindergarten Program and the Addendum to Growing Success	0.5
Q. Well-Being: Safe, Accepting and Healthy Schools and Mental Health	12.0
Total Section 1	145.0

Section 2: Program Allocation (Board Allocations to be Confirmed In-Year)	Amount (\$M)
A. Executive Compensation	12.1
B. Gap Closing in Literacy Grades 7-12	1.7
C. Highly Skilled Workforce Strategy K-12	21.3
D. Indigenous Student Learning and Leadership Gatherings	0.3
E. International Education Strategy	0.4
F. Ontario Focused Intervention Partnership (OFIP)	0.8
G. Ontario Leadership Strategy and Mentoring for All	4.8
H. Ontario's Equity Action Plan	5.5
I. Parents Reaching Out (PRO) Grants for School Councils	2.5
J. Professional Development and Apprenticeship	5.0
K. Professional Development - Principals' and Vice-Principals' Associations	0.4
L. Re-engagement (12 & 12+) (including Indigenous Re-engagement)	1.3
M. Strengthening Equity in Northern Boards Initiative	7.0
N. Student Engagement	1.6
O. Supporting Cannabis Legalization	2.8
P. Supporting French-Language Schools and Student Support Grades 7-12	0.5
Q. Supporting French-Language Special Education and the Success of Students with Special Needs	5.0
R. Supporting Special Education Assessments	20.0
S. Teacher Learning and Leadership Program (TLLP)	4.4
T. Transportation Funding for Children and Youth in Care	3.5
U. Tutors in the Classroom	1.2
Total Section 2	101.9

TOTAL PROGRAM ALLOCATION	246.9
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Note: Totals may not add due to rounding

Section 1. Program Allocations with School Board Detail

Program funding of \$145.0 million has been allocated board by board (see Appendix A for details).

A. After School Skills Development Programs for Students with Autism Spectrum Disorder (\$3.3M)

Extending After School Skills Development (ASSD) programs for students with Autism Spectrum Disorder (ASD) over the 2018-19 school year. The ministry will provide \$3.3 million to 39 school boards to extend their after school programs to support students with ASD in social, communication, self-regulation and life-planning skills development.

B. Community Use of Schools: Outreach Coordinators (\$6.4M)

Funding is allocated to enable school boards to hire Outreach Coordinators who help ensure the effectiveness of the Community Use of Schools program at the local level through activities such as program coordination, outreach, information sharing, and data collection. The Community Use of Schools program helps all schools offer affordable access to indoor and outdoor school space to not-for-profit groups outside of school hours.

C. Community Use of Schools: Priority Schools (\$7.5M)

The Priority Schools Initiative, a component of the Community Use of Schools program, helps a set of schools provide not-for-profit groups free after-hours access to school space in communities that need it most.

D. Focus on Youth Program (\$8.0M)

Funding for this program continues in 2018-19 to support the partnership between select school boards and local community agencies to provide summer and afterschool programming and employment opportunities for students in high-needs neighbourhoods.

E. French-Language eLearning Strategy (\$0.1M)

Students attending French-language school boards have access to online and blended learning that foster the development of global competencies. This funding will support the hiring of two additional French-language e-Learning teachers and will provide supports to targeted French-language school boards in the deployment of data analysis intelligent business tools.

F. Highly Skilled Workforce Strategy K-12: Experiential Learning (\$12.0M)

Funding is being provided to support Year Two of the implementation of the Highly Skilled Workforce Strategy K-12. This funding will continue to support a dedicated Leader in Experiential Learning for each school board, as well as enable the expansion of experiential learning opportunities and professional learning for educators.

Part of the ministry's multi-year plan to fully realize the commitment in Achieving Excellence includes an intention to enhance parent/guardian and community connections to schools to support school experiences that reflect an integrated and coherent approach to student achievement, equity and well-being. Schools will be supported in providing opportunities for rich, meaningful experiences that include experiential learning. This will involve expanding deliberate opportunities for schools to connect with community partners to bring experiential learning resources to students.

This funding also supports Deeper Conversations on Education and Career/Life Planning: Professional Learning for Educators.

The Ministries of Education and Advanced Education and Skills Development will continue collaboration with district school board teams and community partners in the 2018-19 school year to offer professional learning for educators in a counselling role to foster dialogue and create a culture in schools where students value education and career/life planning and where educators see themselves as important contributors to the school's comprehensive education and career/life planning program. This will include professional learning supports for the Grade 7 and 8 teachers, announced in the 2018-19 GSN memo.

G. Indigenous Support and Engagement Initiative (\$1.9M)

Funding is provided to selected school boards to employ a full time staff member responsible for:

- further developing strong working and learning relationships with local Indigenous communities and organizations;
- developing school strategies that are culturally informed and welcoming for Indigenous students and their Indigenous communities;
- increasing capacity of Professional Learning Teams to better understand the learning needs of self-identified Indigenous students;
- improving achievement for Indigenous students who are not consistently achieving success; and,
- better understanding trends and patterns of Indigenous students not engaged or not attending in school.

H. Innovation in Learning Fund (\$8.0M)¹

The ministry is investing \$8 million a year in fostering greater innovation in learning and teaching to support the development of global competencies (e.g. transferrable skills) in students. The Innovation in Learning Fund will provide funding to school boards for:

- innovations in learning and teaching (“innovation projects”) that will help to support the learning of all students with a focus on transferable skills; and,
- professional development for educators to promote collaborative professionalism and facilitate the sharing of experiences and expertise with a focus on transferable skills.

I. Managing Information for Student Achievement (MISA) Professional Network Centres (\$1.4M)

MISA has the objective of increasing the capacity for data collection, information management and analytics within the education system. The funding recipients are Ontario’s seven MISA Professional Network Centres (six regional English-language centres and one province-wide French-language centre) which are made up of member school boards. The end users are teachers, principals and board administrators who are involved in activities to increase capacity for utilizing information in support of positive student outcomes. The MISA PNC “lead” board will work with other member boards to plan, implement and assess capacity building projects.

J. Mental Health Workers in Schools (\$24.2M in EPO)²

Beginning in 2018-19, the ministry will be providing \$24.5 million to support approximately 180 new mental health workers in secondary schools, growing to \$49.5 million to support approximately 400 new workers in every secondary school across the province in the 2019-20 school year². The purpose of this investment is to hire regulated health professionals with specialized training in mental health, which may include social workers, psychologists and psychotherapists. All school boards with secondary schools will receive funding for one mental health worker, plus an incremental amount based on average secondary school size and enrolment. The investment will also include annual base funding of \$50,000 for all school boards with secondary schools to support province-wide research and evaluation of the new supports.

This investment is part of the government’s system-wide transformation of mental health care services to improve quality and access for all Ontarians. This funding will address the increasing need to support students who have mental health concerns through continued and expanded mental health awareness and education, early identification and assessment, and improve timely referrals to community mental health services.

¹ This program includes funding to the six hospital boards (up to \$34,177 each) to be determined based on budget requirements.

² Investments of \$24.5M and \$49.5M include GSN funding of \$0.3M in 2018-19 and \$0.6M in 2019-20 to support the cost of crown contributions to the benefit trusts for these staff.

K. Pilot to Improve School-based Supports for Students with Autism Spectrum Disorder (\$3.8M)

The ministry will provide \$3.8 million to extend this pilot to improve school-based supports for students with Autism Spectrum Disorder (ASD) through the 2018-19 school year with participating school boards. The pilot was introduced in 2017-18 in 18 school boards to test the impact of providing dedicated space in schools for external applied behavior analysis (ABA) practitioners, providing ABA training for Educational Assistants (EAs), and hiring Board Certified Behaviour Analysts (BCBAs) or equivalent, to improve school-based supports for students with ASD. The pilot extension will allow the collection and analysis of more robust evidence on pilot processes, student and system outcomes, and will better inform next steps.

L. Politique d'aménagement linguistique Initiatives (\$0.2M)

Politique d'aménagement linguistique (PAL) has the objective of ensuring the protection, enhancement and transmission of the French language and culture in the minority settings that are French-language schools in Ontario. Launched in 2004, PAL is Ontario's overarching language planning policy for all 12 French-language school boards. Its key goals (delivering high-quality instruction, building a francophone environment through partnerships) are very much aligned with those of Ontario's renewed vision for education. Consultations on the PAL were held with French-language stakeholders in 2014. The final report on the consultations included advice to support a renewal of the PAL and supports for continued implementation. Work is currently underway with education partners to update the policy document and develop related supports for implementation across the French-language education system.

M. Renewed Mathematics Strategy (\$55.2M)³

The Renewed Mathematics Strategy (RMS) is a three-year strategy that provides dedicated annual funding to improve mathematics across the province. The RMS provides supports to all schools and increased or intensive supports to a select group of schools with the greatest needs in math achievement.

N. Supporting French-Language Learners and Newcomer Students (\$0.2M)

Three targeted French-language school boards will continue to receive funding for to participate in the pilot project research, in collaboration with Ottawa University, to promote effective practices in the use of the Effective literacy Guide *La littératie dans toutes les matières: Guide d'enseignement efficace de la 7e à la 10e année*, and the electronic portal *Trousse d'acquisition des compétences langagières en français (TACLEF)*. These projects promote effective practices in support of French-language

³ This program includes funding to the six school authorities operating in hospital settings (up to \$3,650 each) to be determined based on budget requirements.

competencies for French-language learners and newcomer students, including non-conversant learners. This is the fourth year of implementation of the initiative. Please note that this was referred to as “Support French Language Literacy Strategies” in last year’s EPO memo.

O. Supporting Implementation of French-Language Policies and Programs (\$0.4M)

This funding supports French-language school boards to provide the necessary training and support for the implementation of policies such as Growing Success and of revised curriculum documents, such as *Études des Premières Nations, des Métis et des Inuits*. The objective is to strengthen the instruction underlying these policies and programs: assessment *as, for* and *of* learning and inquiry-based learning.

P. Supporting Implementation of Revised Kindergarten Program and the Addendum to Growing Success (\$0.5M)

In 2018-19, French-language school boards will receive an allowance for the implementation of the revised program. School boards will receive base funding in order to implement the program effectively. The funding will help school boards to build capacity, to promote the integration of learning expectations from the four frames (Belonging and Contributing, Self-Regulation and Well-Being, Demonstrating Literacy and Mathematics Behaviour, and Problem Solving and Innovating), to make children’s voices heard in their environment and make their learning, thinking and theories (assessment for learning and as learning) visible and to continue to support play-based and inquiry-based learning in the kindergarten classes.

Q. Well-Being: Safe, Accepting and Healthy Schools and Mental Health (\$12.0M)⁴ – Theme Bundle

Through an extensive public engagement process, the ministry heard that achievement, well-being and equity must be closely interwoven in day-to-day teaching, learning and assessment in a way that enables all students to flourish, and of the need to look at well-being together with a student’s whole experience at school.

This bundle continues to combine the funding allocations for safe and accepting schools and implementation of board mental health strategies in support of Ontario’s Comprehensive Mental Health and Addiction Strategy, Open Minds, Healthy Minds.

The funding will be used to address local needs and priorities, such as those identified in the school climate surveys, to enhance well-being in the classroom and across the school to support the cognitive, social, emotional and physical development of students, as well as their sense of self, spirit and identity, and staff. The funding may be used to support:

⁴ This program includes funding to the six school authorities operating in hospital settings (up to \$20,000 each) to be determined based on budget requirements.

- activities that support student mental health;
- taking further steps to promote safe, healthy, inclusive and accepting learning environments;
- supporting equity and inclusive education to identify and remove discriminatory biases and systemic barriers in support of student achievement and well-being (including working with Equity and Inclusive Education Networks);
- promoting student voice and self-advocacy;
- supporting collaborative professionalism through professional learning to help educators and all school staff reflect and support well-being and equity in classroom instruction and the school experience; and,
- co-developing approaches to support staff well-being.

To better understand the impact of education initiatives and funding strategies to promote and support well-being, the ministry will be changing reporting requirements on well-being funding. In place of requiring boards to submit annual action plans, the ministry will be requiring boards to submit a 3-Year Well-Being Plan and provide annual report-backs on their spending in this area to the ministry. It is expected that boards will use this plan to inform integrated planning for student achievement, well-being and equity with Board Improvement Planning for Student Achievement (BIPSA).

Section 2. Program Allocations To Be Confirmed

Funding of \$101.9 million, as outlined below, has been allocated by program, with board-by-board allocations to be confirmed later in the year.

A. Executive Compensation (\$12.1M)

Funding of \$12.1 million is being provided to assist school boards in addressing the changes as a result of the implementation of school board executive compensation programs for the 2017-18 and 2018-19 school years. Specific school board funding amounts will be based on each board's salary and performance-related pay envelope and approved maximum rate of increase, minus adjustments to reflect the increases already provided as part of the GSN salary benchmarks for the 2017-18 and 2018-19 school year for other senior administration.

B. Gap Closing in Literacy Grades 7-12 (\$1.7M)

All English-language district school boards may apply for additional funding to enhance capacity building for effective and differentiated instruction to meet the assessed needs of students who require additional support in literacy.

C. Highly Skilled Workforce Strategy K-12 (\$21.3M) - New Theme Bundle

The ministry continues to support the implementation of the Highly Skilled Workforce Strategy K-12 by funding the initiatives below. To reduce administrative burden, a new EPO bundle is being created for the 2018-19 school year to support the strategy, including supports for experiential learning.

Specialist High Skills Major (\$20.2M)

Funding for Specialist High Skills Major (SHSM) programs is provided to school boards both through the GSN and through an EPO transfer payment. Board funding allocations may change if student enrolment or program offerings differ from the approved board 2018-19 SHSM application.

School boards are receiving additional SHSM expansion funds to increase the participation among Grade 11 and 12 students in SHSM programs as recommended by the Premier's Expert Panel on the Highly Skilled Workforce. The ministry is committed to ensuring sufficient resources are in place for successful implementation considering school capacity, labour market opportunities and local context. Boards' expansion plans are to be developed by SHSM board leads in partnership with schools and administrators, involving the local federations/unions and aligned with school and board improvement plans.

Funds are to be used by school boards to address costs related to the delivery and management of SHSM programs which will be communicated in forthcoming SHSM Program and Funding memoranda to Directors of Education.

Support for French-Language SHSM Programs (\$0.1M)

Funding is allocated in all three EDU regions to organize French-Language SHSM regional conferences. These conferences will target local needs in regards to the implementation of the five SHSM components and the Innovation, Creativity and Entrepreneurship training. A number of SHSM teachers in each school will be invited to take part in this conference.

Expansion of Experiential Learning for Adult Learners (\$0.75M)

The ministry is committed to ensuring adult learners have access to quality experiential learning opportunities that are adaptable and appropriate to their needs. In support of this commitment, funding has been dedicated to help enhance adult learners' engagement, achievement and well-being through robust, meaningful and innovative experiential learning opportunities, while also building professional capacity in this area.

Career Studies Course Update (\$0.25M)

The ministry will continue and expand the Career Studies projects to include representation from each district school board with a focus on the effective promotion

and assessment of transferable skills within four content areas: financial literacy, digital literacy, pathways planning and innovation, creativity and entrepreneurship. These projects are meant to collaboratively: inform the revision of the Career Studies curriculum; build capacity for teaching and assessing transferable skills; engage Career Studies teachers in meaningful professional development activities that support innovative practice; and facilitate the sharing of inquiries into effective Career Studies teaching strategies.

D. Indigenous Student Learning and Leadership Gatherings (\$0.3M)

This program provides leadership development opportunities to Indigenous students (from Grades 7-12) in a culturally relevant context with the aim of supporting student engagement. Funding is provided to lead boards to support the planning, implementation and evaluation of the program.

E. International Education Strategy (\$0.4M)

The purpose of funding international education projects is to provide boards with support to develop and implement innovative international education programming for students from Kindergarten to Grade 12 that focus on one or more of the four goals of *Ontario's Strategy for K-12 International Education*.

F. Ontario Focused Intervention Partnership (OFIP) (\$0.8M)

The OFIP program provides funds to selected elementary schools to assist school and board leaders, classroom educators, and other members of the school community to implement, monitor, and adjust a school improvement plan.

The key purpose of OFIP is to support the equity of outcomes for students by:

- providing support for schools where a majority of students are not meeting the provincial standards;
- strengthening and supporting instructional leadership and classroom practices for implementing precise interventions;
- building collaborative professionalism within the schools towards continuous student learning and improvement; and,
- implementing research-proven strategies to improve student learning.

G. Ontario Leadership Strategy and Mentoring for All (\$4.8M) - Theme Bundle

Collaborative efforts to integrate provincial priorities of Achievement, Equity and Well-Being are reflected in the Board Leadership Development Strategy (BLDS) for 2018-19. As an integral component of the Ontario Leadership Strategy, school boards will continue to be provided with funding to support succession planning and capacity building; evidence and research; development of effective leadership practices and personal leadership resources through mentoring and coaching; and a growth-oriented

culture of continuous improvement. The BLDS continues to support the goals of school and board improvement plans for student achievement and the board multi-year plan.

The Mentoring for All fund provides school boards with a funded opportunity to improve the quality of supports and professional learning opportunities available to mentors in a variety of roles. *Achieving Excellence: A Renewed Vision for Education* demonstrates a commitment to authentic, collaborative, continuous learning for all our learners. Powerful learning designs, like mentorship, de-privatize instruction, foster collaboration, and support educator leadership via the intentional sharing of knowledge and practice between colleagues. School boards are best positioned to offer a continuum of mentorship based on the authentic learning needs of the mentors they support.

School boards will be given the opportunity to combine funds from BLDS and Mentoring for All to provide support along a continuum of mentorship roles that could include: associate teachers, NTIP mentors, VP/P mentors, ECE mentors, business, facilities and support staff mentors and board consultants and coordinators.

H. Ontario's Equity Action Plan (\$5.5M)

The ministry will continue working across ministries and with education partners to further its goal to address systemic barriers to student achievement and well-being. Funding in 2018-19 will support key areas such as:

- ***school and classroom practices*** that reflect and respond to the diversity of students and staff so that student populations feel reflected in their learning and are not unintentionally disadvantaged, including supporting Culturally Responsive and Relevant Pedagogy pilots, seven school board-led Equity and Inclusive Education Implementation Networks and pilots that explore interventions, preventative approaches and equity centered programs to student discipline [*\$2.0 million*];
- ***data collection and analysis*** to prepare for the collection, analysis and use of student or employee identity-based data in select school boards [*\$2.5 million*]; and,
- ***leadership, governance, and human resource practices*** to enhance accountability for equity in schools and school boards including human rights supports for school boards. Starting in 2018-19, the ministry will begin a multi-year implementation of a two-faceted human rights structure to promote and ensure compliance with principles of human rights and equity and procedurally fair and locally sensitive complaints processes. First, Ministry Regional Human Rights Support Services will be established in regional offices to provide dispute resolution services, including fact-finding and mediation, for boards and complainants in human rights matters. Second, the ministry will provide funding for school boards to employ human rights professionals who will help to build and maintain an organizational culture that promotes and upholds principles of human rights and equity. For the 2018-19 school year, implementation will begin in the Thunder Bay and Toronto area regions followed by province-wide implementation in future years. Additional details will be communicated in the coming months [*\$1 million*].

I. Parents Reaching Out (PRO) Grants for School Councils (\$2.5M)

PRO Grants for School Councils is an application-based program that supports parents in identifying barriers to parent engagement in their own community and to find local solutions to involve more parents in support of student achievement, equity, and well-being.

J. Professional Development and Apprenticeship (\$5.0M)

As a result of the education sector labour negotiations, a grant of \$0.5 million is to be allocated to school boards with OSSTF education worker local bargaining units to be used on the basis of joint applications received from school boards and OSSTF locals for apprenticeship training under the Ontario College of Trades. A grant of \$4.5M to school boards with CUPE local bargaining units is to be used on the basis of joint applications received from school boards and CUPE locals for apprenticeship training under the Ontario College of Trades/and or professional development opportunities. In both cases, boards and their local bargaining units are to meet to discuss use of the funds, and to submit joint applications for approval by the Apprenticeship/Professional Development Committee. Details on the implementation of the OSSTF funds have been provided in a memo that was issued to involved school boards on March 1, 2018. Further details on the implementation of the CUPE funds will be provided in early April.

K. Professional Development – Principals’ and Vice-Principals’ Associations (\$0.4M)

As part of the 2018-2020 extension agreement with the Principals’ and Vice-Principals’ Associations, \$0.4 million will be provided for Principal and Vice-Principal professional development. These funds will be allocated in consultation with the working group referenced in Letter of Agreement #4 of the 2014-2018 Memorandum of Settlement. Further details on the implementation of these funds will be provided at a later date.

L. Re-engagement (12 & 12+) (including Indigenous Re-engagement) (\$1.3M)

Funding will be allocated to all English-language school boards in 2018-19 to provide support as they contact, mentor and monitor students who, despite being close to graduation, have left school.

Additional funding will be allocated to select boards in 2018-19 to provide support as they contact, mentor and monitor self-identified Indigenous students in grade 9-12 who have left school.

M. Strengthening Equity in Northern Boards Initiative (\$7.0M)

As announced in May 2017, the ministry will continue to fund special education supports to students in Northern Ontario school boards and authorities. This funding will be allocated through Northern Cooperatives to all northern boards and school authorities, to carry out innovative/cooperative programs and services that deliver special education supports, and collaborative service delivery objectives to meet the needs of children and youth with special education needs in Northern Ontario.

N. Student Engagement (\$1.6M)

SpeakUp Projects provide students in grade 7-12 with grants of up to \$2,500 to lead and/or participate in projects that strengthen student engagement and help make connections within the classroom, school and wider community.

O. Supporting Cannabis Legalization (\$2.8M)

The ministry is developing education materials for parents/guardians, educators and students to increase awareness and understanding about healthy decision-making and cannabis across the education sector to prevent and delay its use among students and youth. This funding will support training for system leaders (Directors of Education, supervisory officers, principals/vice principals) and the development of targeted resources for school mental health professionals, as well as resources that are linked to the Ontario curriculum.

P. Supporting French-Language Schools and Student Support Grades 7-12 (\$0.5M)

For a second year and based on an application process, targeted French-language school boards will receive funding to support the implementation of in classroom transformation learning evidence-based projects. These projects are intended to ensure the long-term success and well-being of students. The Re-engagement (12&12+) Strategy will also continue to be funded through this envelope.

Q. Supporting French-Language Special Education and the Success of Students with Special Needs (\$5.0M)

In the January 9, 2017 Memorandum of Settlement (MoS) with AEFO and Council of Trustees' Associates (CTA), the Crown undertook to invest \$10M in the French-language school system to promote the success of students with special needs. The Crown also committed to undertake a tendering process to retain the services of experts whose mandate was to collect data and information on the challenges of teaching and supporting students with special needs at the classroom level. The report submitted by the experts will inform the specific utilization of the funding, which will be decided by a central committee (the Crown in consultation with AEFO and the CTA). The central committee is currently meeting to make recommendations on the distribution and use of the funding allocation for the 2018-19 school years. Board-by-board allocations will be made available once the central committee has made its recommendations.

R. Supporting Special Education Assessments (\$20.0M)

Over the next three school years, the ministry is providing approximately \$125 million in application-based EPO funding to address current waitlists for assessments, beginning with a projected \$20 million in 2018-19. The ministry will engage in ongoing, focused conversations with school boards about their assessment and program/service needs. The focus will be on building capacity and/or developing local approaches for boards to

be better positioned to provide timely, responsive assessments, programs and services on a regular basis. Further details will be provided at a later date.

S. Teacher Learning and Leadership Program (TLLP) (\$4.4M)

This program is aimed at experienced teachers and involves self-directed learning and sharing based on ministry, board or school priorities. It enhances opportunities for experienced teachers to expand their knowledge and leadership skills, and share exemplary practices with others. Since the program began in 2007, over 1,100 projects involving the work of approximately 50,000 teachers have been approved for funding.

T. Transportation Funding for Children and Youth in Care (\$3.5M)

Funding will be allocated to school boards to provide transportation services to support children and youth in care to remain in their home school on a temporary basis, after a placement change, until a more natural transition time and when it is in their best interest.

U. Tutors in the Classroom (\$1.2M)

With this funding, boards are able to hire and train postsecondary students to tutor elementary students. The tutors support the work of classroom teachers by working with students to reinforce skills and concepts. Funding is accessed by board application and allocations will be finalized later in the year.

Next Steps

If you require further information about these initiatives, please contact your regular ministry program contacts or the office of the Assistant Deputy Minister responsible for the program.

The ministry looks forward to continuing our working partnership with the school boards.

Your commitment to achieving excellence for all our students and providing effective leadership are valued.

Together in partnership, I am confident that we can provide high quality education to our students and allow them to reach their full potential.



Bruce Rodrigues
Deputy Minister of Education

Copy: Superintendents of Business and Finance

Frank Kelly, Executive Director, Council of Ontario Directors of Education

Anna Marie Bitonti, Chair, Council of Ontario Directors of Education

Andrew Davis, Assistant Deputy Minister, Education Labour & Finance Division

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2018: B06

MEMORANDUM TO: Directors of Education
Secretary/Treasurers of School Authorities

FROM: Andrew Davis
Assistant Deputy Minister
Education Labour and Finance Division

DATE: **March 26, 2018**

SUBJECT: **Grants for Student Needs (GSN) for 2018–19**

I am writing to provide you with information about the Ministry of Education's GSN funding for 2018–19. This information is being provided in conjunction with the release of the 2018–19 school year allocations for the Education Programs – Other (EPO) transfer payments.

Investments in Ontario's publicly funded education system continue to increase, with total funding expected to increase from \$23.91 billion in 2017–18 to \$24.53 billion in 2018–19. Per-pupil funding is projected to increase in 2018–19 to \$12,300 – an increase of 9.4 per cent since 2012–13.

The ministry is pleased to announce the following new key investments for 2018–19:

- \$72 million in special education to address the current waitlist for assessments and increase services through multi-disciplinary teams and other staffing resources (\$52 million GSN, \$20 million EPO),
- \$30 million increase to the Special Incidence Portion allocation, to support students with extraordinary high needs to be successful in school,
- \$46 million to support more than 450 additional teachers who will help Grade 7 and 8 students engage in career and pathways planning that will prepare them for success in high school and beyond,
- \$10 million for demographic and growth adjustments through the Diversity in English Language Learners (DELL) (formerly Pupils in Canada) component within the Language Grant, and
- \$24.5 million, growing to \$49.5 million in 2019–20, to fund approximately 180 mental health workers in 2018–19 and 400 in 2019–20. These mental health workers will support students in secondary schools who have mental health concerns through continued and expanded mental health awareness and

education, early identification and assessment, and improved timely referrals to community mental health services. The investment will also include annual base funding of \$50,000 for all school boards with secondary schools to support province-wide research and evaluation of the new supports. Details regarding this investment are further outlined in the 2018–19 School Year Education Programs – Other (EPO) Funding B-Memo¹. See *Appendix A for board-by-board full time equivalents (FTEs) for 2018-19*.

The 2018–19 GSN also reflects funding for increased enrolment, ongoing investments to meet prior years' labour agreements, and regular updates to the GSN, informed by our recent engagement sessions and ongoing technical discussions. As in past years, a summary of these conversations will be available on the ministry's [website](#).

A. Special Education

Addressing Waitlists for Assessments and Increasing Services

The ministry is investing nearly \$300 million over the next three school years to provide school boards with funding to address current waitlists for special education assessments and increase programs and services for students with special education needs. This investment will include two parts:

- \$125 million in EPO funding to address current waitlists for assessments over the next three school years. Further details will be provided to school boards in the 2018–19 School Year Education Programs – Other (EPO) Funding B-Memo.
- Over \$170 million in funding, over the next three years, to be allocated through the Special Education Grant, which will support increased special education programs and services. This includes:
 - Funding for a multi-disciplinary team or equivalent for all boards (four additional FTEs per school board) to build board capacity and help teachers, education assistants, and other staff better understand and adapt to the unique needs of their students;
 - Funding for other staffing resources to support students with special education needs; and
 - Funding to build capacity and provide direct support to students with special education needs in recognition of the increase in demand for services. This investment will provide for a total of approximately 600 additional FTEs in the province by 2019-20. See *Appendix B for board-by-board allocations*.

Further details regarding the implementation of this investment and reporting requirements will be communicated at a later date.

Special Incidence Portion (SIP)

The ministry is investing an additional \$30 million in the next school year to support students with extraordinary high needs to be successful in school. This increase in the

¹ Includes approximately \$0.3 million in 2018-19 and \$0.6M in 2019-20 in GSN funding to support the cost of crown contributions to the benefit trusts for these staff.

SIP allocation supports the staffing costs associated with addressing the health and safety needs of these students and others in their school. The maximum SIP amount per eligible claim will increase by over 40 per cent from \$27,000 to \$38,016 and will be adjusted annually to reflect salary benchmark increases going forward.

Behaviour Expertise Amount (BEA)

Starting in 2018–19, the Behaviour Expertise Amount (BEA) Allocation will have a new component: the Applied Behaviour Analysis (ABA) Training Amount (\$3 million). This funding was previously provided to school boards through the Autism Supports and Training Allocation in EPO. As such, beginning in 2018–19 the BEA Allocation will have two components:

1. Applied Behaviour Analysis (ABA) Expertise Professionals Amount; and
2. ABA Training Amount

Facilities Amount Name Change

Beginning in 2018–19, the Facilities Amount will be renamed to Care, Treatment, Custody and Correctional Amount (“CTCC Amount”). The CTCC Amount is provided to approved district school boards to support education programs in care and/or treatment, custody and correctional facilities. Renaming this funding amount will more accurately reflect the intention of the funds, and make the naming consistent with ministry program documentation as well as district school board language.

B. Preparing for Success in High School

The ministry is committed to ensuring that all students are equipped to explore pathways to apprenticeship, college, university, the workplace, and community. Students, parents, and educators have told us that Grades 7 and 8 are crucial years where greater support is needed.

To prepare students for success in high school and beyond, the ministry is investing more than \$140 million over the next three years to support more than 450 additional teachers who will help Grade 7 and 8 students make successful academic transitions and engage in career and pathways planning.

This targeted investment in Grades 7 and 8 will support teachers to:

- prepare students for their academic transition to high school,
- engage students in experiential learning that provides exposure to role models and positive examples of a diversity of careers, and
- encourage high expectations for all students and facilitate exploration of all pathways options.

In 2018–19, the ministry is investing \$46 million through the GSN. This additional support is equivalent to a reduction of the current student-to-guidance teacher ratio in Grades 7 and 8 (approximately 1,000:1) to match the secondary ratio (approximately 385:1). *See Appendix C for board-by-board allocations.*

C. Demographic and Growth: Investments and Review

The ministry is committed to ensuring that every student has access to the supports they need to succeed in school, regardless of their socioeconomic status.

Over the last decade, a number of communities throughout Ontario have experienced rapid change and growth. The ministry has heard, through our engagements, that there is a need for the GSN grants to be updated in order to respond to changing demographics and growth within school boards. The ministry will start this process with an update to the Diversity in English Language Learners (DELL) component within the Language Grant, and will begin examining the Learning Opportunities Grant (LOG) Demographic Allocation moving forward.

Diversity in English Language Learners (DELL)

In 2018–19, the ministry will invest \$10 million in the Diversity in English Language Learners (DELL), formerly known as Pupils in Canada (PIC) component of the English as a Second Language/English Literacy Development (ESL/ELD) Allocation in the Language Grant.

The DELL component uses census data as a proxy measure of ESL/ELD need for pupils who are not recent immigrants, but whose language spoken most often at home is neither English nor French. This investment, along with an updated distribution using 2016 Census data, will better support enrolment growth in ESL/ELD programs.

Learning Opportunities Grant (LOG) Demographic Allocation

The Learning Opportunities Grant provides funding for a range of programs to help students who are at greater risk of not achieving academic success. Funding through the largest component, the Demographic Allocation, is calculated based on weighted social and economic indicators and enrolment. In addition, it relies on 2006 Census data and socio-economic indicators.

Moving forward, the ministry will commission an external review of the methodology for the Demographic Allocation and board use of the funding. This review will provide recommendations to the ministry on an update to the formula and accountability structure based on policy research, practice and newly available census data.

D. Continued Implementation of 2017–19 Central Labour Agreements

Salary Increases

The ministry will provide a 1.5 per cent salary benchmark increase for staff² in 2018–19, to reflect the 2017–19 central labour agreements.

² Does not include Directors of Education. Funding for Principal and Vice-Principal salary increases are provided separately. More details will be available in the Technical Paper.

Community Use of Schools (CUS)

The 2017–19 central labour agreements with CUPE, EWAO and OSSTF-EW provided direction on the use of a 3 per cent increase in the amount for CUS made in the 2017–18 GSN. This funding and its requirements will continue in 2018–19.

Class Size Investments

In 2017–18, the government made a commitment to invest in reducing large classes in full-day kindergarten and Grades 4 to 8 to advance student achievement and well-being.

Full-Day Kindergarten (FDK)

In 2017–18, the government implemented a class size cap that will prevent large FDK classes. Beginning in 2018–19, the cap is being reduced to a maximum class size of 29 students for FDK classes. Up to 10 per cent of FDK classes can reach up to 32 students if they meet one of the following exceptions:

- If purpose-built accommodation is not available (this exception will sunset after 2021–22);
- If a program will be negatively affected (e.g., French Immersion); or
- Where compliance will increase FDK/Grade 1 combined classes.

Boards will still be required to maintain a board-wide average class size of 26.0 or lower. Other aspects of relevant regulations remain unchanged.

To support boards in meeting smaller FDK class sizes, the funded average class size will be reduced to 25.57 in 2018–19 (projected to be approximately \$11 million) to provide additional funding to help boards manage the costs associated with meeting the caps.

Grades 4-8 Class Size

As announced last year, any board with a regulated Grade 4-8 class size average maximum exceeding 24.5 will be required to reduce its Grade 4-8 maximum class size average to 24.5 within five years. The class size regulation outlines the specific maximum board-wide class size average for these boards in 2018–19. In 2018–19, the funded average class size will be reduced to 23.84 (projected to be approximately \$38 million).

Employee Health, Life & Dental Benefits Transformation

Increases to funding for the provincial benefits trusts to reflect the cost of providing benefits consistent with the central labour agreements and discussions will be included in updated table amounts for 2018–19. These table amounts will also reflect projected staffing in boards for 2018–19, as well as updates to the underlying board shares of the benefit costs derived from the updated 2014–15 benefit costs for school boards.

Local Priorities Funding

The ministry established a Local Priorities Fund (LPF) in 2017–18 to address a range of local priorities and needs. This may include more special education staffing to support children in need, “at-risk” students and adult education. In 2018–19, the LPF amount will be \$235 million. The LPF requirements will continue in 2018–19, as per the extension agreements.

E. School Board Administration and Governance Grant

Program Leadership Allocation (PLA)

New for 2018–19, the Program Leadership Allocation (PLA) is being introduced within the School Board Administration and Governance Grant. This allocation is comprised of six lead positions that were previously funded through other allocations within the GSN and through EPO. These leads are responsible for the organization, administration, management, and implementation of supports to achieve the goals within their respective program areas:

- Mental Health Leaders
- Technology Enabled Learning and Teaching (TELT) Contacts
- Indigenous Education Leads
- Student Success Leads
- School Effectiveness Leads
- Early Years Leads (*Formerly in EPO*)

Each board’s PLA funding is based on salary and benefits benchmark calculations and a percentage of that calculation for travel and professional development (PD):

Component	Description
Salary & Benefits	Amount equal to: 1.75 times the Professional/ Paraprofessional benchmark + 1.0 times the Information Technology benchmark + 3.5 times the Supervisory Officer (SO) benchmark + up to an additional 4.0 times the SO benchmark (based on board’s ADE)
Travel & PD	10.44% of the salary and benefits component

The PLA will be enveloped, in that the funding must be spent globally on leads’ salary, benefits, travel and PD.

Boards will have the flexibility within the envelope to address on-the-ground needs related to lead salary, benefits, travel and PD while adhering to individual requirements for each lead to best support key outcomes for these positions. The requirements* are as follows:

1. minimum hiring requirements (i.e., whether the position must equal one FTE);
2. expectations related to job splitting (i.e., whether the position can be split between one or more individuals.); and
3. dedication (i.e., whether the lead can hold any other portfolio within the board.)

The PLA is not included in the school board administration and governance enveloping provision (i.e., the board administration spending maximum excludes the Internal Audit Allocation and the new PLA.)

School boards will be funded the lesser of: a) the allocation calculated and b) the total amount spent on PLA eligible expenditures.

The ministry intends to continue to explore other leads that could be added to the PLA in the future (e.g., Community Use of Schools – Outreach Coordinators).

**See Appendix D for more details on specific lead hiring requirements and FTE allocations.*

Trustee Honoraria

In fall 2017, the ministry engaged with education partners on five governance topics, including trustee honoraria. Education partners raised a number of concerns related to the level of funding and equity among the honoraria of Ontario's school boards.

The ministry will be engaging with the Trustees' Associations to develop more detailed proposals for revising the trustee honorarium formula. In the interim, for 2018–19, the ministry is increasing the base amount for the trustees' honorarium with an additional \$400 in funding. The new limit will now be \$6,300.

Further details on the honoraria will be released in upcoming memos.

F. Capital

School Condition Improvement

The ministry is continuing its historic investment in school renewal by investing a total of \$1.4 billion in the 2018–19 school year with \$1 billion allocated towards the School Condition Improvement (SCI) program. This brings total funding committed under SCI, since 2015–16, to \$4 billion. These investments will result in critical improvements to key building components that ensure student safety and improve energy efficiency, like roofing, HVAC, electrical and plumbing systems. It will also significantly improve more visible elements of schools that impact students' well-being and public confidence, including flooring, walls, ceilings, playing fields and more.

SCI is proportionally allocated to each board's open and operating schools' renewal needs. Allocations for 2018–19 have been updated to reflect 2016 assessments, as posted on the Ministry of Education's website in October 2017.

Greenhouse Gas Reduction Fund

Ontario has taken major steps to reduce its greenhouse gas emissions and is a leader in North America in the fight against climate change. In June 2016, Ontario released its Climate Change Action Plan to outline key actions the government will take to fight climate change, reduce greenhouse gas pollution and transition to a low-carbon economy.

As part of Ontario's Climate Change Action Plan, the ministry launched the Greenhouse Gas Reduction Fund in April 2017 under the School Condition Improvement program. This initiative aims to reduce greenhouse gas emissions from facilities in the education sector.

The ministry is pleased to announce the continuation of this program for the 2018–19 school year. Another \$100 million will be made available to school boards for eligible expenditures incurred between April 1, 2018 and March 31, 2019. School boards are reminded that this funding cannot be carried over beyond March 31, 2019.

The continuation of this initiative will support boards in accelerating the replacement of inefficient equipment and encourage school boards to adopt energy-efficient technologies. Additional details will be provided in a future memo.

School Renewal Allocation

Each year, the ministry provides school boards with over \$300 million in School Renewal Allocation funding to address health and safety issues, to replace and repair building components, improve the energy efficiency of schools and improve accessibility.

Between 2015–16 and 2018–19, an additional \$40 million has been committed each year to this funding stream. For 2018–19, this additional \$40 million has been absorbed into the benchmark.

Capital Planning Capacity Funding

The Capital Planning Capacity (CPC) program, which was originally announced in memorandum 2015: B03 to help school boards undertake a range of capital planning-related activities, will continue into the 2018–19 school year. For 2018–19, board funding levels have been maintained from the previous school year.

Joint-Use Funding Supports

As part of the Plan to Strengthen Rural and Northern Education, the ministry announced additional funding supports to encourage school boards to share space. These funding supports are continuing into the 2018–19 school year and include:

- **Seed Funding:** The Joint-Use Schools Seed Funding program is available to school boards, on a first-come, first-served basis. Successful applicants will receive \$20,000 in operating funding, per school board, to support the development of a joint-use school project, whether the project involves a new build or a retrofit of underutilized space. The ministry will accept applications any time during the school year. This funding program is being doubled from \$200,000 to \$400,000 to facilitate the development of more joint-use projects.
- **Project Managers:** Providing \$1 million in funding to support one project manager per ministry approved joint-use school project. Of this amount, boards may request \$100,000 from the ministry to fund a project manager, who could be tasked with coordinating all aspects of the planning, design and construction of the joint-use school on behalf of all participating boards.

- **Project Funding:** Allowing a greater portion of ministry capital funding to be allocated to joint-use school projects. Rather than fund each joint-use school based on its combined student population, this incentive treats each school board's student population as two or more distinct school facilities and thereby increases the total capital funding allocation generated according to ministry capital construction benchmarks.

Early Years Capital

The ministry is committed to creating access to child care for 100,000 more children aged 0 to 4 over the next five years. To support this commitment, the government is investing up to \$1.6 billion in capital funding to support the creation of licensed child care spaces in schools and community-based locations. Under the ministry's Schools First policy, schools are encouraged as the preferred location for early years' programs and services, where possible.

The Early Years Capital Program (EYCP) is the primary means for capital funding requests associated with school-based child care and EarlyON child and family centres. These capital projects address school boards' and Consolidated Municipal Service Managers'/District Social Services Administration Boards' early years accommodation needs. Early years capital requests associated with a larger school construction project can continue to be submitted under the Capital Priorities (CP) Program.

In December 2017, the ministry announced over \$240 million to support 200 child care and EarlyON child and family centre projects, to create over 8,400 new child care spaces. In total, the ministry has now allocated capital funding for more than 15,000 school-based child care spaces since 2017. Capital funding support is aligned with Ontario's Renewed Early Years and Child Care Policy Framework which provides a new vision for child care and the early years that focuses on the key pillars of access, responsiveness, affordability, and quality.

The ministry anticipates future opportunities for EYCP and CP early years funding requests later in 2018.

G. Qualifications and Experience Grant

New Teacher Induction Program (NTIP)

The ministry will be making an investment of \$0.75 million in the NTIP. This increase will enable boards to provide support for new teachers over a longer period of time and will enable greater flexibility to accommodate local hiring realities.

Beginning in 2018–19, the NTIP will be expanded, requiring school boards to provide the NTIP to newly-hired long-term occasional teachers (LTOs) in positions of 80 days or more. In addition, boards will also be given the flexibility to use the NTIP Allocation to support any new teacher who falls outside of the NTIP required definition within their first five (5) years of employment.

H. Indigenous Education

Board Action Plan (BAP)

The ministry is enveloping the BAP funding. Boards are required to use this funding exclusively to support the implementation of programs and initiatives aligned to the 16 strategies and actions identified in the *Ontario First Nation, Métis, and Inuit Education Policy Framework*. This amount is projected to be \$6 million in 2018–19.

Indigenous Education Lead

The Indigenous Education Lead, previously in the Per-Pupil Amount (PPA) portion of the Indigenous Education Grant, has been consolidated into the PLA. A portion of the lead funding previously in the PPA is now found in the PLA to support the Indigenous Education Lead. Further details can be found in the School Board Administration and Governance Grant section above (Section E).

Indigenous Studies

Funding for Indigenous Studies is intended to cover the incremental costs for boards to provide these classes. The ministry will be engaging on options for changes to the Indigenous Studies funding formula for the 2019–20 school year, including where the course is being offered on a compulsory basis.

I. Literacy and Math outside the School Day Allocation

Starting in 2018–19, adult students enrolled in Continuing Education classes/courses will now be eligible for funding in remedial literacy and/or math courses/classes.

These students, as well as adult day school and fully high-credit pupils enrolled in day school, will now be funded through the Continuing Education and Other Programs Grant (i.e., at the ADE rate for Adult Day and High-Credit Secondary Day School, Summer School students, and Continuing Education students).

J. Keeping up with Costs

The GSN has been updated to assist school boards in managing increases to transportation, electricity, and other non-staff school operations costs. In 2018–19, the projected cost is \$46 million:

- The cost update adjustment in the Student Transportation Grant will be increased from 2 per cent to 4 per cent to help boards manage increased costs. As in previous years, this update will be netted against a school board's transportation surplus. In addition, funding adjustments due to fuel price changes will continue to be triggered by the fuel escalation and de-escalation mechanism throughout the school year.
- The ministry will also provide a 2 per cent cost benchmark update to the non-staff portion of the School Operations Allocation benchmark to assist boards in

managing the increases in commodity prices (electricity, natural gas, facility insurance, and other costs).

Education Worker Cost Adjustment

The base Cost Adjustment Allocation for education workers has been updated for 2018–19 and reflects a \$7 million increase over the 2017–18 amount.

K. Ongoing Implementation and Other Changes

In 2018–19, the ministry will continue to implement important GSN reforms that began in prior years. A list of these reforms as well as other in-year changes can be found below. For more information on any of these and additional items, please refer to the Technical Paper, available soon on the ministry's website.

School Foundation Grant Definition Change Funding Impacts

This is the second year of a four-year phase-in of the funding impacts of the new School Foundation Grant (SFG) definition of a school based on campus, introduced in 2017–18. A campus is defined as property or properties which are owned, leased or rented by a school board, that are linked by a contiguous property line. This change includes funding impacts on other grants in the GSN that are based on the SFG definition of a school.

Rural and Northern Education Fund (RNEF)

In 2017–18, the ministry invested an additional \$20 million through the new RNEF as an enhancement to the GSN to further improve education for students in rural and northern communities.

This funding will be ongoing, and in 2018–19 the benchmark amounts will be adjusted to reflect impacts from the negotiated salary benchmark increases.

The list of schools eligible for RNEF funding is being updated and will be posted on the ministry's website.

2011 Census and National Household Survey (NHS)

This marks the final year of the three-year phase-in of 2011 Census and NHS data to the Indigenous Education Grant and Language Grant.

Retirement Gratuities

In 2018–19, the ministry will continue to implement a reduction in the benefits funding benchmarks as part of the phase-out of retirement gratuities, which began in 2012–13. As in previous years, the phase-out will be implemented through a reduction to all benefits benchmarks in the GSN. This 0.167 per cent reduction will be applied to the benefits benchmarks in the Foundation Grants with equivalent adjustments to the benchmarks in the Special Purpose Grants to reflect the reduction in benefits funding.

For school boards that provided one-time payouts of retirement gratuities in 2015–16, funding will continue to be recovered from boards in 2018–19. This recovery, which began in 2016–17, will be over the number of years' equivalent to the estimated average remaining service life of school board employees eligible for retirement gratuities as at August 31, 2012. The funding recovered from boards will be to the extent that boards received funding from the ministry and to the extent that boards reported a one-time gain in the early payout of retirement gratuities in 2015–16.

School Bus Safety Training

To support the sector in addressing the Auditor General's recommendations for standardized school bus safety training, the ministry is providing up to \$1.7 million in total to school boards that access standardized on-site school bus rider safety training through a contract established by the Ontario Education Collaborative Marketplace (OECM). Funding will be based on the actual number of training sessions conducted as reported through financial reports and will cover up to 50 per cent of elementary students in each school board.

New Vision for Student Transportation

The new vision for student transportation engagement is currently underway and is expected to result in short and long-term recommendations for the ministry to consider in order to achieve our student transportation goals both now and into the future. It will also provide guidance for future policy development on issues such as funding and accountability. Additional details on student transportation will be provided in an upcoming memo.

Cash Management Strategy

As of September 1, 2018, the ministry is implementing a cash management strategy to help reduce the Province's borrowing costs. Under the new policy, school boards' monthly cash flows will be refined based on each board's cash requirement. School boards' funding entitlements will remain the same under the GSN regulation; however some boards will record a receivable from the Province for the difference between their funding entitlement and the actual cash flow received. An SB memo with further details will be released in the coming weeks.

Auditor General of Ontario

The ministry is also reviewing the findings from the Office of the Auditor General of Ontario's report on the ministry's funding and oversight of school boards to see how to best respond to the recommendations.

L. School Authorities

As in previous years, funding for school authorities will be adjusted in 2018–19, as appropriate, to reflect changes in funding to district school boards. The ministry will provide further information concerning funding in 2018–19 for school authorities in the near future.

M. Reporting

Dates for Submission of Financial Reports

The ministry has established the following dates for submission of financial reports:

Date	Description
June 29, 2018	Board Estimates for 2018–19
November 15, 2018	Board Financial Statements for 2017–18
November 23, 2018	Board Enrolment Projections for 2019–20 to 2022–23
December 14, 2018	Board Revised Estimates for 2018–19
May 15, 2019	Board Financial Report for September 1, 2018, to March 31, 2019

The ministry expects that Estimates forms will be available in EFIS by April 27, 2018.

N. Information Resources

If you require further information, please contact:

Subject	Contact	Telephone and email
2017–19 Labour Agreements	Lynda Coulter	(416) 212-4460 lynda.coulter@ontario.ca
Benefits Transformation	Romina Di Pasquale	(416) 325-2057 romina.diPasquale@ontario.ca
Capital Policies and Rural Education	Colleen Hogan	(416) 325-1705 colleen.hogan@ontario.ca
Capital Priorities and Project Accountability	Paul Bloye	(416) 325-8589 paul.bloye@ontario.ca
Financial Accountability and Reporting Requirements	Med Ahmadoun	(416) 326-0201 med.ahmadoun@ontario.ca
Indigenous Education	Taunya Paquette	(416) 314-5739 taunya.paquette@ontario.ca
Operating Funding	Doreen Lamarche	(416) 326-0999 doreen.lamarche@ontario.ca
Special Education	Julie Williams	(416) 325-2889 julie.williams@ontario.ca
Student Transportation	Cheri Hayward	(416) 327-7503 cheri.hayward@ontario.ca

General questions regarding the 2018–19 GSN release can be emailed to:
EDULABFINANCE@ontario.ca.

GSN Release Materials

All other GSN release documents will be available in the coming weeks, including: the 2018–19 Education Funding Technical Paper; GSN projections for the 2018–19 School Year, 2018–19 Guide to the GSN and the 2018–19 Education Funding Discussion Summary. Further communication will be sent to inform of the documents' availability.

NOTICE:

Some of the elements and proposals set out in this memo can only take effect if certain regulations are made by the Minister of Education or Lieutenant Governor in Council under the *Education Act*. Such regulations have not yet been made. Therefore, the content of this memo should be considered to be subject to such regulations, if and when made.

Conclusion

The ministry looks forward to continuing to work with school boards throughout the 2018–19 school year to support a full continuum of learning for students, from birth to adulthood. This includes maintaining our focus on promoting student achievement, while embedding equity, inclusion and well-being into all of our work. We believe that the funding outlined in this document will be instrumental in ensuring that every student has the support they need to succeed inside and outside of the classroom.

As always, we are grateful for the feedback we received from school boards and ask that you continue to share your questions and concerns with us. It is through these conversations and our ongoing collaboration that we will continue to build a stronger publicly funded education system in Ontario.

Original signed by

Andrew Davis
Assistant Deputy Minister
Education Labour and Finance Division

cc: School business officials

Appendix A
Board-by-Board Mental Health Worker FTE

Index	DSB #	District School Board Name	Estimated Funded FTE
1	1	DSB Ontario North East	2.0
2	2	Algoma DSB	1.9
3	3	Rainbow DSB	2.1
4	4	Near North DSB	1.8
5	5.1	Keewatin-Patricia DSB	1.6
6	5.2	Rainy River DSB	1.3
7	6.1	Lakehead DSB	1.6
8	6.2	Superior-Greenstone DSB	1.4
9	7	Bluewater DSB	2.0
10	8	Avon Maitland DSB	2.0
11	9	Greater Essex County DSB	3.0
12	10	Lambton Kent DSB	2.4
13	11	Thames Valley DSB	4.8
14	12	Toronto DSB	14.3
15	13	Durham DSB	4.3
16	14	Kawartha Pine Ridge DSB	2.8
17	15	Trillium Lakelands DSB	2.4
18	16	York Region DSB	6.6
19	17	Simcoe County DSB	4.1
20	18	Upper Grand DSB	2.6
21	19	Peel DSB	6.9
22	20	Halton DSB	3.8
23	21	Hamilton-Wentworth DSB	3.5
24	22	DSB of Niagara	3.2

25	23	Grand Erie DSB	2.6
26	24	Waterloo Region DSB	3.8
27	25	Ottawa-Carleton DSB	5.0
28	26	Upper Canada DSB	3.5
29	27	Limestone DSB	2.5
30	28	Renfrew County DSB	1.8
31	29	Hastings and Prince Edward DSB	1.9
32	30.1	Northeastern Catholic DSB	1.1
33	30.2	Nipissing-Parry Sound Catholic DSB	1.1
34	31	Huron-Superior Catholic DSB	1.2
35	32	Sudbury Catholic DSB	1.5
36	33.1	Northwest Catholic DSB	-
37	33.2	Kenora Catholic DSB	1.1
38	34.1	Thunder Bay Catholic DSB	1.3
39	34.2	Superior North Catholic DSB	-
40	35	Bruce-Grey Catholic DSB	1.3
41	36	Huron Perth Catholic DSB	1.3
42	37	Windsor-Essex Catholic DSB	2.2
43	38	London District Catholic School Board	2.2
44	39	St. Clair Catholic DSB	1.3
45	40	Toronto Catholic DSB	6.3
46	41	Peterborough V N C Catholic DSB	1.8
47	42	York Catholic DSB	3.6
48	43	Dufferin-Peel Catholic DSB	5.3
49	44	Simcoe Muskoka Catholic DSB	2.2
50	45	Durham Catholic DSB	2.1
51	46	Halton Catholic DSB	2.6

52	47	Hamilton-Wentworth Catholic DSB	2.3
53	48	Wellington Catholic DSB	1.5
54	49	Waterloo Catholic DSB	1.8
55	50	Niagara Catholic DSB	2.2
56	51	Brant Haldimand Norfolk Catholic DSB	1.5
57	52	Catholic DSB of Eastern Ontario	2.1
58	53	Ottawa Catholic DSB	3.4
59	54	Renfrew County Catholic DSB	1.2
60	55	Algonquin and Lakeshore Catholic DSB	1.9
61	56	CSD du Nord-Est de l'Ontario	1.6
62	57	CSP du Grand Nord de l'Ontario	1.7
63	58	CS Viamonde	2.2
64	59	CÉP de l'Est de l'Ontario	2.2
65	60.1	CSD catholique des Grandes Rivières	1.9
66	60.2	CSD catholique Franco-Nord	1.3
67	61	CSD catholique du Nouvel-Ontario	1.8
68	62	CSD catholique des Aurores boréales	1.1
69	63	CS catholique Providence	1.8
70	64	CS catholique MonAvenir	2.2
71	65	CSD catholique de l'Est ontarien	1.7
72	66	CSD catholique du Centre-Est de l'Ontario	2.5
		Total for 72 District School Boards	182.9
		School Authorities Total	1.1
		Total with School Authorities	184.0

Appendix B

Board-by-Board FTE and Amounts for Multi-Disciplinary Supports

Index	DSB #	District School Board Name	Estimated Funded FTE	Projected Additional GSN Funding
1	1	DSB Ontario North East	5.3	\$ 529,401
2	2	Algoma DSB	5.6	\$ 562,105
3	3	Rainbow DSB	5.9	\$ 593,878
4	4	Near North DSB	5.5	\$ 554,793
5	5.1	Keewatin-Patricia DSB	5.3	\$ 527,607
6	5.2	Rainy River DSB	4.5	\$ 452,359
7	6.1	Lakehead DSB	5.4	\$ 540,417
8	6.2	Superior-Greenstone DSB	4.3	\$ 428,486
9	7	Bluewater DSB	6.1	\$ 610,594
10	8	Avon Maitland DSB	5.9	\$ 591,319
11	9	Greater Essex County DSB	8.0	\$ 797,428
12	10	Lambton Kent DSB	6.6	\$ 661,620
13	11	Thames Valley DSB	12.8	\$ 1,279,061
14	12	Toronto DSB	29.3	\$ 2,925,997
15	13	Durham DSB	11.4	\$ 1,142,025
16	14	Kawartha Pine Ridge DSB	7.7	\$ 770,162
17	15	Trillium Lakelands DSB	6.2	\$ 618,832
18	16	York Region DSB	16.2	\$ 1,622,129
19	17	Simcoe County DSB	10.2	\$ 1,017,568
20	18	Upper Grand DSB	7.7	\$ 767,416
21	19	Peel DSB	19.2	\$ 1,925,811
22	20	Halton DSB	10.2	\$ 1,025,726
23	21	Hamilton-Wentworth DSB	9.7	\$ 969,366

24	22	DSB of Niagara	8.3	\$	825,233
25	23	Grand Erie DSB	7.2	\$	718,141
26	24	Waterloo Region DSB	10.8	\$	1,081,101
27	25	Ottawa-Carleton DSB	11.6	\$	1,164,110
28	26	Upper Canada DSB	7.5	\$	750,251
29	27	Limestone DSB	6.4	\$	636,907
30	28	Renfrew County DSB	5.4	\$	538,499
31	29	Hastings and Prince Edward DSB	6.0	\$	601,298
32	30.1	Northeastern Catholic DSB	4.4	\$	443,977
33	30.2	Nipissing-Parry Sound Catholic DSB	4.4	\$	442,537
34	31	Huron-Superior Catholic DSB	4.9	\$	486,590
35	32	Sudbury Catholic DSB	4.9	\$	494,520
36	33.1	Northwest Catholic DSB	4.3	\$	430,696
37	33.2	Kenora Catholic DSB	4.3	\$	429,454
38	34.1	Thunder Bay Catholic DSB	5.2	\$	517,928
39	34.2	Superior North Catholic DSB	4.1	\$	414,636
40	35	Bruce-Grey Catholic DSB	4.7	\$	469,920
41	36	Huron Perth Catholic DSB	4.7	\$	468,579
42	37	Windsor-Essex Catholic DSB	6.2	\$	619,120
43	38	London District Catholic School Board	6.2	\$	620,471
44	39	St. Clair Catholic DSB	5.2	\$	519,893
45	40	Toronto Catholic DSB	13.6	\$	1,366,193
46	41	Peterborough V N C Catholic DSB	5.8	\$	574,043
47	42	York Catholic DSB	9.2	\$	913,488
48	43	Dufferin-Peel Catholic DSB	12.0	\$	1,198,551
49	44	Simcoe Muskoka Catholic DSB	6.6	\$	663,177
50	45	Durham Catholic DSB	6.1	\$	613,984

51	46	Halton Catholic DSB	7.3	\$	732,431
52	47	Hamilton-Wentworth Catholic DSB	7.2	\$	721,578
53	48	Wellington Catholic DSB	5.0	\$	497,807
54	49	Waterloo Catholic DSB	6.4	\$	637,964
55	50	Niagara Catholic DSB	6.3	\$	633,012
56	51	Brant Haldimand Norfolk Catholic DSB	5.3	\$	533,647
57	52	Catholic DSB of Eastern Ontario	5.8	\$	575,975
58	53	Ottawa Catholic DSB	8.4	\$	840,843
59	54	Renfrew County Catholic DSB	4.8	\$	477,619
60	55	Algonquin and Lakeshore Catholic DSB	5.6	\$	554,421
61	56	CSD du Nord-Est de l'Ontario	4.6	\$	461,923
62	57	CSP du Grand Nord de l'Ontario	4.6	\$	462,773
63	58	CS Viamonde	5.7	\$	569,960
64	59	CÉP de l'Est de l'Ontario	6.1	\$	607,677
65	60.1	CSD catholique des Grandes Rivières	5.3	\$	525,950
66	60.2	CSD catholique Franco-Nord	4.6	\$	461,986
67	61	CSD catholique du Nouvel-Ontario	5.3	\$	532,959
68	62	CSD catholique des Aurores boréales	4.3	\$	432,299
69	63	CS catholique Providence	5.5	\$	551,065
70	64	CS catholique MonAvenir	6.1	\$	611,633
71	65	CSD catholique de l'Est ontarien	5.6	\$	556,882
72	66	CSD catholique du Centre-Est de l'Ontario	6.9	\$	689,712
		Total for 72 District School Boards	515.8	\$	51,587,513
		School Authorities Total	4.2	\$	420,205
		Total with School Authorities	520.0	\$	52,007,718

Appendix C
Board-by-Board FTE and Amounts for Preparing
for Success in High School

Index	DSB #	District School Board Name	Estimated Funded FTE	Projected Additional GSN Funding
1	1	DSB Ontario North East	1.2	\$ 126,555
2	2	Algoma DSB	1.9	\$ 196,749
3	3	Rainbow DSB	2.7	\$ 280,566
4	4	Near North DSB	2.2	\$ 219,579
5	5.1	Keewatin-Patricia DSB	1.3	\$ 118,948
6	5.2	Rainy River DSB	0.5	\$ 53,255
7	6.1	Lakehead DSB	1.9	\$ 188,216
8	6.2	Superior-Greenstone DSB	0.2	\$ 21,930
9	7	Bluewater DSB	3.7	\$ 352,635
10	8	Avon Maitland DSB	3.5	\$ 365,446
11	9	Greater Essex County DSB	8.3	\$ 858,075
12	10	Lambton Kent DSB	4.8	\$ 481,458
13	11	Thames Valley DSB	17.7	\$ 1,725,340
14	12	Toronto DSB	50.7	\$ 5,147,509
15	13	Durham DSB	17.1	\$ 1,686,683
16	14	Kawartha Pine Ridge DSB	6.9	\$ 685,854
17	15	Trillium Lakelands DSB	3.5	\$ 354,752
18	16	York Region DSB	30.3	\$ 3,060,977
19	17	Simcoe County DSB	12.0	\$ 1,204,194
20	18	Upper Grand DSB	7.5	\$ 744,225
21	19	Peel DSB	40.1	\$ 4,058,191
22	20	Halton DSB	16.9	\$ 1,649,324
23	21	Hamilton-Wentworth DSB		\$ 1,137,658

			11.4	
24	22	DSB of Niagara	8.3	\$ 845,946
25	23	Grand Erie DSB	5.7	\$ 565,475
26	24	Waterloo Region DSB	14.8	\$ 1,479,017
27	25	Ottawa-Carleton DSB	15.7	\$ 1,552,722
28	26	Upper Canada DSB	5.8	\$ 583,277
29	27	Limestone DSB	4.4	\$ 447,449
30	28	Renfrew County DSB	1.7	\$ 173,055
31	29	Hastings and Prince Edward DSB	3.5	\$ 352,191
32	30.1	Northeastern Catholic DSB	0.7	\$ 69,017
33	30.2	Nipissing-Parry Sound Catholic DSB	0.6	\$ 59,649
34	31	Huron-Superior Catholic DSB	0.9	\$ 94,638
35	32	Sudbury Catholic DSB	1.4	\$ 139,927
36	33.1	Northwest Catholic DSB	0.4	\$ 36,609
37	33.2	Kenora Catholic DSB	0.4	\$ 38,624
38	34.1	Thunder Bay Catholic DSB	1.7	\$ 173,959
39	34.2	Superior North Catholic DSB	0.2	\$ 20,796
40	35	Bruce-Grey Catholic DSB	0.8	\$ 77,405
41	36	Huron Perth Catholic DSB	0.9	\$ 87,829
42	37	Windsor-Essex Catholic DSB	5.2	\$ 545,728
43	38	London District Catholic School Board	4.3	\$ 427,283
44	39	St. Clair Catholic DSB	2.1	\$ 200,927
45	40	Toronto Catholic DSB	21.2	\$ 2,132,707
46	41	Peterborough V N C Catholic DSB	3.4	\$ 338,201
47	42	York Catholic DSB	12.8	\$ 1,314,399
48	43	Dufferin-Peel Catholic DSB	17.7	\$ 1,790,034
49	44	Simcoe Muskoka Catholic DSB	4.9	\$ 503,297
50	45	Durham Catholic DSB		\$ 507,446

			5.0		
51	46	Halton Catholic DSB	7.1	\$	703,069
52	47	Hamilton-Wentworth Catholic DSB	6.0	\$	617,791
53	48	Wellington Catholic DSB	2.0	\$	207,085
54	49	Waterloo Catholic DSB	5.4	\$	539,089
55	50	Niagara Catholic DSB	5.1	\$	545,268
56	51	Brant Haldimand Norfolk Catholic DSB	2.2	\$	221,737
57	52	Catholic DSB of Eastern Ontario	3.2	\$	334,078
58	53	Ottawa Catholic DSB	10.2	\$	1,002,457
59	54	Renfrew County Catholic DSB	1.0	\$	103,639
60	55	Algonquin and Lakeshore Catholic DSB	2.4	\$	229,495
61	56	CSD du Nord-Est de l'Ontario	0.3	\$	30,032
62	57	CSP du Grand Nord de l'Ontario	0.6	\$	60,093
63	58	CS Viamonde	2.0	\$	186,463
64	59	CÉP de l'Est de l'Ontario	3.3	\$	302,108
65	60.1	CSD catholique des Grandes Rivières	1.3	\$	126,883
66	60.2	CSD catholique Franco-Nord	0.6	\$	59,872
67	61	CSD catholique du Nouvel-Ontario	1.5	\$	145,765
68	62	CSD catholique des Aurores boréales	0.2	\$	20,110
69	63	CS catholique Providence	2.5	\$	245,543
70	64	CS catholique MonAvenir	3.8	\$	354,460
71	65	CSD catholique de l'Est ontarien	2.1	\$	209,968
72	66	CSD catholique du Centre-Est de l'Ontario	5.2	\$	489,637
		Total for 72 District School Boards	458.41	\$	46,010,367
		School Authorities Total	0.2	\$	21,722
		Total with School Authorities	458.65	\$	46,032,089

Appendix D Program Leadership Allocation

New for 2018–19, the Program Leadership Allocation (PLA) has been introduced within the School Board Administration and Governance Grant. This allocation is comprised of six lead positions that were previously funded through other allocations within the GSN and through EPO. The table below outlines the funded benchmarks and transfer details for the leads which are now part of the PLA.

FUNDED BENCHMARKS AND TRANSFER DETAILS

Lead	Funded Salary & Benefits Benchmark	Previously Funded GSN or EPO										
Mental Health Leaders	1.75 x Professional / Para-professional benchmark	Mental Health Leaders Allocation within Learning Opportunities Grant (LOG)										
TELT Contacts	1.0 Information Technology benchmark	TELT Contacts Allocation within SBAGG										
Indigenous Education Lead	0.5 Supervisory Officer (SO) benchmark	0.5 SO salary and benefits benchmark within the IEG's PPA Allocation										
School Effectiveness Leads	1.0 x SO benchmark + additional 1.0 x SO benchmark if board's elementary ADE > 85,000	School Effectiveness Framework Allocation within LOG										
Student Success Leads	1.0 x SO benchmark	Co-ordinator component of the Student Success, Grade 7 to 12 Allocation within LOG										
Early Years Leads	1.0 x SO benchmark + additional amount based on board's total ADE:	Transfer from the Early Years Leads Program EPO										
	<table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: center;">Board ADE</th> <th style="text-align: center;">Additional Amount</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">72,000 < ADE ≤ 115,000</td> <td style="text-align: center;">0.5 x SO benchmark</td> </tr> <tr> <td style="text-align: center;">115,000 < ADE ≤ 150,000</td> <td style="text-align: center;">1.0 x SO benchmark</td> </tr> <tr> <td style="text-align: center;">150,000 < ADE ≤ 200,000</td> <td style="text-align: center;">2.0 x SO benchmark</td> </tr> <tr> <td style="text-align: center;">ADE > 200,000</td> <td style="text-align: center;">3.0 x SO benchmark</td> </tr> </tbody> </table>		Board ADE	Additional Amount	72,000 < ADE ≤ 115,000	0.5 x SO benchmark	115,000 < ADE ≤ 150,000	1.0 x SO benchmark	150,000 < ADE ≤ 200,000	2.0 x SO benchmark	ADE > 200,000	3.0 x SO benchmark
	Board ADE		Additional Amount									
	72,000 < ADE ≤ 115,000		0.5 x SO benchmark									
	115,000 < ADE ≤ 150,000		1.0 x SO benchmark									
	150,000 < ADE ≤ 200,000		2.0 x SO benchmark									
ADE > 200,000	3.0 x SO benchmark											

MINIMUM HIRING REQUIREMENTS

Mental Health Leaders

Mental Health Leaders plays a vital role in meeting the government's commitment under the Mental Health and Addictions Strategy, *Open Minds, Healthy Minds*, to create a more integrated and responsive child and youth mental health and addictions system. The Mental Health Leaders work with school and board administrators, school staff, and community partners to fulfill the Strategy's goals of:

- Providing children, youth and families with fast access to high-quality services,
- Identifying and intervening in child and youth mental health and addictions needs early, and
- Closing critical service gaps for vulnerable children and youth.

The hiring requirement is a minimum of 1.0 FTE per board, and job splitting is not allowed. This is a dedicated position with no additional reporting requirements. The Mental Health Leader must meet the following criteria unless the board is given a written exception:

- A senior mental health professional (minimum of Masters level training in psychology, psychiatry, or social work),
- A regulated mental health professional, and
- Possesses a clinical background with practical experience in schools, working with school teams to support students.

Technology Enabled Learning and Teaching (TELT) Contacts

The Technology Enabled Learning and Teaching Contacts (TELT) support the transformation of learning and teaching in the physical and virtual environment.

The hiring requirement is a minimum of 1.0 FTE per board of a staff who is a member in good standing with the Ontario College of Teachers. If the role is shared between multiple staff, the board will be required to designate a single staff person that has oversight of the work of the lead(s). This is a non-dedicated position with additional reporting requirements.

Indigenous Education Leads

The Indigenous Education Lead supports programs and initiatives aimed at improving Indigenous student achievement and well-being and closing the achievement gap between Indigenous students and all students.

The hiring requirement is a minimum of 1.0 FTE per board. Boards will continue to be required to spend at least 0.5 Supervisory Officer salary and benefits benchmark (\$85,215.23) on a dedicated Indigenous Education Lead through the PLA in 2018–19.

In 2018–19, boards will continue to generate minimum funding of a 0.5 Supervisory Officer salary and benefits benchmark through the Per-Pupil Amount (PPA) Allocation of the Indigenous Education Grant to ensure that a total of at least 1.0 Supervisory Officer salary and benefits benchmark is funded between the Per-Pupil amount Allocation of the Indigenous Education Grant and the new PLA. Boards will have flexibility through

the PPA Allocation of the Indigenous Education Grant to use up to an additional 0.5 Supervisory Officer salary and benefits benchmark to support the Indigenous Education Lead in the PLA.

The Indigenous Education Lead must be one full-time, dedicated individual unless the board is given a written exception for geographic reasons (northern and rural). If the lead is not a Supervisory Officer, each school board will also be required to identify a Supervisory Officer who is accountable for the implementation of the Framework with oversight over the work of the lead(s). There are additional reporting requirements for this position.

School Effectiveness Leads

School Effectiveness Leads are responsible for the organization, administration, management, and implementation of the School Effectiveness Framework (SEF). The SEF supports elementary schools and boards in assessing school effectiveness so that plans for improvement can be put in place.

The hiring requirement is a minimum of 1.0 FTE per board. The position must be at a Supervisory Officer level unless the board is given a written exception. If the role is not filled at a Supervisory Officer level and /or responsibilities are shared between multiple staff, the board must identify a single staff person at a Supervisory Officer level who has oversight over the work of the lead(s). This is a non-dedicated position with additional reporting required.

Student Success Leads

The Student Success Lead (SSL) assists schools in developing programs to improve student success. In conjunction with supports provided through the Student Success, Grade 7 to 12 Allocation, the SSL assists students who may not otherwise achieve their educational goals, such as enhanced preparation of students for passing the Grade 10 literacy test, and increasing opportunities for students to participate in successful school-to-work, school-to-apprenticeship, or school-to-college program pathways.

The hiring requirement is a minimum of 1.0 FTE per board. The position must be at a Supervisory Officer level unless the board is given written exception. If the role is not filled at a Supervisory Officer level and/or responsibilities are shared between multiple staff, the board must identify a single staff person at a Supervisory Officer level who has oversight over the work of the lead(s). This is a non-dedicated position with additional reporting required.

Early Years Leads

In 2018–19, funding for Early Years Leads under the Early Years Leadership Strategy will be transferred to the GSN from EPO.

Early Years Leads provide school board leadership to support the implementation of Ontario's vision of a responsive, high-quality, accessible and increasingly integrated early years system that contributes to healthy child development, as outlined in *Ontario's Renewed Early Years and Child Care Policy Framework*.

Early Years Leads are non-dedicated roles; the minimum hiring requirements are outlined below, including at least 0.5 FTE at the Supervisory Officer level at each board. Job splitting is allowed, but no FTE can be split to less than 0.5 FTE.

Additional reporting requirements will be shared by the Early Years and Child Care Division of the ministry.

Average Daily Enrolment (ADE)	Total FTE Hiring Requirement
$0 < ADE \leq 72,000$	Minimum 1.0
$72,000 < ADE \leq 115,000$	Minimum 1.5
$115,000 < ADE \leq 150,000$	Minimum 2.0
$150,000 < ADE \leq 200,000$	Minimum 3.0
$ADE > 200,000$	Minimum 4.0

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March 27, 2018

Dear partners,

As you know, in fall 2017, the Ministry of Education engaged with its partners to identify effective practices that foster strong, accountable and transparent school board governance. As part of this engagement, we sought input from education partners and experts on five governance topics and received a total of 119 responses.

The ministry received feedback from the Council of Ontario Directors of Education, trustee and student trustee associations, teacher federations and unions, principal and supervisory officer associations, school boards, the Minister's Advisory Council on Special Education, school board advisory committees and staff, a First Nation education department, student senates/councils, accountability officers, the Ontario College of Teachers, and individuals with governance expertise.

We carefully reviewed each submission to ensure that the views and concerns of our partners were considered. I would like to thank you for your feedback on topics that were of particular relevance and interest to you, and would like to share our next steps on all five topics of engagement.

Trustee Codes of Conduct and Integrity Commissioners

The ministry heard that a code of conduct for trustees is one of the key elements of a local accountability and transparency framework, and that, if used effectively, a code of conduct can serve to encourage respect for divergent views and help boards focus their efforts on student achievement, equity, well-being and public confidence.

The ministry also heard that school boards should continue to be given the choice of appointing an integrity commissioner where the need arises. Education partners indicated that trustees would benefit from having access to an ethics expert who would provide advice and education to trustees on their ethical obligations.

In response to the feedback received, in late 2018 the ministry will establish a working group with the trustee associations to develop minimum standards for trustee codes of conduct. The ministry will also work with key partners to provide school boards with voluntary access to integrity commissioners, should they choose this path.

In the meantime, a new regulation is being proposed that would, if approved, require all school boards to have a publicly available code of conduct for trustees and to review their code on a regular basis – typically following each trustee election cycle.

The ministry will also continue to work with our partners to develop and/or refresh resources, including *Good Governance: A Guide for Trustees, School Boards, Directors of Education and Communities* (2014), to support school boards in their efforts to strengthen board accountability and transparency.

Trustee Honoraria

Education partners raised a number of issues related to the current formula for calculating trustee honoraria, and student trustee honoraria. Due to the complexity of these issues, we heard that there is a need for further collaboration to understand the diversity of perspectives and identify acceptable options for moving forward. As such, in late 2018, the ministry will be establishing a working group with the trustee associations and student trustee associations to review the honoraria formula for trustees and student trustees in district school boards, as well as trustees in isolate school boards.

In the interim, changes to the regulation regarding honoraria are being proposed that would, if approved, increase the base amount for trustees in district school boards by \$400, from the current annual rate of \$5,900 to the new rate of \$6,300, effective December 1, 2018. The full \$400 increase would be provided in the Trustees Allocation within the Grant for Student Needs (GSN). The proposed changes to trustee honoraria are also outlined in the March 26, 2018, B Memo: B06.

Student Trustee Term of Office and Election Process

The ministry consistently heard from student trustees, students and student councils that student trustees experience a steep learning curve, and could benefit from more time to become familiar with the requirements of the role, accomplish their goals, and build relationships.

Proposed changes to the regulation regarding student trustees would, if approved, provide student trustees with more time and greater support, prior to and while in the role, by:

- 1) Requiring all school boards to have at least two student trustees to encourage collaboration and shared ownership of responsibilities;
- 2) Providing school boards with the option of a two-year, staggered term of office or a one-year term of office;
- 3) Moving the student trustee election date to the end of February for boards that maintain a one-year term of office to enable greater time and opportunity for orientation and mentoring of incoming student trustees.

These changes would take effect for the 2019-20 school year to give boards time to work with their student trustees and student councils to change their policies and processes.

Moving forward, the ministry will explore opportunities for greater consistency in the student trustee election process, promoting awareness of the position and increasing student voice in decision-making, in collaboration with our partners. This includes examining possible legislative changes that would allow student trustees to move board motions.

Electronic Meeting Participation

Education partners generally expressed a preference for in-person participation by the chair, while acknowledging that electronic participation should be permitted in extenuating circumstances. Some partners also raised that the current in-person requirement for board and committee chairs dissuades some trustees from running for the chair position, especially in geographically large boards.

To bring greater equity of access to the role of chair, amendments to the electronic meetings regulation are being proposed that would, if approved, permit boards to include in policy the ability for board and committee chairs to preside over meetings electronically in certain circumstances that would be outlined in the regulation (i.e., the distance from the chair's current residence to the meeting location is 200 kilometres or more; weather conditions do not allow the chair to travel to the meeting location safely; or the chair cannot be physically present at a meeting due to health-related issues). No more than half of board meetings in a 12-month period could be chaired electronically. School boards would also be required to establish processes to ensure the security and confidentiality of proceedings discussed in closed meetings, including maintaining the current requirement for at least one trustee and the director of education to be physically present in board meetings.

Director of Education Qualifications

Education partners consistently expressed a preference for maintaining the existing framework for the recruitment, retention and development of directors of education. Education partners also expressed interest in working collaboratively with the ministry to develop and refresh policy and program supports.

In response to the feedback received, the ministry will work with its partners to develop and refresh policy and program supports, while enhancing the accessibility of related information to foster high levels of public confidence.

Thank you for taking the time to participate in the governance engagement and for your continued work supporting strong and accountable school board governance.

Sincerely,



Bruce Drewett
Director
Leadership, Collaboration and Governance Branch

Plan of Care:
DIABETES
School Year: 20__ - 20__

Student Name	DOB	Gender	Student Photo
Address		Student #	
Exceptionality:	Medic Alert I.D. Yes <input type="checkbox"/> No <input type="checkbox"/>	OEN#	
1.			
2.			
3.			
Grade	Age	Teacher(s)	

EMERGENCY CONTACT (LIST IN PRIORITY)

NAME:	RELATIONSHIP	MAIN CONTACT #	ALTERNATE #
1.			
2.			
3.			
4.			

(HAVE ABILITY TO ADD MORE CONTACTS)

TYPE 1 DIABETES SUPPORTS

Name of trained individuals who will provide support with diabetes-related tasks:

Designated Staff: _____

LHIN Care Workers(if applicable): _____

Method of home-school communication: _____

Any other medical condition or allergy? _____

DAILY/ROUTINE TYPE 1 DIABETES MANAGEMENT

Student is able to manage their diabetes care independently and does not require any special care from the school.

yes no **If yes, go directly to page (6) Emergency Procedures**

ROUTINE	ACTION
<p>Blood Glucose Monitoring</p> <p><input type="checkbox"/>student requires trained individual to check BG/read meter</p> <p><input type="checkbox"/> student needs supervision to check BG/read meter</p> <p><input type="checkbox"/> student can independently check BG/read meter</p> <p>*Students should be able to check blood glucose anytime, anyplace, respecting their preference for privacy</p>	<p>Target Blood Glucose Range_____</p> <p>Times to check BG:_____</p> <p>_____</p> <p>Contact Parent(s)/Guardian(s) if BG is:_____</p> <p>Parent(s) Guardian(s) Responsibilities:_____</p> <p>_____</p> <p>School Responsibilities:_____</p> <p>_____</p> <p>Student Responsibilities:_____</p> <p>_____</p> <p>Outside Agency Responsibilities:_____</p>
<p>Nutrition Breaks</p> <p><input type="checkbox"/>student requires supervision during meal times to ensure completion</p> <p><input type="checkbox"/>student can independently manage food intake</p> <p>* Reasonable accommodation must be made to allow student to eat all of the</p>	<p>Recommended times for meals/snacks:_____</p> <p>_____</p> <p>Parent(s) Guardian(s) Responsibilities_____</p> <p>_____</p> <p>School Responsibilities:_____</p> <p>_____</p> <p>Student Responsibilities:_____</p> <p>_____</p>

provided meals and snacks on time. Students should not trade or share food/snacks with other students	Special Instructions for meal days/special events _____

	Outside Agency Responsibilities: _____

ROUTINE	ACTION
<p>INSULIN</p> <p><input type="checkbox"/> Student does not take insulin at school</p> <p><input type="checkbox"/> Student takes insulin at school by :</p> <p style="margin-left: 20px;"><input type="checkbox"/> injection <input type="checkbox"/> pump</p> <p><input type="checkbox"/> Insulin is given by:</p> <p style="margin-left: 20px;"><input type="checkbox"/> Student <input type="checkbox"/> Student with supervision <input type="checkbox"/> Parent/ Guardian <input type="checkbox"/> Trained Individual <input type="checkbox"/> nurse</p> <p>*All students with Type 1 diabetes use insulin. Some students will require insulin during the school day, typically before meal/nutrition breaks</p>	<p>Please complete either A or B:</p> <p>A. Injection Delivery:</p> <p style="margin-left: 20px;">1. Student must be able to eat according to daily schedule 2. Student must be able to eat all required food sent by parents 3. Supervision will be required: yes <input type="checkbox"/> no <input type="checkbox"/></p> <p>Location of insulin: _____</p> <p>Required times for insulin:</p> <p style="margin-left: 20px;"><input type="checkbox"/> Before school: _____ <input type="checkbox"/> Morning Break: _____ <input type="checkbox"/> Lunch Break: _____ <input type="checkbox"/> Afternoon Break: _____ <input type="checkbox"/> Other (Specify) _____</p> <p>Parent(s) Guardian(s) Responsibilities _____</p> <p>School Responsibilities: _____</p> <p>Student Responsibilities: _____</p> <p>Outside Agency Responsibilities _____</p> <p>Additional Comments _____</p>

	<p>B. Insulin Pump Bolus:</p> <ol style="list-style-type: none">1. Student must be able to eat according to daily schedule2. Supervision will be required: yes <input type="checkbox"/> no <input type="checkbox"/>3. Student must be able to eat all required food sent by parents or4. Student may independently adjust bolus to accommodate amount of food <p><input type="checkbox"/> Before each snack/meal of carbohydrates</p> <p><input type="checkbox"/> Carbohydrate/insulin ratio: _____</p> <p>Student may unhook pump for a maximum of one hour during intense physical activity yes <input type="checkbox"/> no <input type="checkbox"/></p> <p>While disconnected pump will be stored: _____</p> <p>Parent(s) Guardian(s) Responsibilities _____</p> <p>School Responsibilities: _____</p> <p>Student Responsibilities: _____</p> <p>Outside Agency Responsibilities _____</p> <p>Additional Comments _____</p>
<p>ACTIVITY PLAN</p> <p>Physical activity lowers blood glucose. BG is often checked before activity. Carbohydrates may need to be eaten before/after physical activity. A source of fast-acting sugar must always be within students' reach.</p>	<p>Please indicate what this student must do prior to physical activity to prevent low blood sugar:</p> <ol style="list-style-type: none">1. Before activity _____2. During activity _____3. After activity _____ <p>Parent(s) Guardian(s) Responsibilities _____</p> <p>School Responsibilities: _____</p>

	<p>Student Responsibilities: _____</p> <p>_____</p> <p>For special events, notify parent(s)/guardian(s) in advance so that appropriate adjustments or arrangements can be made (e.g. extracurricular, Terry Fox Run)</p>
--	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

ROUTINE	ACTION
<p>DIABETES MANAGEMENT KIT</p> <p>*Parents must provide, maintain, and refresh supplies. School must ensure this kit is accessible at all times. (e.g. field trips, fire drills, lockdowns) and advise parents when supplies are low</p>	<p>Kits will be available in different locations but will include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Supplies: <ul style="list-style-type: none"> <input type="checkbox"/> Blood Glucose meter and strips <input type="checkbox"/> Lancing device and lancets <input type="checkbox"/> Glucagon Needle <input type="checkbox"/> Sharps Disposal Container <input type="checkbox"/> For syringe delivery students <ul style="list-style-type: none"> <input type="checkbox"/> Insulin pen/syringe <input type="checkbox"/> Insulin <input type="checkbox"/> For pump delivery students: <p style="margin-left: 20px;">Supplies as decided: _____</p> <p>_____</p> <input type="checkbox"/> Source of fast-acting sugar (e.g. juice, candy glucose tabs) <p style="margin-left: 20px;">Fast acting sugars to be stored. Provide specific locations</p> <p style="margin-left: 20px;">In classroom: _____</p> <p style="margin-left: 20px;">In office: _____</p> <p style="margin-left: 20px;">In gym: _____</p> <input type="checkbox"/> Carbohydrate containing snacks <input type="checkbox"/> Other (Please list) _____ <p>Location of supplies: _____</p> <p>Location of kit: _____</p> <p>Location of Sharps Disposal Container: _____</p> <p>_____</p>
<p>SPECIAL NEEDS</p> <p>A Student with special considerations may require more assistance than outlined in this plan.</p>	<p>Comments:</p> <p>_____</p> <p>_____</p> <p>_____</p>

ILLNESS

When students with diabetes become ill at school, the parent/guardian/caregiver should be notified immediately so that they can take appropriate action. Nausea and vomiting (flu-like symptoms) and the inability to retain food and fluids are serious situations since food is required to balance the insulin. This can lead to Hypoglycaemia or be the result of hyperglycaemia.

Comments: _____

EXCURSION PROTOCOL

During all trips off school property, the parent/guardian will provide an excursion kit which will consist of:

- Low kit
- Pocket emergency card
- Cell phone (if parent/guardian/caregiver chooses)

EMERGENCY PROCEDURES

DO NOT LEAVE STUDENT UNATTENDED

**HYPOGLYCEMIA – LOW BLOOD GLUCOSE
(4 mmol/L OR LESS)**

- Blood sugars below 4. mm or below 6.mm for 5 years and under
- Student will be allowed extra juice/snacks any time they feel low as per hypoglycaemic plan

Causes:

- Insufficient carbohydrates due to delayed or missed food
- More exercise than usual without a corresponding increase in food
- Too much insulin

Usual Symptoms of **Hypoglycemia** for my child are: (Select all that apply)

- | | | |
|--------------------------------------------------|-------------------------------------------------------|-----------------------------------------|
| <input type="checkbox"/> Cold/Clammy/Sweaty skin | <input type="checkbox"/> Shakiness, poor coordination | <input type="checkbox"/> Quietness |
| <input type="checkbox"/> Lack of concentration | <input type="checkbox"/> Dizziness | <input type="checkbox"/> Blurred Vision |
| <input type="checkbox"/> Reports feeling low | <input type="checkbox"/> Irritability, Poor behaviour | <input type="checkbox"/> Weak/Fatigue |
| <input type="checkbox"/> Pale | <input type="checkbox"/> Confused | <input type="checkbox"/> Hungry |

Other: _____

Predicted times/activities common to low blood sugar for my child:

Steps to take for Mild Hypoglycemia (student is responsive)

1. Check blood glucose, give _____grams of fast acting carbohydrate (e.g. ½ cup of juice, 15 skittles)
2. Re-check blood glucose in 15 minutes.
3. If still below 4 mmol/L, repeat steps 1 and 2 until BG is above 4 mmol/L. Give a starchy snack if next meal/snack is more than one (1) hour away.

Steps for Severe Hypoglycemia (student is unresponsive)

1. Place the student on their side in the recovery position.
2. Call 9-1-1. Do not give food or drink (choking hazard). Supervise student until EMS arrives.
3. Contact parent(s)/guardian(s) or emergency contact

**HYPERGLYCEMIA – HIGH BLOOD GLUCOSE
(14 mmol/L OR ABOVE)**

- Blood sugars are 14.0 or above

Causes:

- Too many carbohydrates
- Less than the usual amount of activity
- Not enough insulin
- Illness

Usual Symptoms of **Hyperglycemia** for my child are: (Select all that apply)

- | | | |
|---------------------------------------------|---------------------------------------------|-----------------------------------------|
| <input type="checkbox"/> Extreme Thirst | <input type="checkbox"/> Frequent Urination | <input type="checkbox"/> Headache |
| <input type="checkbox"/> Hungry | <input type="checkbox"/> Abdominal Pain | <input type="checkbox"/> Blurred Vision |
| <input type="checkbox"/> Warm, Flushed Skin | <input type="checkbox"/> Irritability | <input type="checkbox"/> Weakness |
| <input type="checkbox"/> Other: _____ | | |

For pump delivery students: correct with insulin bolus yes no N/A

Steps to take for Mild Hyperglycemia

1. Allow student free use of bathroom
2. Encourage student to drink water only
3. Inform the parent/guardian if BG is above _____

Symptoms of Severe Hyperglycemia (Notify parent(s)/guardian(s) immediately)

- | | | |
|---------------------------------------------------|-----------------------------------|----------------------------------------|
| <input type="checkbox"/> Rapid, Shallow Breathing | <input type="checkbox"/> Vomiting | <input type="checkbox"/> Fruity Breath |
|---------------------------------------------------|-----------------------------------|----------------------------------------|

Steps to take for Severe Hyperglycemia

1. If possible, confirm hyperglycemia by testing blood glucose
2. Call parent(s)/guardian(s) or emergency contact

Consent for student to carry and self-administer Diabetes medication

We agree that _____,
(student name)

can **carry** prescribed medications and delivery devices to manage Diabetes while at school and during school-related activities.

can **self-administer** prescribed medications and delivery devices to manage Diabetes while at school and during school-related activities.

requires assistance with administering prescribed medications and delivery devices to manage Diabetes while at school and during school-related activities.

It is the parent/guardian responsibility to notify the principal if there is a need to change the plan of care during the school year and to inform the school of any change of medication or delivery device. This medication **cannot** be beyond the expiration date. **This plan remains in effect for the 20__--20__ school year without change and will be reviewed on or before: _____.**

Parent/Guardian Name: _____ Signature: _____ Date: _____

DRAFT

Parent/Guardian Name:	_____	Signature:	_____	Date:	_____
Student Name:	_____	Signature:	_____	Date:	_____
Principal Name:	_____	Signature:	_____	Date:	_____

HEALTHCARE PROVIDER INFORMATION (MANDATORY)

To be included by healthcare professional (I.E.: Medical Doctor, Pharmacist, Nurse, or other clinician working within their scope of practice)

Healthcare Provider's Name:

Profession/Role:

Signature: _____ Date: _____

Special Instructions/Notes/Prescription Labels/Comments:

- If medication is prescribed, please include dosage, frequency and method of administration, dates for which the authorization to administer applies, and possible side effects.
- This information may remain on file if there are no changes to the student's medical condition

AUTHORIZATION/PLAN REVIEW		
INDIVIDUALS WITH WHOM THIS PLAN OF CARE IS TO BE SHARED		
1.	2.	3.
4.	5.	6.
<p>Other individuals to be contacted regarding Plan of Care:</p> <p>Before-School Program <input type="checkbox"/> Yes <input type="checkbox"/> NO</p> <hr/> <p>After-School Program <input type="checkbox"/> Yes <input type="checkbox"/> NO</p> <hr/> <p>School Bus Driver/Route # (If applicable) _____</p> <p>Other: _____</p> <p>This plan remains in effect for the 20____ - 20 ____ school year without change and will be reviewed on or before _____.</p> <p>It is the parent(s)/guardian(s) responsibility to notify the principal if there is a need to change the plan of care during the school year.</p> <p>Parent(s)/Guardian(s): _____ Date: _____</p> <p style="text-align: center;">(signature)</p>		

**Plan of Care:
ANAPHYLAXIS**
School Year: 20__ - 20-__

Student Name	DOB	Gender	Student Photo
Address		Student #	
Exceptionality:	Medic Alert I.D. Yes <input type="checkbox"/> No <input type="checkbox"/>	OEN#	
1.			
2.			
3.			
Grade	Age	Teacher(s)	

EMERGENCY CONTACT (LIST IN PRIORITY)

NAME:	RELATIONSHIP	MAIN CONTACT #	ALTERNATE #
1.			
2.			
3.			
4.			

SUPPORTS FOR ANAPHYLAXIS

Name of trained individuals who will provide support with anaphylaxis-related tasks:
Designated Staff: _____

LHIN Care Workers (if applicable): _____

Method of Home/School Communication: _____

Any other medical condition or allergy? _____

DAILY/ROUTINE ANAPHYLAXIS MANAGEMENT

SYMPTOMS

A STUDENT HAVING AN ANAPHYLACTIC REACTION MIGHT HAVE ANY OF THESE SIGNS AND SYMPTOMS:

- **Skin system:** hives, swelling (face, lips, tongue), itching, warmth, redness.
- **Respiratory system:** (breathing): coughing, wheezing, shortness of breath, chest pain or tightness, throat tightness, hoarse voice, nasal congestion or hay fever-like symptoms (runny, itchy nose and watery eyes, sneezing), trouble swallowing.
- **Gastrointestinal system** (stomach): nausea, vomiting, diarrhea, pain or cramps.
- **Cardiovascular system** (heart): paler than normal skin colour/blue colour, weak pulse, passing out, dizziness or light-headedness, shock.
- **Other:** anxiety, sense of doom (the feeling that something bad is about to happen), headache, uterine cramps, metallic taste, _____.

EARLY RECOGNITION OF SYMPTOMS AND IMMEDIATE TREATMENT COULD SAVE A PERSON'S LIFE.

Avoidance of an allergen is the main way to prevent an allergic reaction.

Food Allergen(s): eating even a small amount of a certain food can cause a severe allergic reaction.

Food(s) to be avoided: _____

Safety measures: _____

Insect Stings: (Risk of insect stings is higher in warmer months. Avoid areas where stinging insects nest or congregate. Destroy or remove nests, cover or move trash cans, keep food indoors.)

Designated eating area inside school building _____

Safety measures: _____

Other information: _____

EMERGENCY PROCEDURES
(DEALING WITH AN ANAPHYLACTIC REACTION)

ACT QUICKLY. THE FIRST SIGNS OF A REACTION CAN BE MILD, BUT SYMPTOMS CAN GET WORSE QUICKLY.

STEPS

1. Give epinephrine auto-injector (e.g., EpiPen®) at the first sign of a known or suspected anaphylactic reaction.
2. Call 9-1-1 or local emergency medical services. Tell them someone is having a life-threatening allergic reaction.
3. Give a second dose of epinephrine as early as **five (5)** minutes after the first dose if there is no improvement in symptoms.
4. Go to the nearest hospital immediately (ideally by ambulance), even if symptoms are mild or have stopped. The reaction could worsen or come back, even after treatment. Stay in the hospital for an appropriate period of observation as decided by the emergency department physician (generally about 4-6 hours).
5. Call emergency contact person; e.g. Parent(s)/Guardian(s).

HEALTHCARE PROVIDER INFORMATION (MANDATORY)

Healthcare provider may include: Physician, Nurse Practitioner, Registered Nurse, Pharmacist, Respiratory Therapist, Certified Respiratory Educator, or Certified Asthma Educator.

Healthcare Provider's Name: _____

Profession/Role: _____

Signature: _____ Date: _____

Special Instruction/Notes/Prescription Labels:

If medication is prescribed, please include dosage, frequency and method of administration, dates for which the authorization to administer applies, and the possible side effects.

* This information may remain on file if there are no changes to the student's medical condition.

AUTHORIZATION/PLAN REVIEW

INDIVIDUALS WITH WHOM THIS PLAN OF CARE IS TO BE SHARED

1. _____ 2. _____ 3. _____

4. _____ 5. _____ 6. _____

Other Individuals To Be Contacted Regarding Plan of Care:

Before-School Program Yes No _____

After-School Program Yes No _____

School Bus Driver/Route # (If Applicable) _____

Other: _____

This plan remains in effect for the 20__-20__ school year without change and will be reviewed on or before: _____. (It is the parent(s)/guardian(s) responsibility to notify the principal if there is a need to change the plan of care during the school year.)

Parent(s)/Guardian(s): _____ Date: _____
Signature

Student: _____ Date: _____
Signature

Principal _____ Date: _____
Signature

Plan of Care:
EPILEPSY
 School Year: 20__ - 20__

Student Name	DOB	Gender	Student Photo
Address		Student #	
Exceptionality:	Medic Alert I.D. Yes <input type="checkbox"/> No <input type="checkbox"/>	OEN#	
Grade	Age	Teacher(s)	

EMERGENCY CONTACT (LIST IN PRIORITY)			
NAME:	RELATIONSHIP	MAIN CONTACT #	ALTERNATE #
1.			
2.			
3.			
4.			

(HAVE ABILITY TO ADD MORE CONTACTS)

EPILEPSY SUPPORTS
Name of trained individuals who will provide support with epilepsy-related tasks: Designated Staff: _____ LHIN Care Workers(if applicable): _____ Method of home-school communication: _____ Any other medical condition or allergy? _____

Has an emergency rescue medication been prescribed? Yes No

If yes, attach the rescue medication plan, healthcare providers' orders and authorization from the student's parent(s)/guardian(s) for a trained person to administer the medication.

Note: Rescue medication training for the prescribed rescue medication and route of administration (e.g. buccal or intranasal) must be done in collaboration with a regulated healthcare professional.

KNOWN SEIZURE TRIGGERS	
CHECK ALL THOSE THAT APPLY	
<input type="checkbox"/> Stress <input type="checkbox"/> Changes In Diet <input type="checkbox"/> Illness <input type="checkbox"/> Change In Weather <input type="checkbox"/> Any Other Medical Condition or Allergy? <hr style="width: 80%; margin-left: 0;"/>	<input type="checkbox"/> Menstrual Cycle <input type="checkbox"/> Inactivity <input type="checkbox"/> Lack Of Sleep <input type="checkbox"/> Electronic Stimulation (TV, Videos, Florescent Lights) <input type="checkbox"/> Improper Medication Balance <input type="checkbox"/> Other <hr style="width: 80%; margin-left: 0;"/>

DAILY ROUTINE EPILEPSY MANAGEMENT	
DESCRIPTION OF SEIZURE (NON-CONVULSIVE)	ACTION:

	(e.g. description of dietary therapy, risks to be mitigated, trigger avoidance.)
DESCRIPTION OF SEIZURE (CONVULSIVE)	ACTION
SEIZURE MANAGEMENT	
<p>Note: It is possible for a student to have more than one seizure type. Record information for each seizure type.</p>	
SEIZURE TYPE	ACTIONS TO TAKE DURING SEIZURE
<p>(e.g. tonic-clonic, absence, simple partial, complex partial, atonic, myoclonic, infantile spasms)</p> <p>Type: _____</p> <p>Description: _____</p>	

Frequency of seizure activity: _____ _____	
Typical seizure duration: _____	

BASIC FIRST AID: CARE AND COMFORT	
First aid procedure(s): _____ _____	
Does student need to leave classroom after a seizure?	<input type="radio"/> Yes <input type="radio"/> No
If yes, describe process for returning student to classroom: _____ _____ _____	
BASIC SEIZURE FIRST AID	
<ul style="list-style-type: none">⑩ Stay calm and track time and duration of seizure⑩ Keep student safe⑩ Do not restrain or interfere with student's movements⑩ Do not put anything in student's mouth⑩ Stay with student until fully conscious	
FOR TONIC-CLONIC SEIZURE:	
Protect student's head Keep airway open/watch breathing Turn student on side	

ILLNESS

DRAFT

When students with epilepsy has a seizure at school, the parent/guardian/caregiver should be notified immediately so that they can take appropriate action.

Comments: _____

EXCURSION PROTOCOL

During all trips off school property, an excursion kit will be provided which will consist of:

- Pocket emergency card
- Cell phone (if parent/guardian/caregiver chooses)

EMERGENCY PROCEDURES
DO NOT LEAVE STUDENT UNATTENDED

Students with epilepsy will typically experience seizures as a result of their medical condition.

Call 9-1-1 when:

- Convulsive (tonic-clonic) seizure lasts longer than five (5) minutes.
- Student has repeated seizures without regaining consciousness.
- Student is injured or has diabetes.
- Student has a first-time seizure.
- Student has breathing difficulties.
- Student has a seizure in water
- Notify parent(s)/guardian(s) or emergency contact.

Consent for student to carry and self-administer Epilepsy medication

We agree that _____,
(student name)

- can **carry** prescribed medications and delivery devices to manage Diabetes while at school and during school-related activities.
- can **self-administer** prescribed medications and delivery devices to manage Diabetes while at school and during school-related activities.
- requires assistance** with administering prescribed medications and delivery devices to manage Diabetes while at school and during school-related activities.
- It is the parent/guardian responsibility to notify the principal if there is a need to change the plan of care during the school year and to inform the school of any change of medication or delivery device.** This medication **cannot** be beyond the expiration date. **This plan remains in effect for the 20__--20__ school year without change and will be reviewed on or before: _____.**

Parent/Guardian Name: _____ Signature: _____ Date: _____

Parent/Guardian Name: _____ Signature: _____ Date: _____

Student Name: _____ Signature: _____ Date: _____

Principal Name: _____ Signature: _____ Date: _____

HEALTHCARE PROVIDER INFORMATION

Healthcare provider may include: Physician, Nurse Practitioner, Registered Nurse, Pharmacist, Respiratory Therapist, Certified Respiratory Educator, or Certified Asthma Educator.

Healthcare Provider's Name: _____

Profession/Role: _____

Signature: _____ Date: _____

Special Instructions/Notes/Prescription Labels/Comments:

- If medication is prescribed, please include dosage, frequency and method of administration, dates for which the authorization to administer applies, and possible side effects.
- This information may remain on file if there are no changes to the student's medical condition

AUTHORIZATION/PLAN REVIEW

INDIVIDUALS WITH WHOM THIS PLAN OF CARE IS TO BE SHARED

1.	2.	3.
4.	5.	6.

Other individuals to be contacted regarding Plan of Care:

Before-School Program Yes NO

After-School Program Yes NO

School Bus Driver/Route # (If applicable) _____

Other: _____

This plan remains in effect for the 20____ - 20 ____ school year without change and will be reviewed on or before _____.

It is the parent(s)/guardian(s) responsibility to notify the principal if there is a need to change the plan of care during the school year.

Parent(s)/Guardian(s): _____ Date: _____
(signature)

Student: _____ Date: _____
(signature)

Principal: _____ Date: _____
(signature)

**Plan of Care:
ASTHMA
School Year: 20__-20__**

Student Name	DOB	Gender	Student Photo
Address		Student #	
Exceptionality:	Medic Alert I.D. Yes <input type="checkbox"/> No <input type="checkbox"/>	OEN#	
1.			
2.			
3.			
Grade	Age	Teacher(s)	

EMERGENCY CONTACT (LIST IN PRIORITY)

NAME:	RELATIONSHIP	MAIN CONTACT #	ALTERNATE #
1.			
2.			
3.			
4.			

SUPPORTS FOR ASTHMA

Name of trained individuals who will provide support with Asthma related tasks:

Designated Staff: 1. _____ 2. _____ 3. _____

LHIN/CCAC Care workers (if applicable): _____

Method of home-school communication: _____

Any other medical condition or allergy? no yes (list below):

1. _____ 2. _____

**Use of Reliever Medication and Controller Medication
at school and during out of school activities**

A. student **will carry and/or self-administer** reliever/controller medication in all settings as prescribed.

Reliever/controller medication is kept:

pocket/person backpack/fanny pack case/pouch

other: (specify) _____

B. student **requires assistance to administer** reliever/controller medication in all settings as prescribed.

Please explain: _____

back-up reliever inhaler is available and will be kept in the main office

The supervising teachers will have back up reliever inhaler during sporting events, excursions, and all other out of school activities to be used in emergency situations.

Each time staff administer prescribed asthma medication information must be recorded on the: Student Log of Administered Medication form.

**Known Asthma Triggers
Check all those that apply**

colds/flu/illness change in weather pet dander strong smells

smoke (i.e. tobacco, fire, cannabis, second-hand smoke)

mould dust pollen cold weather

physical activity/ exercise allergies (specify): _____

at risk for anaphylaxis (specify allergen): _____

asthma trigger avoidance instructions: _____

any other medical condition or allergy: _____

Reliever Inhaler use at school and during school related activities

A **reliever inhaler is a fast acting medication** (usually blue in colour) that is used when someone is having asthma symptoms. The reliever inhaler should be used:

- when student is experiencing asthma symptoms (i.e. trouble breathing, coughing, wheezing).
- other (explain): _____

Use of reliever inhaler _____ in the dose of _____
(name of medication) (# of puffs)

Spacer (valved holding chamber) provided Yes No image

Place a check mark beside the type of **reliever inhaler** that the student uses:

- salbutamol (image) airomir (image) ventolin (image) bricanyl (image)
- other (specify): _____

EMERGENCY PROCEDURES DURING ASTHMA ATTACK

IF ANY OF THE FOLLOWING OCCUR:

- Continuous coughing
- Trouble breathing
- Chest tightness
- Wheezing (whistling sound in chest)
- Student may also be restless, irritable and/or quiet

TAKE ACTION:

STEP 1: Immediately use fast-acting relieve inhaler (usually blue inhaler). Use a spacer if provided.

STEP 2: Check symptoms. Only return to normal activity when all symptoms are gone. If symptoms persist, do not improve within 10 minutes or get worse, this is an **EMERGENCY!** Follow the steps below:

IF ANY OF THE FOLLOWING OCCUR:

- Breathing is difficult and fast
- Cannot speak in full sentences
- Lips or nail beds are blue or grey
- Skin or neck or chest sucked in with each breath
- Student may also be anxious, restless and/or quiet

THIS IS AN EMERGENCY:

STEP 1: IMMEDIATELY USE ANY FAST-ACTING RELIEVER (USUALLY A BLUE INHALER). USE A SPACER IF PROVIDED.

Call 9-1-1 for an ambulance. Follow 9-1-1 communication protocol with emergency responders.

STEP 2: If symptoms continue, use reliever inhaler every 5-15 minutes until medical attention arrives.

While waiting for medical help to arrive:

- Have student sit up with arms resting on a table (do not have student lie down unless it is an anaphylactic reaction)
- Do not have the student breathe into a bag
- Stay calm, reassure the student and stay by his/her side
- Notify parent(s)/guardian(s) or emergency contact

Controller Medication use at school and during school related activities

Controller medication are taken regularly every day to control asthma. Usually, they are taken in the morning and at night, so generally not taken at school (unless student will be participating in an overnight activity).

Place a check mark beside the type of prescribed **controller medication** that the student uses:

- flovent (image) advair (image) qvar (image) pulmicort (image)
other (specify): _____

Use/administer _____ in the dose of _____ at the following times _____
(name of medication)

Use/administer _____ in the dose of _____ at the following times _____
(name of medication)

Use/administer _____ in the dose of _____ at the following times _____
(name of medication)

Consent for student to carry and self-administer asthma medication

We agree that _____,
(student name)

can **carry** prescribed medications and delivery devices to manage asthma while at school and during school-related activities.

can **self-administer** prescribed medications and delivery devices to manage asthma while at school and during school-related activities.

requires assistance with administering prescribed medications and delivery devices to manage asthma while at school and during school-related activities.

It is the parent/guardian responsibility to notify the principal if there is a need to change the plan of care during the school year and to inform the school of any change of medication or delivery device. This medication **cannot** be beyond the expiration date. **This plan remains in effect for the 20__--20__ school year without change and will be reviewed on or before: _____.**

Parent/Guardian Name: _____ Signature: _____ Date: _____

Parent/Guardian Name: _____ Signature: _____ Date: _____

Student Name: _____ Signature: _____ Date: _____

Principal Name: _____ Signature: _____ Date: _____

HEALTHCARE PROVIDER INFORMATION (MANDATORY)

To be included by healthcare professional (I.E.: Pharmacist, Respiratory Therapist, Certified Asthma Educator, Certified Respiratory Educator, Nurse, Medical Doctor or other clinician working within their scope of practice)

Healthcare Provider's Name: _____

Profession/Role: _____

Signature: _____ Date: _____

Special Instructions/Notes/Prescription Labels/Comments:

- If medication is prescribed, please include dosage, frequency and method of administration, dates for which the authorization applies, and possible side effects
- This information may remain on file if there are no changes to the student's medical condition

AUTHORIZATION/PLAN REVIEW

INDIVIDUALS WITH WHOM THIS PLAN OF CARE IS TO BE SHARED

1.	2.	3.
4.	5.	6.

Other individuals to be contacted regarding Plan of Care:

Before-School Program Yes NO

After-School Program Yes NO

School Bus Driver/Route # (If applicable) _____

Other: _____

This plan remains in effect for the 20____ - 20 ____ school year without change and will be reviewed on or before _____.

It is the parent(s)/guardian(s) responsibility to notify the principal if there is a need to change the plan of care during the school year.

Parent(s)/Guardian(s): _____ Date: _____
(signature)

March 31st student count - Special Education

Count of Name Row Labels	Column Labels												Grand Total		
	01	02	03	04	05	06	07	08	09	10	11	12		JK	SK
Identified	241	299	319	362	806	752	772	755	808	844	898	1283	94	157	8390
Autism	148	175	154	134	126	115	139	73	119	112	95	193	82	136	1801
Behaviour	4	18	27	35	24	23	18	15	6	8	10	8			196
Blind and Low Vision Deaf and Hard-of-Hearing	1		1		1	1	1	1	1	1	4	1			12
Developmental Disability	4	3	4	8	6	5	7	8	5	8	7	17	4	4	90
Giftedness	3	1	4	7	14	11	8	7	12	10	14	50	1		142
Language Impairment	62	66	64	84	86	92	63	72	63	60	47	53			2039
Learning Disability	6	42	64	168	178	237	280	319	358	444	585				812
Mild Intellectual Disability	1	4	15	17	16	25	36	47	42	46	100				2681
Multiple Exceptionalities	13	19	13	7	15	9	12	14	14	8	7	33	4	13	349
Physical Disability Speech Impairment	6	9	4	5	8	11	5	4	8	8	3	7	3	4	181
		1					1								85
Not Identified	204	617	827	857	829	830	836	747	679	587	656	725	67	84	8545
Not Applicable	204	617	827	857	829	830	836	747	679	587	656	725	67	84	8545
Grand Total	445	916	1146	1219	1635	1582	1608	1502	1487	1431	1554	2008	161	241	16935



REPORT TO

SPECIAL EDUCATION ADVISORY COMMITTEE

BUDGET REPORT: FINANCIAL PLANNING AND CONSULTATION REVIEW

“Dear children, let us not love with words or speech but with actions and in truth”

1 John 3:18

Created, Draft	First Tabling	Review
February 21, 2018	April 18, 2018	Click here to view update
D. De Souza, Coordinator of Grants & Ministry Reporting G. Sequeira, Coordinator of Budget Services P. De Cock, Comptroller of Business Services & Finance J. Yan, Senior Coordinator, Communications, Media and Public Relations		
INFORMATION REPORT		

Vision:

At Toronto Catholic we transform the world through witness, faith, innovation and action.

Mission:

The Toronto Catholic District School Board is an inclusive learning community uniting home, parish and school and rooted in the love of Christ.

We educate students to grow in grace and knowledge to lead lives of faith, hope and charity.



Rory McGuckin
Director of Education

D. Koenig
Associate Director
of Academic Affairs

M. Puccetti
Acting Associate Director
of Planning and Facilities

L. Noronha
Executive Superintendent
of Business Services and
Chief Financial Officer

A. EXECUTIVE SUMMARY

1. ***This report provides a framework to Trustees and the School Community for a proposed approach to developing the next budget.*** This report provides an overview on:

- a) Preliminary discussion on financial planning approaches for the 2018-19 fiscal year and beyond,
- b) Pre-identified fiscal risks in the 2018-19 school year, and
- c) The community engagement process for the upcoming budget.

2. ***This is one in a series of reports that provides budgetary information for consultation and discussion, ending in an approval of next year's budget estimates.*** The information provided in this report is based on preliminary estimates at this point in time. The 2018-19 Grants for Student Needs (GSN) announcement from the Ministry of Education (EDU) is expected at the end of March 2018 and will likely have an impact on the 2018-19 fiscal year. The following reports are expected in the series, culminating in establishing an approved fiscal year budget:

- a) Consensus Enrolment Projections Report (March 2018)
- b) Preliminary Teaching Staffing Projection Report (March 2018)
- c) Financial Planning and Consultation Review Report (March 2018)
- d) GSN and Budget Update Report (April 2018)
- e) Budget Estimates for Approval (June 2018)
- f) Revised Budget Estimates for Approval (December 2018)

The cumulative staff time required to prepare this report was 20 hours

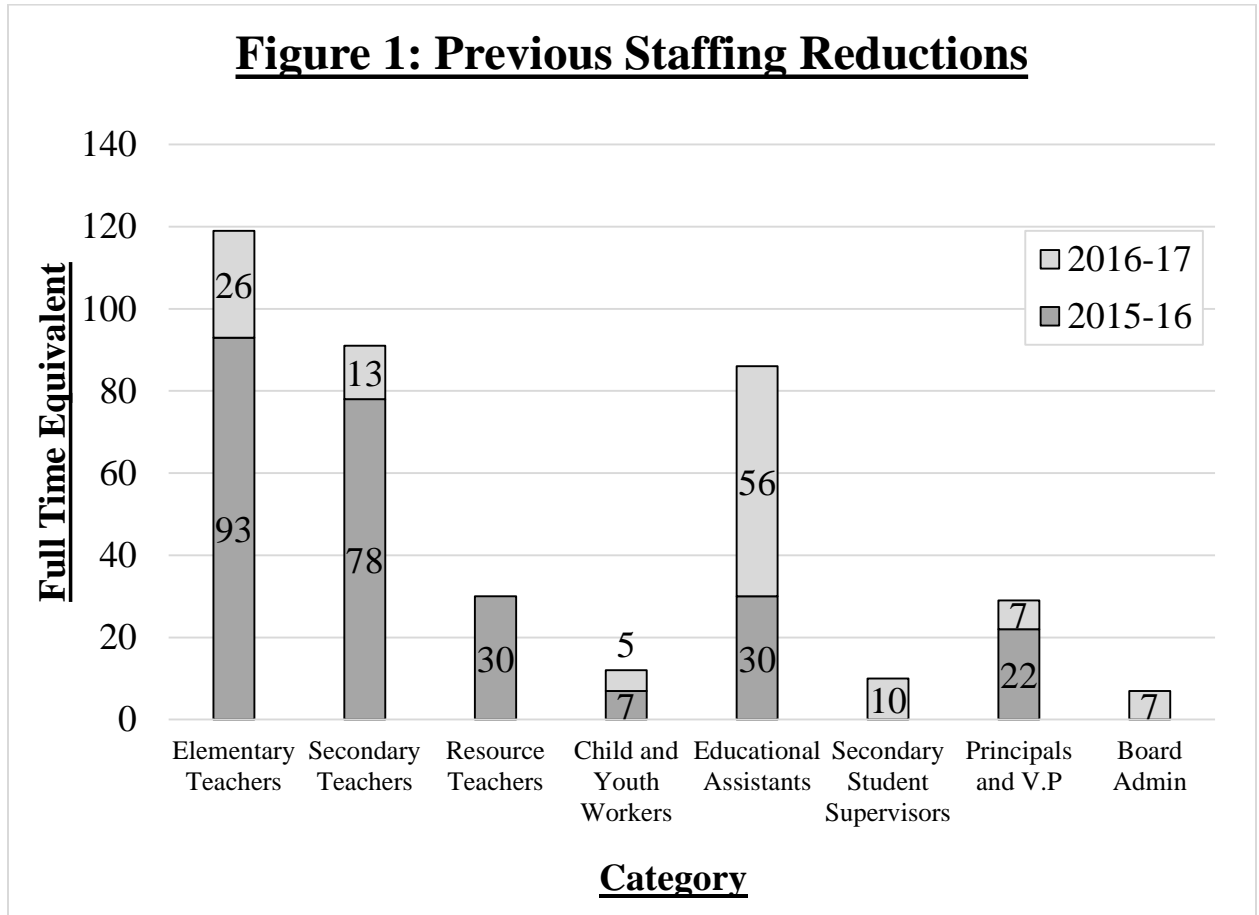
B. PURPOSE

1. ***This report introduces the 2018-19 budget process.*** This report seeks to inform Trustees and the School Community on the proposed financial planning framework for this year's budget process and also comments on future enhancements to the process. It provides an early indication of potential fiscal pressures that may arise within the development of the budget and provides the Community Consultation plan.

C. BACKGROUND

1. ***Budget setting for a School Board is a legislated process, but has strategic importance.*** Under the Education Act (Section 232), the Board is required before the beginning of each fiscal year to prepare and adopt estimates of its revenues and expenses for the fiscal year and must submit this information to the Ministry by end of June each year. The Budget process is an important planning tool for the development of an effective and balanced budget in order to provide a range of necessary resources, supports and programs to the Board's students.
2. ***The Multi-Year Strategic Plan (MYSP) provides the overarching directions and principles that should drive the budget process.*** Students are always the Board's primary focus and are represented in all six strategic directions found within the MYSP. TCDSB is committed to offering programs and services, which challenge all students to achieve their personal best. TCDSB also strives to make efficient, effective, and innovative use of resources, based on sound planning, and the best available information. Inherent in the budget process is the allocation of available resources to address student needs.
3. ***The previous few budget years have experienced significant fiscal constraints.*** The following list of fiscal challenges have exerted considerable influence on the Board's last few budget processes and have necessitated very difficult decisions regarding a wide array of program and staffing issues.
 - a) Changes to the GSN Model have resulted in reductions to TCDSB's operating funds in certain areas. The changes include the continued phase-in of changes to the School Foundation Grant, Differentiated Special Education Needs Amount (DSENA), Administration and Governance, School Operations and Declining Enrolment Adjustment grants.
 - b) These reductions along with pressures in the areas of Special Education, Transportation and Occasional Teachers led to the TCDSB being in a deficit position and engaging in a four-year Multi-Year Recovery Plan (MYRP) since 2015-16.
 - c) During the Provincial Bargaining Table contract extension discussions last year with various employee groups, the TCDSB was allocated \$9.5M to invest in system priorities. Up to \$7.5M of this was used to offset GSN reductions and planned MYRP expenditure reductions for the 2017-18 fiscal year.

d) TCDSB has made reductions totalling \$44.7M over the past two years to balance its budget in-year. Figure 1 presents the reductions in staffing levels that was required to facilitate a sustainable budget going forward. It should be noted that not all reductions were isolated to staffing. This chart is provided for illustrative purposes only.



4. ***TCDSB has achieved its MYRP’s objective, and is projecting an accumulated surplus at the end of this current fiscal year.*** The 2017-18 Revised Estimates project an in-year surplus of \$0.1M and a projected year-end accumulated surplus of \$25.0M. The projected accumulated surplus at the end of August 31, 2018 is based on the assumption that the TCDSB will receive the Administrative Services only (ASO) surplus funding of \$10.5M.
5. ***Strategic Investments.*** In the 2017-18 revised budget estimates the Board of Trustees approved the one-time Strategic Investments of \$7.9M from the Accumulated Surplus and an increase to the base budget of \$2.4M phased in future years.

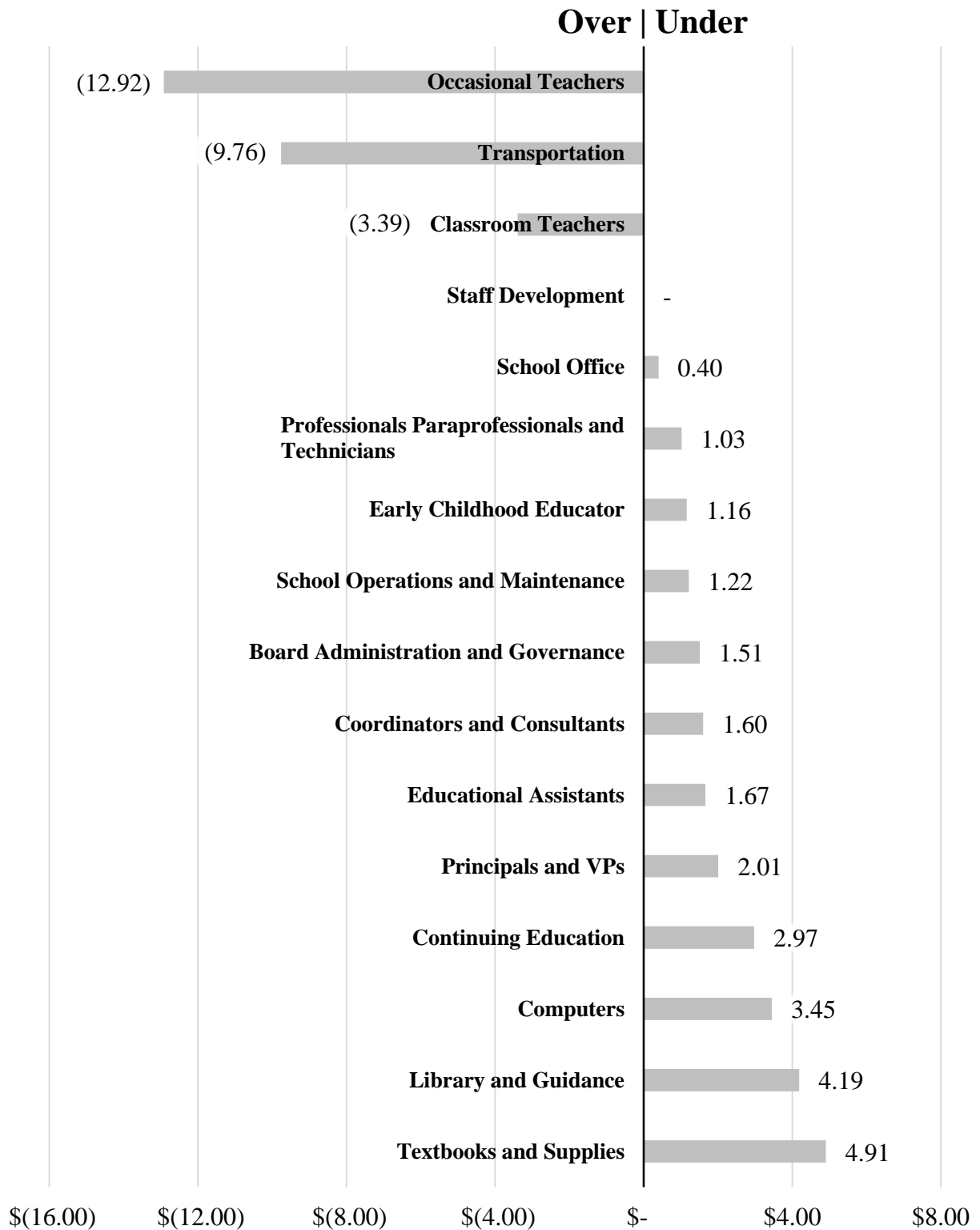
D. EVIDENCE/RESEARCH/ANALYSIS

1. This section is broken down further in to the following two sub sections:
 - a) Financial Planning Framework
 - b) Budget Risks and Uncertainties

FINANCIAL PLANNING FRAMEWORK

2. ***The internal budget process began in January.*** For the 2018-19 Budget year, TCDSB staff commenced its budget development process in January 2018 with the development of timelines and preliminary projection assumptions. A summary of the 2018-19 Budget process and timelines is provided in the report.
3. ***The budget is the Board's fiscal plan that supports the delivery of educational programs and services.*** The fiscal plan should be driven in large part by the Board's MYSP. It also provides the authority for administration to spend funds on a variety of programs and services. It is important that the budget be developed in a thoughtful manner and that the decisions respecting the expenditure of funds carefully weigh the impacts and benefit to stakeholders across the near and long-term horizons.
4. ***The Board's historic budget decisions have led to the current mix of under and over spending that define the Board's current service levels.*** The Board continues to monitor its programs and staffing allocations to ensure that it is providing services to its students while complying with Ministry requirements and pursuing the system priority of student achievement. Figure 2 provides the current areas in which the Board has chosen to under and over spend in order to provide student achievement and wellness goals while maintaining a balanced budget. As an example, the Board has over spent in Transportation and under spent in Board Administration and Governance.
5. ***The budget process is the opportunity to revisit whether this mix of service levels is the most optimal.*** The current mix of programs and services strives to achieve the MYSP goals and objectives and most importantly, maximize student achievement and well-being.

Figure 2: TCDSB 2017-18 Under and Over Spending by Expense Category (\$ in Millions)



6. *The current year’s financial planning begins with understanding projected student enrolment and staffing.* The projected student enrolment and staffing projection reports align with each other and will be submitted for approval in March. Once these levels are determined, TCDSB programs and services will continue to be reviewed for equitable, effective and efficient measures to improve delivery of services to all students. Figures 3, 4 and 5 provide very early estimates of revenue/expense, student enrolment and accumulated surplus/deficit for 2018-19 along with historical comparisons. These estimates will change as better data is obtained related to student enrolment, staffing projections, GSN formula changes and more information becomes available regarding other identified risks. These early estimates show a balanced budget based on a static year over year budget and a growing student enrolment, however as stated earlier many factors still need to be considered before arriving at a preliminary budget for consideration by the Board.

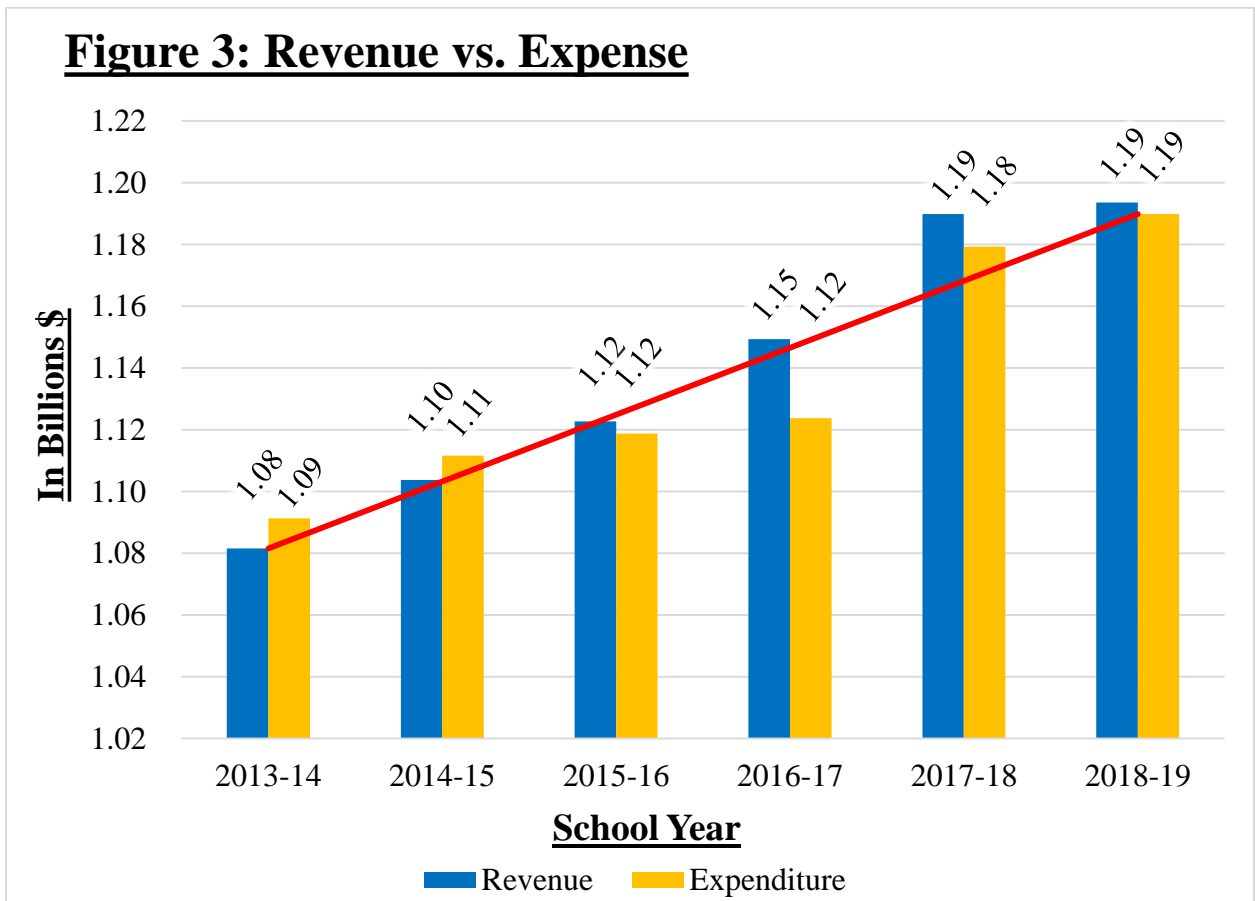


Figure 4: Total Average Daily Enrolment

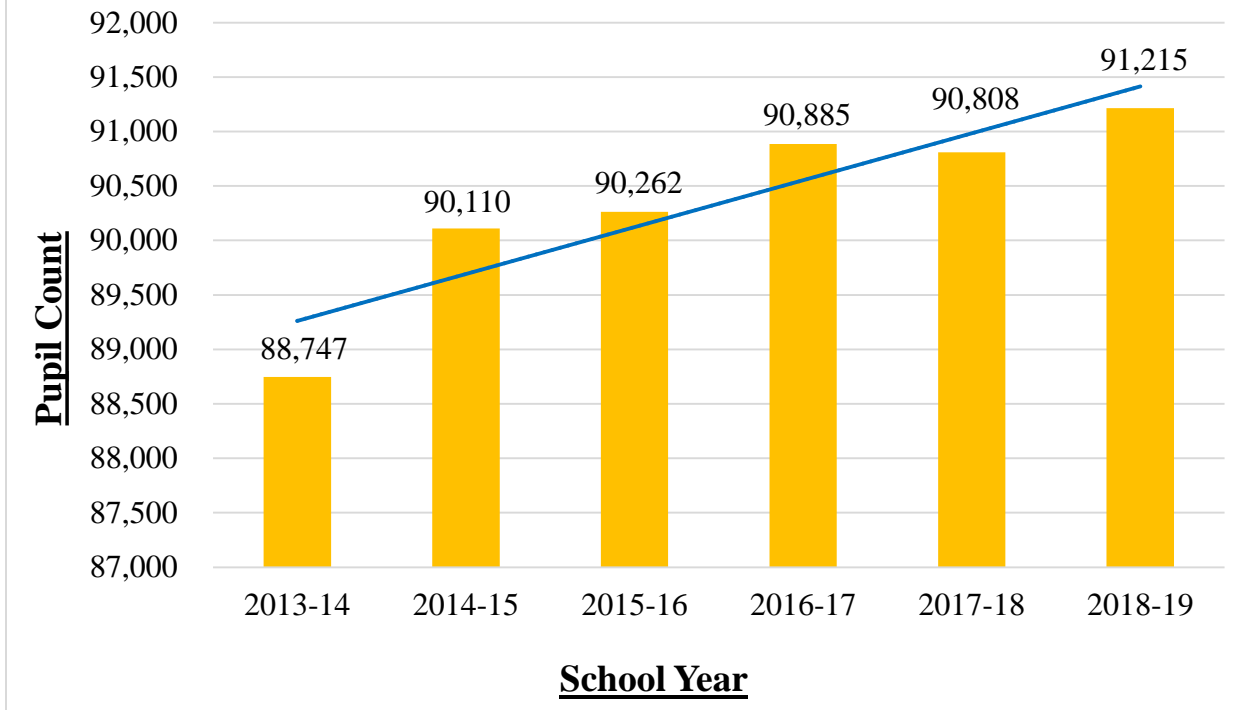
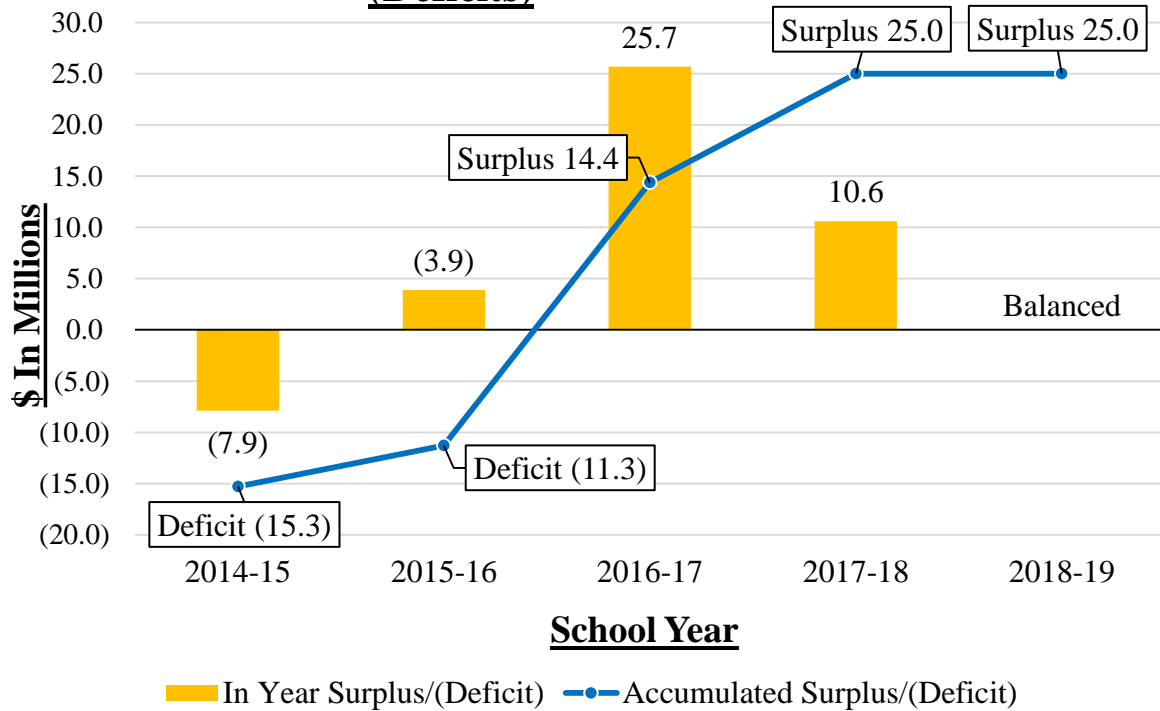


Figure 5: In-Year Accumulated Surpluses / (Deficits)



7. ***Some new elements will be added to the 2018-19 budget process.*** As a part of continuous improvement, staff have identified a few areas of concentration for the presentation and content of this year’s budget submission. These elements are listed below.
 - a. ***Preliminary linking of budget to MYSP.*** The MYSP provides direction to align operating and capital budgets to the MYSP. This budget process will begin the preliminary work of creating high-level linkages to illustrate to the School Community how the budget delivers on the MYSP.
 - b. ***Preliminary improvements on the presentation of the budget.*** A budget can be viewed as a major communication tool between the Board, the School Community, staff at all levels and the public at large. Staff will begin work on moving towards a “Budget Book” format that will act as a communication tool and provide context for meaningful debate on the allocation of resources.
 - c. ***Provide fiscal risk management and accumulated deficit/surplus strategies.*** Outside of quarterly financial reporting to the Board to monitor the progress of the budget, the initial budget should include consideration towards treatment of surpluses and deficits. Appropriate contingencies should be established as well as recommendations on reserving for or investing in one-time service enhancements resulting from accumulated surpluses.
8. ***Additional improvements will be planned for the 2019-20 budget process and beyond.*** In an effort to plan in advance and work within staffing capacity constraints, some improvements will be planned and implemented in the following budget process and may include:
 - a. ***Further linkage of MYSP with budgeting process.*** Staff would strive to bring the linkages to a more detailed level. This would also include linkage to ecological justice principles per the MYSP as well as equity/diversity initiatives.
 - b. ***Move to full Budget Book format.*** This would move the budget presentation to a streamlined and fully communicative format to help with School Community engagement and understanding of the budget figures.

- c. ***Consolidation of the Operating and Capital budget processes.*** Operating and Capital budgets are inherently related. Providing one streamlined process for both is common in several other School Boards and the Public Sector at large. It will also help consolidate the School Community engagement.
- d. ***Calendarization of budgets.*** This means approving budgets on an annual basis, but also determining the month-to-month forecast of the annual budget. This will help analyse with higher accuracy the Board's performance against its budget during the year.

BUDGET RISKS & UNCERTAINTIES:

- 9. ***Certain fiscal risks will unfold over the proceeding couple of months that will impact the budget process.*** These will need to be monitored closely as budget development progresses. Staff will report on these risks as part of the Preliminary and Budget Estimate presentations. Depending on the magnitude of the impacts, the Board may be faced with service level reduction decisions later in the process. A list of these risks ranked by likelihood and impact is provided below.
 - a) ***Legal Challenges to Collective Agreements have created cost pressures.*** The number of Special Education Teachers in the Elementary panel have a prescribed staffing to student ratio as prescribed by the collective agreement, and recent legal challenges have resulted in the requirement to deploy additional teachers in this capacity. The essence of the legal challenge more narrowly defines the types of elementary special education teachers to be counted as part of the staffing ratio as defined in Appendix G of the Elementary Teachers Collective Agreement.
 - b) ***As Bill 148 is implemented, several new cost pressures may arise.*** The Fair Work Places & Better Jobs Act passed on November 22nd, 2017 and will result in an increased cost for Parental Leave Entitlements, Critical Illness Leaves, General Minimum wage increases. In addition, Equal Pay for Equal Work and paid Vacation Entitlements may also increase costs for TCDSB. An internal staff team has been created to determine the Board's legal position and potential cost impacts leading in to the 2018-19 budget process. Not only direct payroll costs are impacted but also secondary costs associated with vendors i.e. Transportation Services.

- c) ***Occasional Teacher Costs continue to rise.*** For the current 2017-18 fiscal year, Occasional Teacher costs are trending close to budget at this point in time. The risk is that these costs could increase this year assuming a full Occasional Teacher roster, and/or staff absenteeism rates continue to increase.
- d) ***Inflation Assumptions could be higher than expected.*** Utility costs continue to trend higher and the budget estimates are based on historical costs and projected increases. If costs increase higher than anticipated, this could create a cost pressure in this area. The current trend is that utility costs are trending at 15% on average over 5 years well above the EDU funded increase for inflationary costs of 2%.
- e) ***Benefit Trusts producing higher costs than expected.*** The amount budgeted for group benefits are based on estimations and the information provided by the Ministry of Education (EDU). As the various employee groups such as Other Non-Union employee's, Principals and Vice-Principals move to their respective Benefit Trusts, the remaining employee groups waiting to transition may experience higher premiums due to the reduced number of employees remaining in the Group Benefits Pool. This could increase benefit costs for TCDSB.
- f) ***Accumulated Surplus may be lower than expected.*** TCDSB has historically provided group benefits, i.e. Health & Dental, in a self-funded manner also known as an Administrative Services Only (ASO) self-insurance arrangement. This fund has accumulated a surplus in excess of costs incurred to the present date. To date, staff have identified \$10.5M that can be used from the projected ASO benefit surplus (subject to Ministry approval) expected in Fiscal 2017-18 or Fiscal 2018-19.
- g) ***Enrolment projections to actuals could be lesser than expected.*** Any variances to planned consensus enrolment projections may impact final calculated GSN revenues.
- h) ***Capital project risks may materialize.*** Capital projects that are higher than the provincial benchmark will result in deficits for the project that will not be funded by the EDU's Capital program. These shortfalls would need to be covered through the operating budget, which could result in shortfalls in the operating budget. Staff monitor these capital projects closely to ensure this risk is highly mitigated.

E. IMPLEMENTATION, STRATEGIC COMMUNICATIONS AND STAKEHOLDER ENGAGEMENT PLAN

1. ***This year’s budget process will include a comprehensive community consultation component.*** Based on the information being considered for the 2018-2019 Budget, the community engagement will be conducted at the level of “**Consult**” – which has a higher involvement ranking than the usual “Inform” level. The consultation level normally alternates between the “Inform” and “Consult” levels. The “**Consult**” level as defined in the policy is:

“To obtain input from community members and the general public on proposed Board directions and decisions.”

The policy also states that:

“TCDSB Staff and Trustees will invite community members with diverse perspectives to participate and will listen and seek to understand all concerns.”

While also ensuring that:

Community members and the public will participate and provide input.

The continuum comprises six increasing levels of engagement that may be sought with community members: Inform, Consult, Involve, Collaborate, Consensus, and Empower.

2. ***Consultation is in accordance with policy.*** The consultation plan is in compliance with Community Engagement Policy T.07, and reflects the desire expressed by Trustees to ensure that the communications and community engagement process involve **all** TCDSB community stakeholders.
3. ***Trustees to receive community feedback for consideration in budget setting.*** Input and feedback received during this process will be presented at the May 10, 2018 Corporate Services Committee meeting to inform Trustees as they finalize the budget for the 2018-2019 fiscal year for submission to the Ministry of Education by the June 30, 2018 deadline.

4. ***Consultations are rooted in inclusivity.*** To optimize stakeholder input, the parameters for public consultation and communication is guided by these key factors:

- a) A section of the TCDSB web site will be transformed to a “mini-website” dedicated informing the community about the 2018-2019 Budget consultation including: A Frequently Asked Questions (FAQs) information sheet and an online budget feedback tool used in previous consultations for the MYRP, and 2017-2018 budget process.
- b) To facilitate the need to be as inclusive as possible by overcoming language access barriers, a customized TRANSLATE tool has been developed to take advantage of GOOGLE Translator so that it can assist TCDSB stakeholders to access all budget information on the budget website in the language of their choice.
- c) Enhance face-to-face opportunities by aligning consultation process with dates for pre-scheduled Standing Board/Committee meetings (see Appendix A), parent engagement committees (CPIC, OAPCE-Toronto), Board advisory committees (e.g. SEAC), and Student leadership meetings (ESCLIT, CSLIT).

5. ***Several channels of engagement will be used to reach a wide group of participants.*** The Communications Plan will also be aligned to support budget engagement process through:

- Director’s Bulletin Board
- Weekly Wrap Up, web (TCDSB’s external and internal portal)
- Social media (i.e. Twitter)
- E-newsletters and traditional school newsletters.
- Collaboration with the Archdiocese to publish information for inclusion in individual parish bulletins and parish web site links

The following stakeholders are intended to be participate:

- Parents/Guardians
- Student Leaders (CSLIT and ECSLIT)
- Community Leaders and Members (CSPCs, CPIC, OAPCE-Toronto etc.)
- All Employees and employee groups (Teachers/Support Staff including the federations TECT, CUPE and TSU)
- Special Education Advisory Committee (SEAC)

- Principals/Vice Principals
 - Parishioners and Catholic Stakeholders (via Archdiocese)
 - General Public (via PSAs, Community newspaper calendars, Twitter, TCDSB website)
6. The public consultation process includes many opportunities. Please refer to Appendix A for a more detailed view of the 2018-19 consultation process and activities.

F. CONCLUDING STATEMENT

This report is for the consideration of the Special Education Advisory Committee.

A. ACTION PLAN: CONSULTATION TIMELINE

DATE	PUBLIC CONSULTATION ACTIVITY
<p>1) Friday, April 6, 2018 Community Consultation Launch (Subject to Board of Trustees Approval at March 08, 2018, Corporate Services meeting)</p>	<ul style="list-style-type: none"> • GO LIVE with online HTML web-based 2018–2019 Budget consultation pages on website. • Invitation letter from Chair and Director to Parents, Principals and chairs of CSPC, CPIC, OAPCE (Toronto), SEAC, CSLIT/ECSLIT, to participate in public consultations. • Communication sent to Archdiocese (via Communications Dept.) for distribution to individual parishes to encourage Catholic community/ stakeholder involvement
<p>2) April 6 – May 4, 2018 Online Budget Feedback Tool</p>	<ul style="list-style-type: none"> • Anonymous online input tool to inform Trustee deliberations on budget
<p>3) Thursday, April 5, 2018 Student Achievement Committee</p>	<ul style="list-style-type: none"> • Opportunity for public deputations regarding budget
<p>4) Thursday, April 12, 2018 Corporate Services Committee Meeting</p>	<ul style="list-style-type: none"> • GSN and Budget update for 2018-19 • Opportunity for public deputations regarding budget
<p>5) Wednesday, April 18, 2018 Special Education Advisory Committee (SEAC) Meeting</p>	<ul style="list-style-type: none"> • Budget discussions with SEAC members for input and recommendations.

DATE	PUBLIC CONSULTATION ACTIVITY
6) Thursday, April 19, 2018 Regular Board Meeting	<ul style="list-style-type: none"> • Budget consultation update for Trustees. • Opportunity for public deputations regarding budget
7) Monday, April 30, 2018 OAPCE-Toronto Meeting	<ul style="list-style-type: none"> • Budget discussions with OAPCE-Toronto members for feedback
8) Wednesday, April, 2018 (TBC) ESCLIT/CSLIT	<ul style="list-style-type: none"> • Budget information and options discussed with student leaders
9) May, 2018 (Date TBC) * Meeting with Union Partners	<ul style="list-style-type: none"> • Consultation and discussion of budget.
10) Wednesday, May 2, 2018 Student Achievement Committee Meeting	<ul style="list-style-type: none"> • Opportunity for public deputations regarding budget
11) Thursday, May 10, 2018 Corporate Services Committee Meeting	<ul style="list-style-type: none"> • Presentation of results from Budget Consultation process • Opportunity for public deputations regarding budget options.
12) Monday, May 14, 2018 CPIC Meeting	<ul style="list-style-type: none"> • Budget discussions with CPIC members for feedback
13) Wednesday, June 6, 2018 Corporate Services Committee meeting	<ul style="list-style-type: none"> • Final opportunity for delegations. • Final vote on approval of 2018-2019 Budget for submission to the Ministry of Education by June 30, 2018.



REPORT TO

SPECIAL EDUCATION ADVISORY COMMITTEE

BUDGET REPORT: 2018-19 GRANTS FOR STUDENT NEEDS UPDATE

*“A generous man will himself be blessed, for he shares his food with the poor.”
Proverbs 22:9*

Created, Draft	First Tabling	Review
March 22, 2018	April 18, 2018	Click here to enter a date

D. De Souza, Coordinator of Grants & Ministry Reporting
 G. Sequeira, Coordinator of Budget Services
 P. De Cock, Comptroller of Business Services & Finance

INFORMATION REPORT

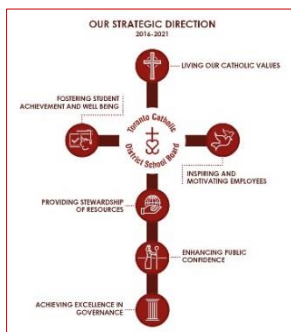
Vision:

At Toronto Catholic we transform the world through witness, faith, innovation and action.

Mission:

The Toronto Catholic District School Board is an inclusive learning community uniting home, parish and school and rooted in the love of Christ.

We educate students to grow in grace and knowledge to lead lives of faith, hope and charity.



Rory McGuckin
 Director of Education

D. Koenig
 Associate Director
 of Academic Affairs

M. Puccetti
 Acting Associate Director
 of Planning and Facilities

L. Noronha
 Executive Superintendent
 of Business Services and
 Chief Financial Officer

A. EXECUTIVE SUMMARY

1. ***Announcements made by the Ministry of Education will entail further release of data and more analysis to develop the budget.*** The Grant for Student Needs (GSN) funding and regulations released on March 26th 2018 by the Ministry of Education (EDU) provided a first look at ongoing and new education funding investments into the education sector. The Education Funding Technical Paper, Education Financial Information Systems (EFIS) and GSN Projections by Board did not accompany the announcement as in past years. The funding projections for the Toronto Catholic District School Board (TCDSB) contained within this report are preliminary and subject to change pending the release of further documents and formulas.
2. ***The late release of data by the Ministry may impact the budget approval timelines previously communicated to the Board.*** Given the delay of the technical details release by the Ministry to potentially the end of April, staff may not be in a position to develop preliminary budget estimates in time for May 10th Corporate Services Committee. An alternative plan would be to bring the preliminary budget estimates to Regular Board on May 17th.
3. ***Announcements for new investments to enhance service levels in some areas have been made.*** The new investments into education funding provide the TCDSB with approximately \$7.6M for a projected staffing increase in the range of 33.0 to 51.0 full-time equivalent positions (FTE) and other operational expenses. This new investment is in addition to any anticipated increases for salaries and wages of existing staff as determined by provincially negotiated extension agreements, benefits benchmark reductions for retirement gratuities, continuance of local priority amounts or positions/programs moving from being funded by Education Programs Other (EPOs) to GSN funding.
4. ***Based on preliminary analysis and review of the announcements, staff expect to develop a balanced budget without the need for staffing reductions.*** Various pressures including impacts from Bill 148 legislation (fair workplaces), collective agreement arbitrations and salary/benefit costs being above the provincial benchmark average will contribute to the budget entering an unbalanced (deficit) position. The announcements that have been made provide funding for new or enhanced service levels; some of which are not “enveloped”, meaning the funds can be used towards existing service levels. Given that the TCDSB already has higher than average service levels

in some areas, staff will recommend using the new funding being received to first offset pressures associated with existing services before applying it to new services, where allowed. In this way, a balanced budget is expected to be developed.

The cumulative staff time required to prepare this report was 6 hours.

B. PURPOSE

1. ***This annual report has been prepared to provide highlights and preliminary projections of new education funding investments for the TCDSB.*** This report responds to the recent GSN announcement and key policy and funding changes for 2018-19. The calculated financial and operational impact of last week's announcement on the GSNs for 2018-19 utilized information available at the time of preparing this report.
2. ***Staff anticipate that a balanced budget will be developed by prioritizing the maintenance of existing service levels before enhancing or adding services.*** A secondary purpose of this report is to inform the Board that preliminary budget estimates to be presented at the May Corporate Services Committee will be developed by ensuring that the existing mix of service levels is not reduced as a result of external fiscal pressures. Additionally, any new funding received from the EDU that is unrestricted will be allocated towards offsetting these pressures so as to avoid reductions in staffing levels.

C. BACKGROUND

1. ***Total overall GSN funding for the TCDSB is increasing.*** The GSN announcement sets out the key policy and funding changes supported by these regulations, such as investments in Ontario's publicly funded education system. It also sets out the funding measures intended to help boards keep up with inflationary costs and move forward with capital projects. The subject of this spring's budget process is the TCDSB operating budget. In future years, both the operating and capital budget will be presented in parallel.
2. ***GSN updates are necessary to match funding with ongoing cost pressures from growth and inflation.*** The 2018-19 GSNs also reflect funding for increased enrolment, ongoing investments to meet prior year's labour

agreements, and regular updates to the GSNs, informed by recent consultation engagement sessions and ongoing technical discussions.

3. ***Service level reductions were considered in advance of the GSN update for the last few fiscal years.*** The TCDSB was in a Multi-Year Recovery Plan (MYRP) for the last few years. As a result, the Board was faced with service level reductions in advance of setting the budget in order to pass a balanced budget. This same pre-consideration of options was not required for this year's budget process.

D. EVIDENCE/RESEARCH/ANALYSIS

Announcement Highlights of GSN and EPO allocations include:

1. ***Overall increase in spending by \$625 million.*** The additional investment of \$625M brings the total investment in education to \$24.5 billion.
2. ***Per Pupil Funding will increase.*** Per pupil funding will increase to \$12,300 annually.
3. ***More funding to address Special Education Assessment waitlists.*** The ministry is investing nearly \$125M over the next three school years to provide school boards with funding to address current waitlists for special education assessments.
4. ***Additional funding for students with extraordinary high needs.*** Over \$170M in funding, over the next three years, allocated through the Special Education Grant, which will support increased special education programs and services including:
 - a) Funding for a multi-disciplinary team or equivalent for all Boards (four additional staff per school board) to build board capacity and help teachers, education assistants, and other staff better understand and adapt to the unique needs of their students;
 - b) Funding for other staffing resources to support students with special education needs; and

- c) Funding to build capacity and provide direct support to students with special education needs, in recognition of the increase in demand for services.
5. ***Additional funding for students with extraordinary high needs.*** \$30M increase to the Special Incidence Portion allocation, to support students with extraordinary high needs to be successful in school; the maximum SIP eligible claim will increase from \$27,000 to \$38,016 adjusted annually.
 6. ***More teachers for careers and pathways planning.*** \$46M to support more than 450 additional teachers who will help Grade 7 and 8 students engage in career and pathways planning that will prepare them for success in high school.
 7. ***Additional funding support for English Language Learners (ELL).*** \$10M for demographic and growth adjustments through the Diversity in English Language Learners (DELL) (formerly Pupils in Canada) component within the Language Grant.
 8. ***Increasing investment in Mental Health Workers.*** \$24.5M, growing to \$49.5M in 2019-20, to fund approximately 180 mental health workers in 2018-19 and 400 in 2019-20. These mental health workers will support students in secondary schools who have mental health concerns through continued and expanded mental health awareness.
 9. ***Increasing the base amount of the Trustee Honoraria.*** Increasing the base amount of the Trustee Honoraria from \$5,900 to \$6,300 annually and the establishment of a working group to review the funding formula in detail.
 10. ***Increasing the Student Transportation Grant.*** Increasing the Student Transportation Grant from 2% to 4% to assist with increased transportation costs.
 11. ***The Ministry of Education will commission an external review.*** The ministry will commission an external review of the methodology for the Demographic Allocation within the Learning Opportunities Grant structure and review how boards use this allocation. This review will provide recommendations to the ministry on updating the formula and accountability structure.

12.***Create a new Program Leadership Allocation.*** Create a new Program Leadership Allocation (PLA) within the School Board Administration and Governance Grant. This allocation is comprised of six lead positions previously funded through other allocations within the GSN and through EPOs including the following:

- a) Mental Health Leaders
- b) Technology Enabled Learning and Teaching (TELT) Contacts
- c) Indigenous Education Leads
- d) Student Success Leads
- e) School Effectiveness Leads
- f) Early Years Leads (Formerly in EPO)

Note: This is not new funding. It is a funding reallocation from other GSN and/or EPO grants to the Administration and Governance Grant.

13.***New funding towards Education materials in respect of the cannabis issue.*** \$2.8 million to support school boards in developing education materials for educators, parents and students in respect of cannabis. There will be a phased in approach. Phase 1 will focus on resources, and Phase 2 will focus on training for mental health lead and professionals, to support students in schools.

14.***Funding for Executive Compensation Programs.*** Funding of \$12.1 million provided to assist boards with the implementation of their executive compensation programs. This is EPO funding outside of the Board Administration & Governance Envelope.

15.***Implementation of Cash Management strategies.*** This will entail ensuring that School Boards do not hold cash balances in excess of their operating and capital requirements. This will help reduce the borrowing costs experienced by the Province.

Preliminary Analysis of Impact on TCDSB:

16. *Impacts on TCDSB budget and overall complement is positive, but preliminary in nature.* Figure 1 below presents preliminary estimates on budget and FTE, but cannot be verified until such time as EDU releases the GSN Technical Paper as well as EFIS data. It must also be considered in the context of other fiscal pressures. This means that the number of FTEs announced by EDU may not translate to TCDSB as the Board's salary/benefits costs are higher than the assumptions EDU used and the TCDSB may need to utilize some of this funding towards offsetting other costs pressures to maintain existing services. This is the reason a range appears in the FTE column.

Figure 1: Estimated GSN Announcement Impact on TCDSB

Program	\$M	FTE
Continued Implementation of Provincially Negotiated Extension Labour Agreements for the period of 2017-19	12.0	
Elementary Guidance Teachers	2.1	12 to 18
Special Education – Multi-Disciplinary Teams	1.4	10 to 14
Transportation - 4% increase for Costs	1.2	
Class Size Investments (Grades 4 to 8)	1.0	5 to 10
EPO - Mental Health - Secondary Schools	0.8	4 to 6
School Operations - 2 % increase for Utilities	0.8	
FDK - Maximum class size reduced from 30 to 29	0.5	2 to 3
Retirement Gratuities funding benchmark reduction	(2.0)	
Implementation of Cash Management Strategies	(0.1)	
Total	17.6	33 to 51

Note: Some numbers may not add due to rounding

Developing a Balanced Budget

17. *Developing a balanced budget requires consideration of many moving parts.*

Several factors and sets of data must be considered in developing the preliminary budget estimates for consideration by the Board and public. The major contributing variables include:

- a) Student enrolment projections
- b) Staffing projections based on enrolment
- c) GSN announcements
- d) GSN technical paper
- e) EFIS (Education Financial Information System) data
- f) Inflationary pressures
- g) Legislative pressures (e.g. Bill 148)
- h) Collective Agreement arbitrations/decisions
- i) Strategies around accumulated surpluses/deficits
- j) Board initiated changes to service levels

18. *Preliminary budget estimates can only be full developed once all factors are known.*

Several of the factors listed above are known, however unfortunately some are yet to be released by the EDU (e.g. GSN technical paper, EFIS data). These are critical components in order to finalize estimates for consideration by the Board. Ministry staff have indicated that the release of this data may not be until the end of April. If this late timing comes to fruition then staff will only be in a position to bring preliminary budget estimates by the Regular Board meeting on May 17th.

19. *Rough incremental overall estimates have been developed to assess the risk of balancing the budget.*

In order to assess the risk of developing a balanced budget, staff have undertaken a rough analysis based on data known at this time as well as some assumptions. This was done to help inform the Board and the public on whether this budget will likely require reductions in service levels or if there will be monies available to undertake new Board initiatives or enhancements to service levels.

E. METRICS AND ACCOUNTABILITY

1. ***Early indications show that a balanced budget can be achieved assuming that maintaining existing service levels is a priority.*** The analysis below shows that the TCDSB can both maintain and enhance its service levels based

on data known to date and the recent GSN announcements. This approach, however, assumes that a portion of new GSNs will be directed towards maintaining existing services, thereby removing the need to reduce staffing. Figure 2 below provides an analysis that is very preliminary and should be considered for illustrative purposes only.

Figure 2: Illustrative Analysis Indicative of a Balanced Budget

	\$M
2018-19 New Cost Pressures:	
Staffing Projections	2.1
Legislative/Arbitration Impacts	5.0
Spending on New Restricted GSNs	4.6
Spending on New Unrestricted GSNs	3.0
New Operational costs pressures	<u>1.4</u>
Total 2018-19 New Cost Pressures	16.2
2018-19 New Revenues:	
Student Enrolment	10.0
New Restricted GSNs	4.6
New Unrestricted GSNs	<u>3.0</u>
Sub-Total – New GSNs	17.6
Reduction in International Students	<u>(1.3)</u>
Total 2018-19 New Revenue:	16.3
Incremental Operating Surplus/(Deficit)	<u>0.1</u>

2. *Several options exist in approaching the development of the Preliminary Budget Estimates, but are always founded in the service levels provided to Students.* Developing a balanced budget in the Education Sector is about choosing a desired mix of service levels within a funding envelope set by the Province. Service levels can be considered a broad term, but may include teaching staff complement in general, teaching staff complement for particular programs, specialized program offerings, non-staffing costs of programs, offering of programs at particular locations, provision of technology for learning, operating costs of facilities, transportation service offerings, staffing and non-staffing costs of administration. These service levels are provided to Trustees and the public throughout the year through various reports. Some of these include:

- a. Transportation Annual Report,
 - b. Annual Safe Schools Report,
 - c. International Languages Program Report,
 - d. EQAO Assessments Report,
 - e. Board Learning Improvement Plan,
 - f. Accountability Framework for Special Education, and
 - g. Annual Report on the Multi-Year Strategic Plan
3. ***This is the first opportunity for the Board to provide initial input on changing service levels.*** Staff will be developing Preliminary Budget Estimates for presentation at May Corporate Services Committee or Regular Board and must await for data from EDU to do so. However, should the Board wish to provide any initial input or direction at this point they can do so by providing input for consideration in the development of preliminary budget estimates.
4. ***Staff are approaching the budget by assuming that maintaining existing service levels should be a priority before considering providing enhancements announced by the Province.*** The GSN announcements provide opportunity to enhance service levels by adding new complement in certain areas, however staff advise that there are cost pressures facing TCDSB's existing services that are not covered by the GSN announcements. Staff are proposing to use new GSN revenues (where permissible) to offset pressures to existing services first. Secondly, new revenues can be applied to new services envisioned by the Province and also to new TCDSB initiated strategic investments (e.g. technology, Board administration etc.).
5. ***Consultation with the public will focus on service level provision.*** The consultation will consist of informing the public of the GSN announcements, potential impact on TCDSB, existing cost pressures. It will then ask for feedback on whether the provincial announcements should be fully prioritized ahead of existing service level provisions (e.g. reduce other service levels to compensate), existing service levels should be prioritized ahead of new services or solicitation of broad feedback on changing the existing mix of service levels.

F. CONCLUDING STATEMENT

This report is for the consideration of the Special Education Advisory Committee.

NEWS RELEASE

March 29, 2018 (Toronto, ON)

1 in 66 Canadian Children is Diagnosed with Autism Spectrum Disorder

Canadian rates are now more in line with how the rest of the world is counting prevalence rates

Today, the National ASD Surveillance System (NASS) released the most up-to-date Canadian prevalence rate **1 in 66 Canadian children is diagnosed with Autism Spectrum Disorder**. These results impact Canadians living with Autism Spectrum Disorder (ASD) as well as their families and caregivers. Autism Ontario can now say with confidence that the rates of ASD are increasing in Canada and so is the urgency to meet the needs of children, youth and adults on the autism spectrum, and their families.

Prevalence rates are calculated by dividing the number of children identified with ASD who live in a specific area at any time during a given year by the total number of children who live in that specific area in that year. The ratio is an average, based on a period in time, surveying a specific area and a specific age group.

In Canada, surveillance varies from province to province. For this initiative, the NASS studied Canadian children diagnosed with ASD, ages 5-17 across all provinces, which is different from the popularly quoted American prevalence rate, [1 in 68 children is diagnosed with ASD](#) which only takes into account 8 year-old children from 11 surveillance regions. It's important to note that while Ontario isn't reflected in the 2015 data, our province has been actively engaged with this project which is good news for our families.

It's also important to note this data was collected in 2015. This doesn't necessarily mean the data will be different now that it is 2018, but readers should take note. Other key findings of the [National Autism Spectrum Disorder Surveillance System Report](#) include that boys have received an ASD diagnosis four times more frequently than girls. More than half of children and youth with ASD were diagnosed by age six, and more than 90% received a diagnosis by age 12. Canadian prevalence estimates found in the report are similar to the most recent CDC rates.

The 2018 Federal Budget proposes to fund two new initiatives to support people living with ASD and their families: A national resource exchange network to help connect people with ASD and their families to information, resources, employment opportunities, and local programming; including funding for community-based projects that will help to reduce stigma and to integrate and strengthen health, social and educational programs.

Why is the rate of Autism Spectrum Disorder growing?

While we don't know why, we do know the rate of ASD is increasing and it is placing huge demands on the health care systems and showing glaring gaps in the supports available. Updated figures are important because prevalence rates and surveillance studies perform an important service for policy makers, system administrators and advocates.

Canadian research is not only vital to understanding the causes and effects of Autism Spectrum Disorder, but to make sure that people and their families living in Canada who are affected by ASD receive the best possible support. The NASS project reflects the most up-to-date epidemiological study to look at autism rates in Canada and this is important to us as an Ontario/Canadian organization.

There are so many numbers, which is the right one?

There is no correct rate. There are a number of averages out there to describe a number of areas reporting ASD diagnoses. These numbers will change over time for a variety of reasons.

The way researchers collect data for prevalence rates is inconsistent. Tracking ASD isn't done in the same way across Canada, the United States, Europe, Africa, Central and South America, Asia, and Australia. This means that globally, there are different pictures of the rates of ASD diagnoses. Flipping onto a website based in the United States will give you one rate, where you might find a different rate on a website in Europe.

It's easy to think about ASD as a number, however, we are not talking about a number. We are talking about a *person* with ASD. We are talking about a person with individual needs. We are talking about a person with loving family members. We are talking about a person who is granted equal opportunity preparing for and succeeding in adulthood. Rates like this help us to advocate for the individual needs of a person with ASD throughout their lifespan using evidence-based treatment and intervention, while remembering that developmental trajectories are constantly changing. Our province must be prepared to support children, youth and adults within the context of development, learning, family and community. This new rate will help to ensure that policy makers, system administrators, advocates and self-advocates have current data to support their work in ensuring each person with ASD is provided the means to achieve quality of life as a respected member of society.

About Autism Ontario: Autism Ontario has a 45 year history of representing thousands of families and people with ASD across Ontario. We are the only organization in Ontario that has formal parent representation in all areas of the province through our 25 Chapters. We advocate on behalf of all people with ASD and their families. To connect with us, visit autismontario.com

Vision: Acceptance and Opportunities for all people with Autism Spectrum Disorder.

Mission: To ensure that each individual with ASD is provided the means to achieve quality of life as a respected member of society.

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NEWS RELEASE

FOR IMMEDIATE RELEASE

Autism Ontario's Report on the 2018 Ontario Budget
March 28, 2018 (Toronto, ON)

For 45 years, Autism Ontario has envisioned *acceptance and opportunities for people on the autism spectrum*. The families who formed Autism Ontario in 1973 would never have imagined the prevalence rates for autism that continue to grow in Canada, even as this 2018 budget is released into the winds of the upcoming provincial election.

Regardless of which party finds themselves in a key leadership role after June 7, Autism Ontario continues to envision a province that offers seamless supports across the lifespan that reflect the wide range of expression in autism, the constantly changing needs of this able, yet vulnerable population and which addresses the needs of caregivers and families who bear both the joys and the substantial weight of care and advocacy for their children from infancy to and through adulthood.

Marg Spoelstra, Executive Director, Autism Ontario

In "A Plan for Care and Opportunity," Ontario's Finance Minister, Charles Sousa, announced plans that would contribute to the above hopes through items for specific autism supports and also through supports for people with developmental disabilities and mental health needs.

Important points of note for families with young children include an additional \$62 million directed towards the Ontario Autism Program (OAP) to expand current system capacity. At last report, 21,000 children and youth were waiting to receive autism services through this new program. Waiting lists are unacceptable for evidence-based services and we are hopeful these funds will help to alleviate the crush of families waiting to enter into autism treatment and programming.

In addition to autism programming, the Government of Ontario has recognized the importance of timely access to professional assessments for learners within the Ontario school boards. An investment of \$250 million over three years to address the current waitlists for special education assessments and improve access to special education programs and services in schools is welcome news for families who continue to advocate for their child's needs in the classroom.

Outside of the classroom, school boards will have the capacity to build multidisciplinary teams by hiring additional professional support staff including psychologists, speech and language pathologists, social workers and behaviour specialists. We know that school issues remain one of the top concerns expressed by parents of students on the autism spectrum. One of the most significant issues about ABA programming in Ontario is the challenge of access to excellence in ABA-based supports in Ontario's publicly funded schools. The gap that remains between coordinating ABA services between schools and the community must be resolved if parents are to have confidence that their children will be able to achieve their full potential.

\$2.1 billion dollars over the next four years has been directed towards mental health supports to increase the level of care and access for mental health and addictions services, including publicly funded psychotherapy, supportive housing and increased supports. Mental health issues are often seen alongside ASD, including anxiety, depression, schizophrenia and psychosis. Historically, mental health services have not demonstrated capacity to serve people on the autism spectrum. It is our hope that although not named specifically, they will have equal access to the proposed system-wide supports. We are also pleased to see that First Nations, Inuit and Metis children and youth are specifically named to receive community-designed/based mental health services.

\$1.8 billion directed towards increasing Ontario Works and Ontario Disability Support Program (ODSP) rates by three per cent annually for the next three years, starting in fall 2018 is welcomed news for those individuals eligible to receive ODSP, however, over half of individuals with ASD are ineligible for that support because they do not meet Developmental Services Ontario criteria. Our question of “if not this door, then which door?” remains. Ontarians with ASD continue to struggle with a systemic lack of accessibility, inequity and massive unmet needs in the current service systems in Ontario.

We know that the rates of autism are increasing in Canada and so is the urgency to meet the needs of children, youth and adults on the autism spectrum, and their families. Ontario must be prepared to support all individuals with ASD within the context of development, learning, family and community throughout our province. This announcement is another step in the right direction, and as funding for services and supports continue to evolve and grow, Autism Ontario will continue to support access to seamless, individualized, continually-assessed, evidence-based and effective interventions and supports across the lifespan of all people with ASD.

About Autism Ontario: Autism Ontario has a 45 year history of representing thousands of families and people with ASD across Ontario. We are the only organization in Ontario that has formal parent representation in all areas of the province through our 25 Chapters. We advocate on behalf of all people with ASD and their families. To connect with us, visit autismontario.com

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AUTISM SPECTRUM DISORDER AMONG CHILDREN AND YOUTH IN CANADA 2018

A REPORT OF THE NATIONAL AUTISM
SPECTRUM DISORDER SURVEILLANCE SYSTEM



PROTECTING AND EMPOWERING CANADIANS TO IMPROVE THEIR HEALTH



Public Health
Agency of Canada

Agence de la santé
publique du Canada

**TO PROMOTE AND PROTECT THE HEALTH OF CANADIANS THROUGH LEADERSHIP, PARTNERSHIP,
INNOVATION AND ACTION IN PUBLIC HEALTH.**

—Public Health Agency of Canada

Également disponible en français sous le titre :
Trouble du Spectre de l'autisme chez les enfants et les adolescents au Canada, 2018
Un rapport du Système national de surveillance du trouble du spectre de l'autisme

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SPECTRUM DISORDER SURVEILLANCE SYSTEM

AUTISM SPECTRUM DISORDER AMONG CHILDREN AND YOUTH IN CANADA 2018

A REPORT OF THE NATIONAL AUTISM SPECTRUM DISORDER SURVEILLANCE SYSTEM

Public Health Agency of Canada

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LIST OF ACRONYMS

ADDM	Autism and Developmental Disabilities Monitoring Network
ASD	Autism Spectrum Disorder
ASD-AC	Autism Spectrum Disorder Advisory Committee
CDC	Centers for Disease Control and Prevention
DSM-5	Diagnostic and Statistical Manual of Mental Disorders, 5th Edition
ICD	International Classification of Diseases
INSPQ	Institut national de santé publique du Québec
MED-ÉCHO	Maintenance et exploitation des données pour l'étude de la clientèle hospitalière
MSSS	Ministère de la Santé et des Services sociaux
NASS	National Autism Spectrum Disorder Surveillance System
NEDSAC	National Epidemiological Database for the Study of Autism in Canada
PASS	Prince Edward Island Autism Surveillance System
PIA	Privacy Impact Assessment
PHAC	Public Health Agency of Canada
PT/PTs	Provinces and Territories
RAMQ	Régie de l'assurance maladie du Québec
SISMACQ	Système intégré de surveillance des maladies chroniques du Québec
TIENET	Technology for Improving Education Network

FOREWORD

MESSAGE FROM THE CHIEF PUBLIC HEALTH OFFICER

As Chief Public Health Officer, I am pleased to present the National Autism Spectrum Disorder Surveillance System (NASS) 2018 Report. This surveillance report is “Made in Canada” and provides a first reporting of national data and information to improve our understanding of Autism Spectrum Disorder (ASD) in Canada.

Approximately 1 in 66 children and youth are diagnosed with ASD in Canada. For families, an ASD diagnosis can involve significant emotional and financial challenges. For those in health, education and social services sectors, ASD is an important issue due to the resources those living with ASD require for intervention and treatment and due to the on-going impact on the health and well-being of Canadian children, youth, adults and their families and communities.

A critical aspect in responding to ASD in Canada is addressing key knowledge gaps in our understanding of the number and characteristics of people diagnosed with ASD both across regions and over time. To contribute towards this need, and consistent with its core role for health surveillance, the Public Health Agency of Canada has developed the NASS. The NASS is a collaboration of federal, provincial and territorial governments, working together to build a comprehensive picture of ASD in Canada.

It is my hope that this report will be a valuable resource for health, and other professionals, government organizations and researchers to inform ASD programs and support evidence-based decision making in Canada.

I would like to take this opportunity to thank the organizations and individuals who have dedicated their time and expertise to collaborate on this report. These include members of the National ASD Advisory Committee and collaborators from participating provincial and territorial governments. The Public Health Agency of Canada is pleased to work with these individuals in our shared commitment to improving the health of Canadians.



Dr. Theresa Tam

EXECUTIVE SUMMARY

The Public Health Agency of Canada's National Autism Spectrum Disorder (ASD) Surveillance System (NASS) is a federally funded initiative to estimate and monitor the number of individuals with ASD. The initial phase of the program estimates this number among children and youth. The findings of the 2015 NASS report focuses on those aged 5–17 years, from six provinces and one territory: Newfoundland and Labrador, Nova Scotia, Prince Edward Island, New Brunswick, Quebec, British Columbia and the Yukon. A summary of the 2015 findings from NASS are listed below.

SUMMARY OF FINDINGS

- Among children and youth 5–17 years old across seven provinces and territory, the combined prevalence of ASD for the year 2015 is 1 in 66 (15.2 per 1,000).
- Males were diagnosed with ASD four times more frequently than females. NASS found that 1 in 42 males (23.9 per 1,000) and 1 in 165 females (6.0 per 1,000) aged 5–17 years old were diagnosed with ASD.
- Retrospective data from 2003–2015 from Newfoundland and Labrador, Prince Edward Island, and Quebec showed that, among 5–14 year olds, ASD prevalence has increased from 6.0 per 1,000 to 19.6 per 1,000 in Newfoundland and Labrador; from 5.0 per 1,000 to 17.7 per 1,000 in Prince Edward Island; and, from 3.5 per 1,000 to 15.7 per 1,000 in Quebec.
- In comparison to the Autism and Developmental Disabilities Monitoring (ADDM) Network from the United States' Centers for Disease Control and Prevention (CDC), which looks only at 8 year olds, NASS' prevalence was 1 in 63 (8 year olds) in the year 2015 versus the ADDM Network's prevalence of 1 in 68 in the year 2012.

INTRODUCTION

The Public Health Agency of Canada (PHAC) acknowledges the efforts that are taking place across the country towards supporting those who are living with Autism Spectrum Disorder (ASD). Most of this support takes place in the health care, education and social services sectors—domains under the responsibility of provincial and territorial governments.

An essential aspect in supporting these front-line efforts is developing an understanding of the magnitude and characteristics of individuals with ASD both across regions and over time. Although there are existing repositories of ASD data across the country, there are no comprehensive and comparable national level data.

In response, PHAC has established the National ASD Surveillance System (NASS), with an initial focus on child and youth populations.

NASS is a collaboration of federal, provincial and territorial governments, working to build a comprehensive picture of ASD in Canada. NASS will contribute evidence to help inform critical planning of programs, services and research that impact Canadians living with ASD, their families and caregivers.

WHAT IS AUTISM SPECTRUM DISORDER (ASD)?

ASD is a neurodevelopmental disorder that includes impairments in language, communication skills, and social interactions combined with restricted and repetitive behaviours, interests or activities.¹ Signs of ASD are typically detected in early childhood, with boys four to five times more frequently diagnosed with ASD than girls.²

Each person with ASD is unique and will have different symptoms, deficits and abilities. Because of the range of characteristics, this condition is named a “spectrum” disorder, where ones’ abilities and deficits can fall anywhere along a spectrum, and thereby, support needs may range from none to very substantial. It is a complex life-long condition that impacts not only the person with ASD, but their families, caregivers and communities.

In Canada, the diagnosis of ASD is usually provided by medical doctors or psychologists. ASD diagnostic assessments typically use both direct observation and developmental interviews to inform the diagnosing clinician’s clinical judgement based on ASD criteria from the Diagnostic and Statistical Manual of Mental Disorders (i.e., DSM-5).³

It is common for individuals living with ASD to have one or more comorbid conditions. Comorbid conditions are diseases or conditions that exist alongside a primary condition. In addition to other developmental disorders (Attention Deficit/Hyperactivity Disorder, language disorders, intellectual disability, sensory integration disorder), other comorbid conditions associated with ASD may include psychiatric, neurological, gastrointestinal and sleep disorders. These are often diagnosed as, but not limited to, depression, anxiety disorder, obsessive compulsive disorder, Tourette syndrome, seizures or epilepsy, insomnia and gastro-intestinal issues.⁴

WHAT IS PUBLIC HEALTH SURVEILLANCE?

Public Health Surveillance is defined as the tracking and forecasting of any health event or health determinant through the on-going collection of data; their integration, analysis and interpretation; and, the communication of results for public information, policy and decision-making.

Surveillance is a core function of public health and PHAC; and, is viewed as an integral component of any public health strategy.

Recognizing shared responsibility with provinces and territories (PTs) on public health issues, PHAC works to build an effective public health system that enables Canadians to achieve better health and well-being. In this capacity, PHAC plays a unique role in leading and coordinating national public health initiatives.

WHAT IS THE NATIONAL AUTISM SPECTRUM DISORDER SURVEILLANCE SYSTEM (NASS)?

NASS is a collaboration of federal, provincial and territorial governments, working to build a comprehensive picture of ASD in Canada. NASS will contribute evidence to help inform critical planning of programs, services and research that impact Canadians living with ASD, their families and caregivers.

Led and coordinated by PHAC, NASS tracks the occurrence and demographic characteristics of children and youth with ASD, including estimates of prevalence, incidence and key characteristics, patterns and trends both over time and across geographic regions. NASS collects, analyzes and reports ASD data from multiple sectors such as health, education and social services.

THE KEY OBJECTIVES OF NASS ARE TO:

- Estimate how many children and youth in Canada have ASD (i.e. prevalence) and how many new cases (i.e. incidence) are emerging over time;
- Describe the population of children and youth in Canada with ASD and compare patterns within Canada and internationally;
- Increase public awareness and understanding; and,
- Inform research, policy and program decision-making.

HOW WAS NASS DEVELOPED?

The 2008 Federal Budget committed to establishing a surveillance system for developmental disorders in Canada as part of the federal *Action Plan to Protect Human Health from Environmental Contaminants*. The initial focus has been placed on the surveillance of ASD in children and youth (i.e., developing NASS).

Following an initial phase to hire core staff to begin consulting provinces and territories (PTs) and planning the development of NASS, PHAC established the ASD-Advisory Committee (ASD-AC) in 2011 to advise on the most effective approaches to capture data on ASD across Canada. Members of this committee include national experts from the areas of surveillance, epidemiology, psychology, medicine, education and knowledge translation; and, representatives from national stakeholder organizations that represent individuals and families living with ASD.

From 2011 to 2013, environmental scans were conducted by PHAC within all PTs. ASD data holders and data sources across Canada were identified with the aid of the Healthy People and Communities Steering Committee of the Pan-Canadian Public Health Network. In 2007, prior to the inception of NASS development, PHAC coordinated a technical workshop with clinicians and researchers to determine surveillance needs and data options for a national system. A list of priority data elements to track ASD across Canada was developed. This list provided the basis of data elements sought through the scan. In total, 47 data sources were surveyed to assess corresponding case definitions and data elements for potential use in NASS.

The environmental scans were one of the major consultation pieces that informed the development of NASS, including: NASS ASD surveillance case definition; the data elements to be sought; NASS data dictionary (i.e., a common reference guide for data collection) and other national infrastructure components. The environmental scans were also instrumental in initiating partnerships with PT data holders; and, in validating that education, health and social services sectors would be the key data sources for developing NASS.

From 2012 to 2013, PHAC planned, developed and presented NASS implementation plans, including a collaborative and phased multi-sectoral PT engagement strategy, for approval by the Public Health Network as well as the Council of Chief Medical Officers of Health. This provided the impetus for NASS implementation. All PTs received Letters of Invitation to participate.

Subsequently, PHAC has been working closely with PT partners in the development of the surveillance system, via this collaborative and phased approach. This approach was designed to be inclusive and accommodate varying states of PT readiness; and, has allowed PHAC to engage individual PTs based on their capacity to participate and the readiness of their potential data sources.

The phased approach to NASS planning and implementation has included supporting PT partners in conducting preliminary feasibility and validation projects. These are the basis of negotiated agreements, the formal mechanisms for operationalizing program implementation. Key to NASS planning is ensuring that data collection can be reasonably standardized to inform comparable monitoring of trends over time and across regions.

Supported by federal funding, 2014 marked the first wave of PTs joining NASS. Following completion of some initial feasibility projects, validation studies and data sharing agreements with participating PTs, the first wave of data collection for NASS began in 2015. As of September 2017, seven PTs have contributed 2015 data to NASS. Additional PTs are being phased in as feasibility and validation work is completed in their respective regions.

WHAT METHODOLOGY IS USED TO COLLECT DATA?

A number of surveillance methods to estimate the prevalence of ASD were considered, most notably: record-review; survey data; and administrative data collection methods. Each of these methods uses a different approach to identify information.

A record-review method involves access to all available documents from health and/or education sources to identify children with ASD and/or ASD behaviours. The records are reviewed by trained professionals to classify cases. The survey data collection method involves the direct collection of data through standardized tools that are primarily administered with telephone or electronic questionnaires. The third method involves accessing details from administrative databasesⁱ that have been designed by government agencies and other organizations to document the provision of health, education and/or social services. These data are then analyzed for surveillance purposes.

The use of an administrative data methodology is a more cost effective approach than either a record review or survey method. Administrative data have been previously and successfully used to describe ASD in Canada, in the National Epidemiological Database for the Study of Autism in Canada (NEDSAC).ⁱⁱ

Administrative data used in NASS are provided to PHAC under strict conditions and are governed by agreements reached between the data holders and PHAC. The *Access to Information Act*, *Privacy Act*, and legislation pertaining to data providers, govern the sharing of administrative data with PHAC.

Further description of the NASS surveillance methodology is provided in the section entitled, *Technical Annex: NASS Surveillance Methods*.

ⁱ Administrative data refers to individual case level information maintained as part of routine operations such as in the areas of health, education and social services. These records hold general information on individuals related to the system(s) with which they have interacted, and not necessarily detailed clinical information related to a particular condition.

ⁱⁱ NEDSAC was conducted by Queen's University and funded by the Canadian Institutes for Health Research. It demonstrated that it is feasible to have a multi-jurisdictional and multi-sectoral network for ASD monitoring that uses, and in some cases links, administrative data.

WHO IS COUNTED?

NASS collects anonymized case-level or aggregated data based on administrative data from health, education or social service sectors, from participating PTs, on children and youth aged 5–17 years, diagnosed with ASD. Children less than 5 years of age and youth greater than 17 years of age were not included in this report as incomplete case capture was identified and denominator data were incomplete in some regions.

Given variability in age at diagnosis, the NASS population under surveillance focuses on an age range (i.e., 5–17 year olds), rather than a specific age (e.g., 8 year olds which is done in the United States), in order to provide a more comprehensive picture of the prevalence of ASD in Canada.

Age at diagnosis of ASD can be influenced by a number of factors that can include clinical characteristics, the complexity of clinical symptoms, socio-demographic status, parental awareness/concern, accessibility and proximity to assessment clinics or specialists, and systems interactions. A critical review of 42 studies found that the mean age at diagnosis for these studies ranged from 3–10 years old.⁵ In a more recent study the median age at diagnosis was 5.3 years old, with a range of age of diagnosis from 2–17 years old.⁶

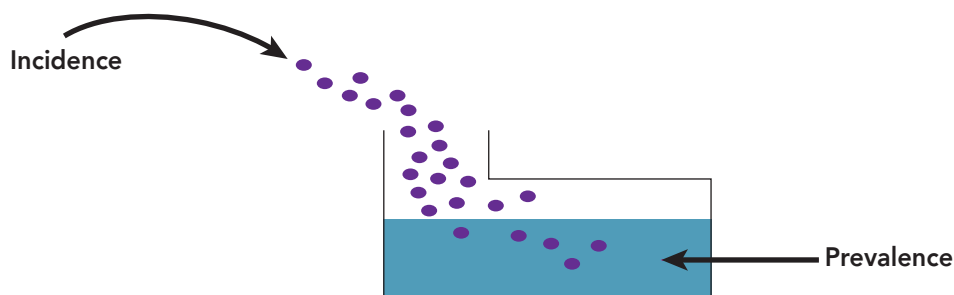
For NASS, some PTs provided the median age of diagnosis whenever that information was available within their data source. Furthermore, NASS uses different data sources such as education, health and social services, which are more amendable to capture cases at different age ranges.

WHAT INFORMATION IS COUNTED?

NASS is particularly interested in reporting on two indicators with respect to ASD estimates in Canada:

- **Prevalence:** The total number of cases diagnosed compared to the total number of individuals in a population for a specific time period (e.g., a specific year—2015 or a specific date within a year), supporting comparisons by age, sex, region, time and/or other factors.
- **Incidence:** The number of newly diagnosed cases in a specific time period (e.g. a specific year—2015) in a defined population. This may inform a more targeted understanding of any changes (increases/decreases) by age, sex, region, time and/or other factors. For NASS, the incidence year is attributed to the year in which cases are first diagnosed.

FIGURE 1: Incidence and prevalence illustration



For ASD prevalence, the numerator is the total number of identified ASD cases collected from PT data; the denominator is the total number of Canadian children and youth at that point in time. Incidence denominator would only include the total number of Canadian children and youth who are not included as ASD cases. Estimates can be expressed as a percentage (i.e., X %); a rate (i.e., X per 1,000); and, as a ratio (i.e., 1 in X number).

The foundational principle in public health surveillance focuses on the continuous, systematic collection, analysis and interpretation of health-related data which is needed for the planning, implementation and evaluation of health practices. A standardized case definition is used to ensure uniform criteria are utilized when identifying cases enabling data to be counted and compared.

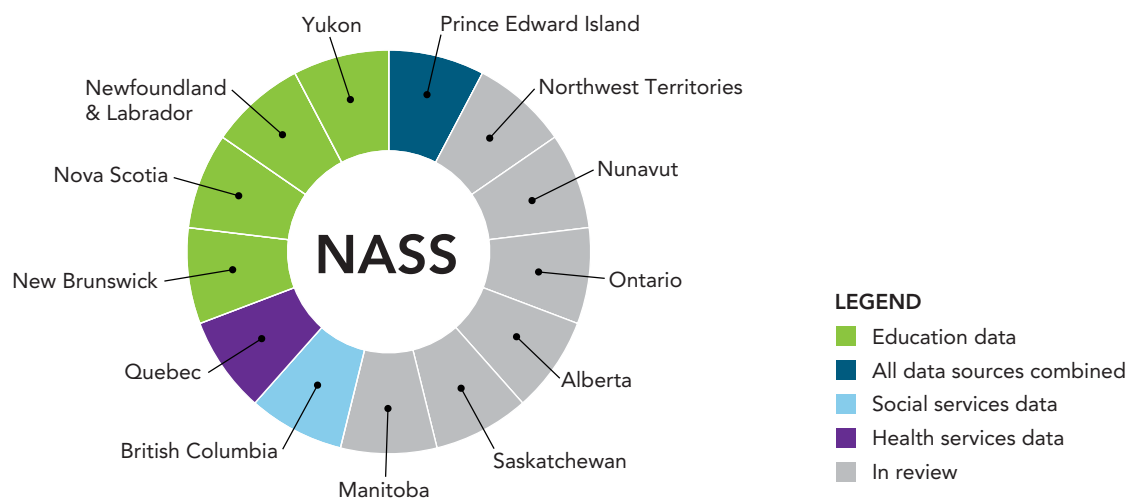
In consultation with the ASD-AC, a case definition for ASD surveillance, as well as data elements were established; both of which served to define the surveillance information that was needed to be gathered from PT data sources.

Further description of NASS case definition and data elements are provided in the section entitled, *Technical Annex: NASS Surveillance Methods*.

WHAT DATA SOURCES WERE USED TO COLLECT DATA?

NASS data are collected from a variety of sources, namely from education, social services and health sectors. The data source for each PT was identified through the environmental scans conducted from 2011 to 2015. Figure 2 below identifies the PT ASD data sources from the participating regions for NASS.

FIGURE 2: Provinces and territories by ASD data source for NASS, 2015



NATIONAL RESULTS

WHAT PROPORTION OF CHILDREN AND YOUTH ARE REPRESENTED IN 2015 RESULTS?

Children and youth residing in the seven PTs participating in NASS represented a total of 40% of all children and youth aged 5–17 years across Canada (based on the 2011 Canadian census). Looking only at the population totals from the seven participating PTs in 2015, data collected by NASS represented a total of 88% of children and youth from the participating PTs.

HOW MANY CHILDREN AND YOUTH WERE IDENTIFIED WITH ASD IN 2015?

A combined prevalence of 1 in 66 children and youth (i.e., 15.2 per 1,000) 5–17 years of age were diagnosed with ASD in 2015 across the seven participating PTs (Figure 3). The number of children and youth with ASD varied between PTs, from 1 in 126 in the Yukon to 1 in 57 in Newfoundland and Labrador.

FIGURE 3: ASD prevalence among 5–17 year olds, 2015



Number of Children Identified with ASD

1 in 66

HOW DO ASD PREVALENCE RATES DIFFER BY SEX AND AGE?

Prevalence estimates are reported as being much higher in males than females. In 2015, males were identified with ASD four times more frequently at 1 in 42 (i.e., 23.9 per 1,000) than females at 1 in 165 (i.e., 6.0 per 1,000) (Figure 4). Prevalence in males ranged from 12.8 per 1,000 (1 in 78) in the Yukon to 28.8 per 1,000 (1 in 35) in Newfoundland and Labrador. Prevalence in females ranged from 2.6 per 1,000 (1 in 379) in the Yukon to 6.5 per 1,000 (1 in 153) in Quebec.

FIGURE 4: ASD prevalence by sex, 2015

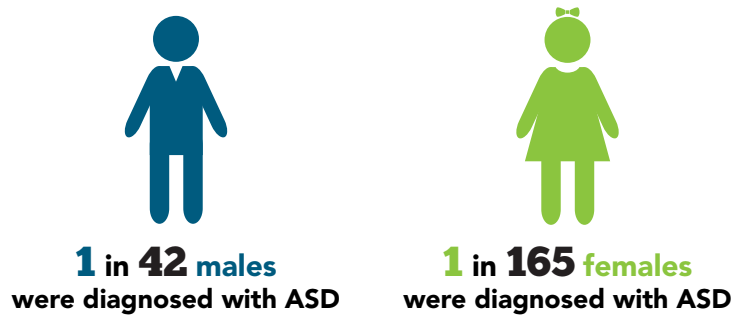
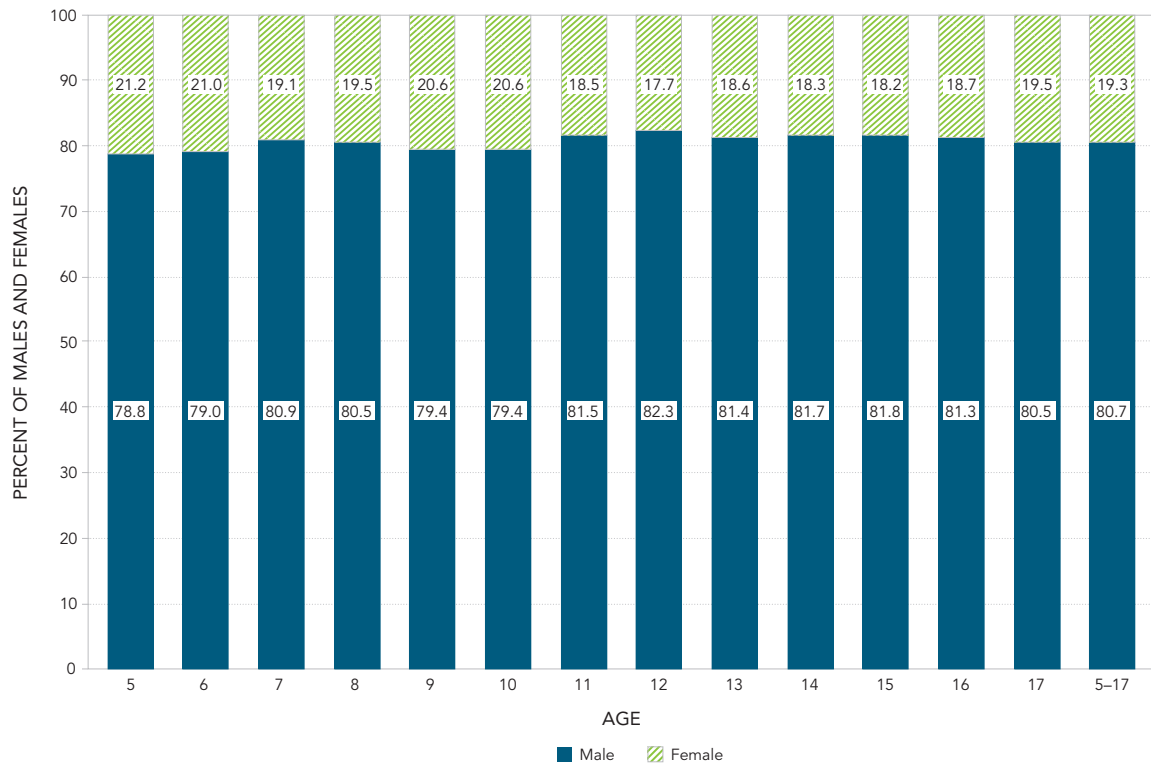


FIGURE 5: Percentage of males and females with ASD by age, 2015



The proportion of males to females is consistently greater across all ages, as displayed above in Figure 5.

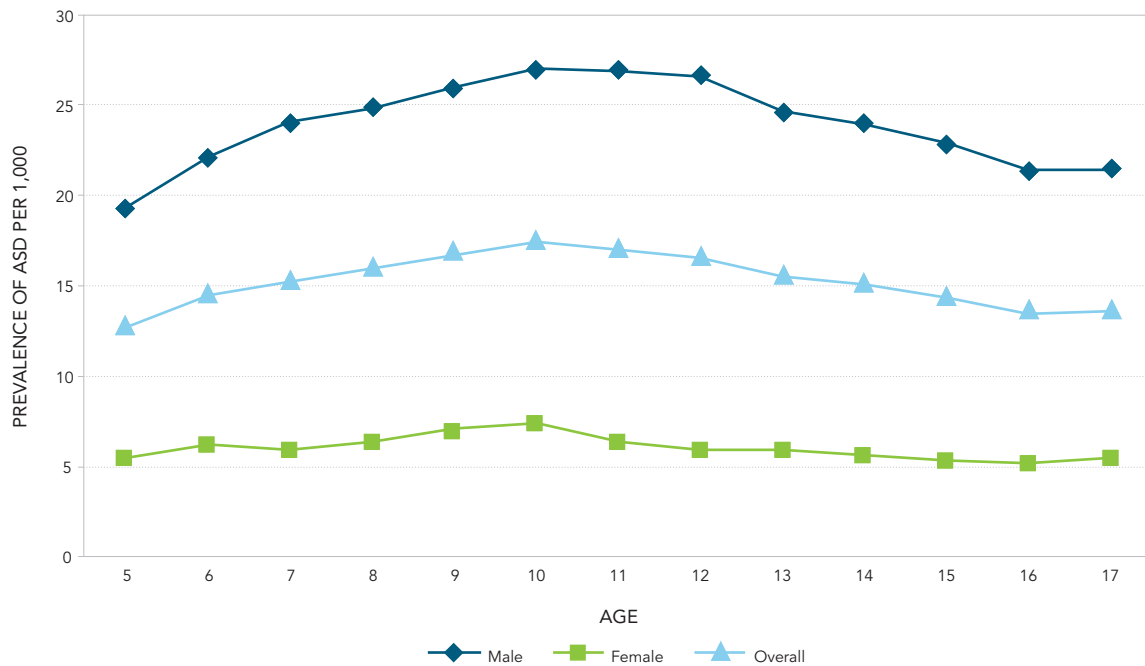
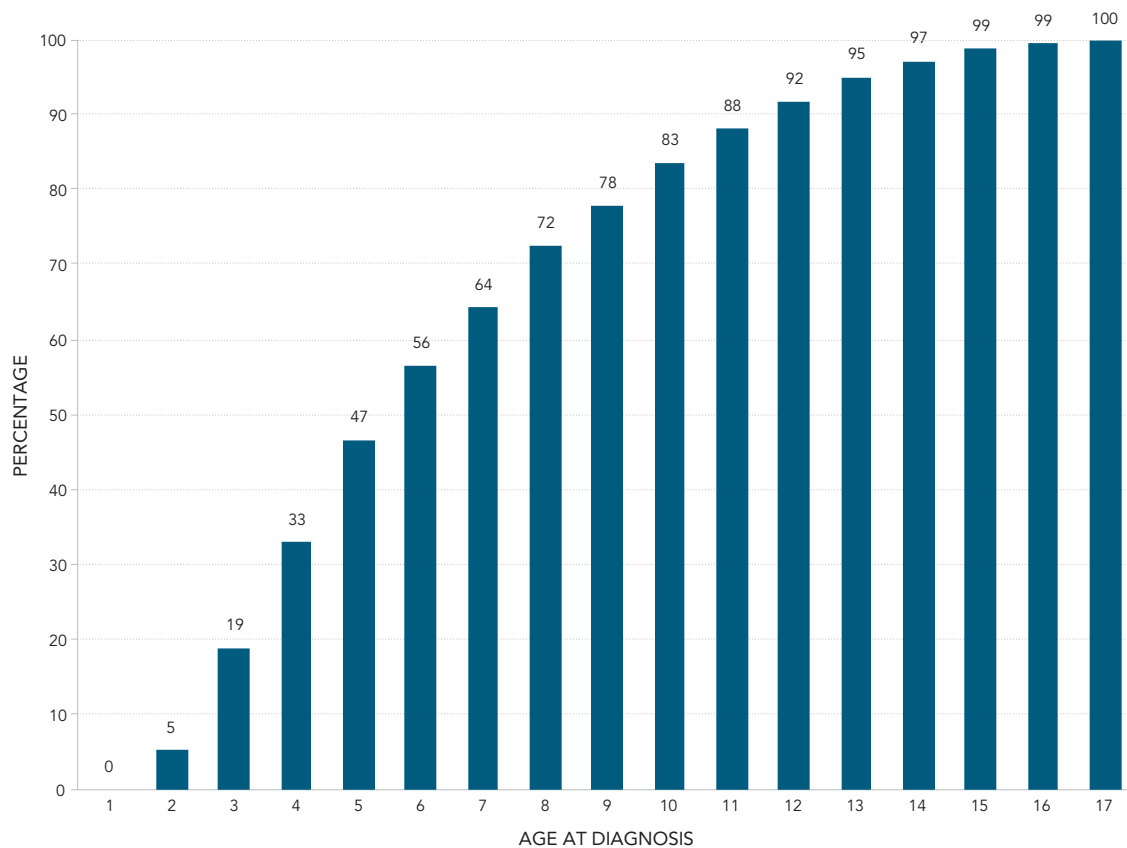
FIGURE 6: ASD prevalence per 1,000 by age and sex, 2015

Figure 6 presents a cross-sectional snap-shot in 2015 of ASD prevalence by age and sex. This figure does not mean that the prevalence of ASD decreases with age, rather that the majority of cases are diagnosed at a younger age at this point in time (year 2015), perhaps due to increased incidence or other factors. Prevalence among males is consistently higher than among females.

AT WHAT AGE ARE CHILDREN AND YOUTH WITH ASD TYPICALLY DIAGNOSED?

Among those diagnosed by 17 years of age, 56% had received their diagnosis by 6 years of age; almost three-quarters (i.e., 72%) had been diagnosed by 8 years of age; and less than 10% were diagnosed after 12 years of age. Figure 7 illustrates the distribution of ASD cases diagnosed by 17 years old, by age of diagnosis as a cumulative percentage, among 5–17 year olds in 2015. These data represent cases from Prince Edward Island, Nova Scotia, Newfoundland and Labrador and the Yukon.

FIGURE 7: The cumulative percentage of 5–17 year olds with ASD by age of diagnosis, 2015*

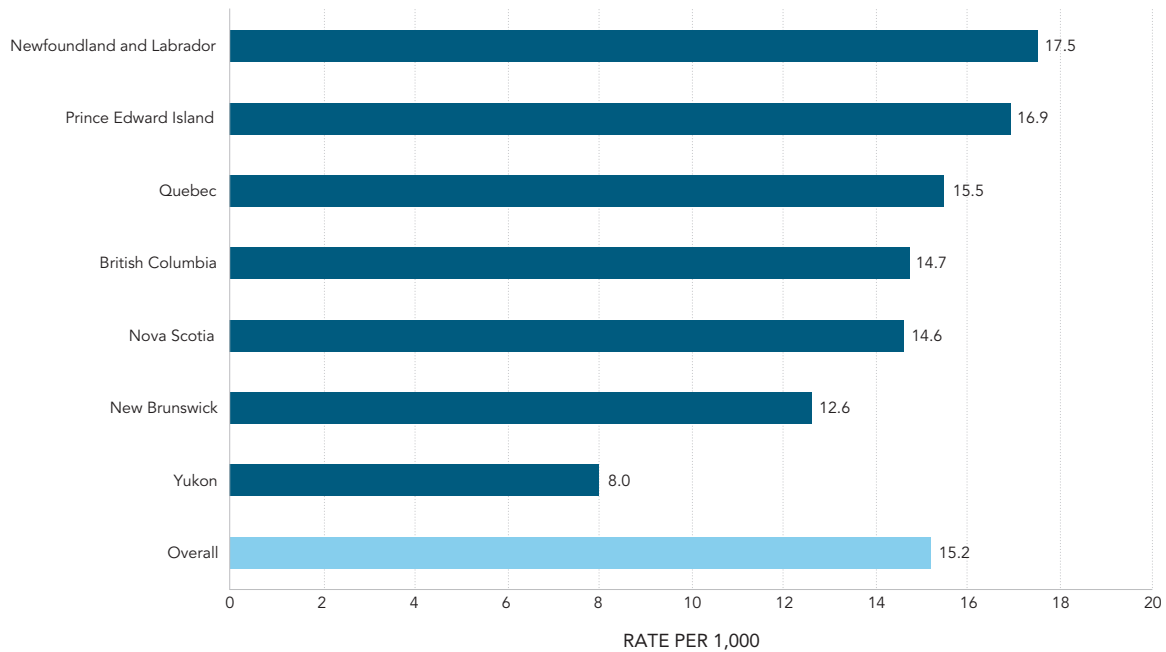


* Includes data from Prince Edward Island, Nova Scotia, Newfoundland and Labrador and the Yukon.

HOW DO RESULTS VARY BY PROVINCE AND TERRITORY?

The overall combined prevalence estimate was 15.2 per 1,000 in 2015 (Figure 8). Prevalence estimates ranged from 8.0 to 17.5 per 1,000 (or a range of 0.8 to 1.8 percent).

FIGURE 8: ASD prevalence per 1,000 by province, territory and overall, 2015



NOTE: Overall prevalence includes the six participating provinces and one territory.

There are a number of factors that may influence prevalence estimates and variances between regions. For instance, PTs with surveillance systems that rely on multiple data sources (i.e., Prince Edward Island); those with long standing programs and systems (i.e., Prince Edward Island and Newfoundland and Labrador); or those that employ active case ascertainment methods (i.e., Prince Edward Island and Newfoundland and Labrador) may report relatively higher prevalence estimates than other PTs.

As seen in Table 1, the provinces with large populations contributed a larger number of ASD cases to NASS. These larger PTs will thereby significantly influence the overall national prevalence estimates. In particular, British Columbia and Quebec have much larger populations than the Atlantic Provinces and the Yukon. British Columbia and Quebec made up 89 percent of the population submitting data to NASS and these two PTs contributed 90 percent of the ASD cases reported in 2015. It should be noted that the larger population provinces will always influence the overall prevalence estimates much more than the smaller PTs.

TABLE 1: ASD prevalence per 1,000 by province/territory and sex, 2015

PROVINCE/ TERRITORY	POPULATION TOTAL OF 5–17 YEAR OLDS	ASD CASES TOTAL	OVERALL PREVALENCE PER 1,000	RATIO	MALE PREVALENCE PER 1,000	FEMALE PREVALENCE PER 1,000	FEMALE TO MALE PREVALENCE RATIO
Total	1,916,588	29,099	15.2	1:66	23.9	6.0	1:4
Newfoundland and Labrador	66,769	1,167	17.5	1:57	28.8	5.6	1:5
Nova Scotia	47,670	697	14.6	1:68	23.2	5.7	1:4
Prince Edward Island	19,666	332	16.9	1:59	28.7	5.4	1:5
New Brunswick	62,378*	789	12.6	1:79	19.1	5.9	1:3
Quebec	1,094,262	16,987	15.5	1:64	24.1	6.5	1:4
British Columbia	616,100	9,082	14.7	1:68	23.6	5.3	1:5
Yukon	4,772	38	8.0	1:126	12.8	2.6	1:5

* The population in New Brunswick is 6–17 year olds.

HOW DO RESULTS COMPARE WITH EARLIER YEARS?

The geographic regions able to provide retrospective (historical) data were Newfoundland and Labrador, Prince Edward Island and Quebec.

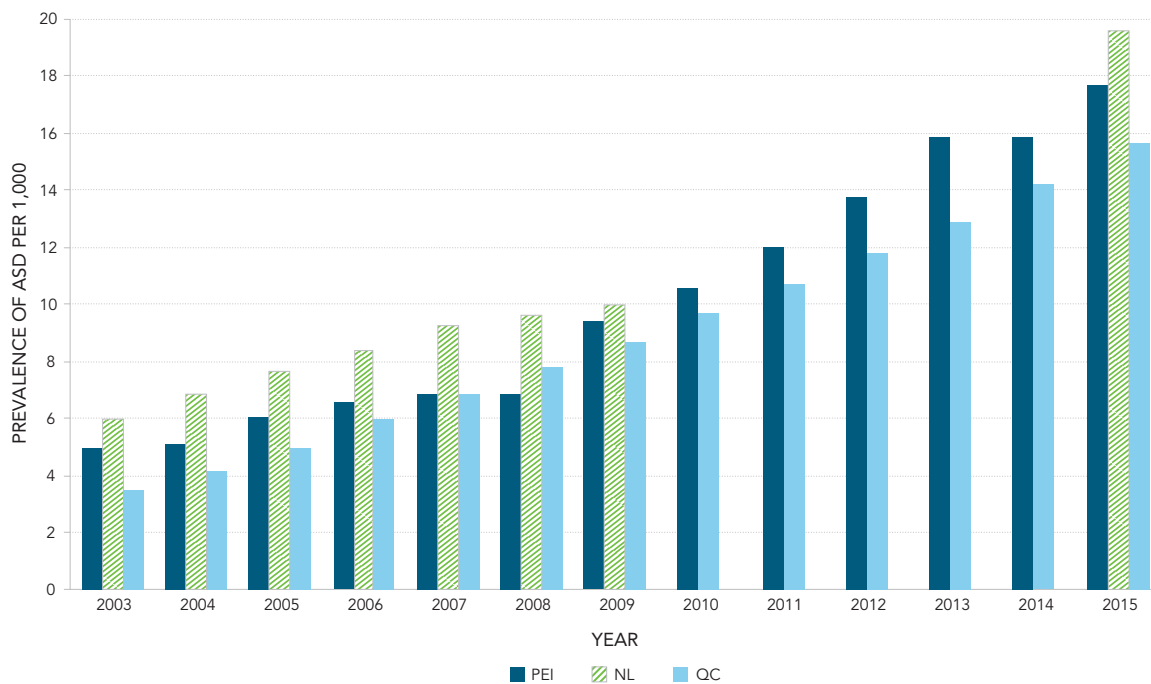
Data from Quebec were obtained from the *Système intégré de surveillance des maladies chroniques du Québec (SISMACQ)*, which collected data from the year 2000 onward.⁷ Data from Newfoundland and Labrador and Prince Edward Island were collected as part of the NEDSAC surveillance program.⁸

Newfoundland and Labrador and Prince Edward Island could only provide data on 5–14 year olds. Further, retrospective data received from Newfoundland and Labrador are limited to the period of 2003–2009.

Through NEDSAC, Prince Edward Island collected data from 2003–2010. From 2011–2015 Prince Edward Island continued collecting ASD data using similar methods established with NEDSAC. In 2015, Prince Edward Island officially launched the PASS system (i.e., the Prince Edward Island Autism Surveillance System), with the intention to report to NASS and to provide information to the province.

These data reflect the years 2003 to 2015, among those aged 5–14 years. The ASD prevalence has increased from 6.0 per 1,000 to 19.6 per 1,000 in Newfoundland and Labrador; from 5.0 per 1,000 to 17.7 per 1,000 in Prince Edward Island; and from 3.5 per 1,000 to 15.7 per 1,000 in Quebec. These data are illustrated below in Figure 9. Data from Newfoundland and Labrador were unavailable from 2010–2014.

FIGURE 9: ASD prevalence per 1,000 in Quebec, Newfoundland and Labrador, and Prince Edward Island from 2003–2015 among 5–14 year olds



NOTE: Prince Edward Island and Newfoundland and Labrador collected ASD data as part of the NEDSAC program. Prince Edward Island continued and Newfoundland and Labrador stopped in 2010. The 2015 data represent data from NASS for ages 5–14 years. This age group is used because it was the age group for which historical data from NEDSAC was collected and reported.

WHAT RATES OF INCIDENCE WERE REPORTED FOR 2015?

Only Quebec was able to provide 2015 incidence data to NASS. Quebec uses health services data and was able to capture all newly diagnosed cases from 0 to 18 years of age. This allowed for incidence rates to be calculated. These results are later reported as part of individual provincial and territorial results.

As education databases estimate those attending school, most education databases cannot provide an accurate estimate of incidence. It is anticipated that incidence data from other regions will be collected as NASS expands to include additional PTs.

HOW DO NASS RESULTS COMPARE WITH RESULTS FROM THE UNITED STATES?

Initiated in 2000, the Autism and Developmental Disabilities Monitoring (ADDM) Network is an active surveillance system that provides estimates of the prevalence and characteristics of ASD among children aged 8 years in multiple communities across the United States.

In 2012, records from multiple sources were screened and abstracted from 11 different Network sites (Arkansas, Arizona, Colorado, Georgia, Maryland, Missouri, New Jersey, North Carolina, South Carolina, Utah and Wisconsin). Records were then reviewed by trained clinicians to determine if a child has ASD. This is referred to as a records-review method. Such reviews do not rely exclusively on a child having an ASD diagnosis, but also includes review of records for children with documented behaviours that are consistent with ASD.

Several key differences should be noted in comparing data reported by the ADDM Network and NASS, as follows:

- Data captured in the ADDM Network are limited and represent an estimated 8.5% of 8 year olds in the United States. Surveillance sites were determined through a competitive process and were not selected to be representative of children aged 8 years nationally or in the states where the surveillance site was located.
- Approximately 18% of cases identified in the ADDM Network have no formal ASD diagnosis and have been identified as an ASD case based on chart reviews using recorded symptoms as the source of diagnosis when no diagnosis is found on file.
- The NASS collects information on 5–17 year olds and the population reported on is representative of this respective age range.
- The NASS only includes ASD cases with a confirmed diagnosis. Lastly, most recent data reported by the ADDM Network were collected in 2012; while with the NASS, data reported were collected in 2015.

Despite the differences in methodology, the results from these two surveillance systems are quite similar. In comparing the prevalence of ASD among 8 year olds in Canada versus 8 year olds in the United States (Table 2), NASS reports a rate of 1 in 63 (2015), whereas most recent estimates from the ADDM Network report a prevalence of 1 in 68 (2012).

TABLE 2: NASS and ADDM Network (Canada and United States) comparison

	NASS	ADDM NETWORK
Year of Data Collection	2015	2012
Ages	5–17 year olds	8 year olds
Prevalence	1:66 (5–17 year olds) 1:63 (8 year olds)	1:68 (8 year olds)

In the United States, in 2012, 8 year old males were 4.5 times more commonly identified with ASD than 8 year old females. In comparison, in Canada, in 2015, 8 year old males are diagnosed 4.1 times more frequently than 8 year old females.

Differences in prevalence rates between Canada and the United States may be due to the data being reported from different years and to different data collection methods. Differences between dates and methods (e.g., age(s) of population under surveillance) should be considered when comparing the prevalence of ASD between any jurisdictions.⁹

PROVINCIAL AND TERRITORIAL RESULTS

In 2015, six provinces and one territory submitted data to NASS (see Technical Annex Table 3). The participating provinces and territory are: Newfoundland and Labrador, Nova Scotia, New Brunswick, Prince Edward Island, Quebec, British Columbia, and the Yukon.

NEWFOUNDLAND AND LABRADOR

The Department of Education and Early Childhood Development's Education Services Database contains information for all students 5–21 years old, attending public schools in the province's two school districts. The Department, through the school districts, offers services to students with a letter of diagnosis from a qualified health professional. The Evaluation and Research Division collects individual-level data from schools specific to special education services through the Educational Service Database. In Newfoundland and Labrador, the data reported represent 97.1 percent of the population based on 2015 census population estimates for 5–17 year olds.

► **What was the ASD prevalence in Newfoundland and Labrador in 2015?**

The 2015 overall prevalence of ASD in Newfoundland and Labrador was 17.5 per 1,000 (1 in every 57 or 1.8 percent) of 5–17 year olds.

► **What was the mode or most frequent age of diagnosis?**

The mode or most frequent age of diagnosis was 4 years old.

► **What was the prevalence by sex?**

In Newfoundland and Labrador, the prevalence of ASD in males was 28.8 per 1,000 males (1 in every 35 or 2.9 percent). The prevalence of ASD in females was 5.6 per 1,000 females (1 in every 179 or 0.6 percent). For every female with ASD, there were five males with ASD.

NOVA SCOTIA

In Nova Scotia, the Department of Education and Early Childhood Development uses the Technology for Improving Education Network (TIENET) to collect data on students receiving support services. All students requiring additional programming and support outside the regular classroom are entered into TIENET, including those with ASD. The diagnosis of ASD is entered into TIENET when supported by a letter of diagnosis from a health care professional. The data collected in 2015 are from six of the eight school boards in Nova Scotia. In Nova Scotia the data in TIENET represent 39.7 percent of the population based on 2015 census estimates for 5–17 year olds.

► **What was the ASD prevalence in Nova Scotia in 2015?**

The 2015 overall prevalence of ASD in Nova Scotia was 14.6 per 1,000 (1 in every 68 or 1.5 percent) of 5–17 year olds.

► **What was the mode or most frequent age of diagnosis?**

The mode or most frequent age of diagnosis was 5 years old.

► **What was the prevalence by sex?**

In Nova Scotia, the prevalence of ASD in males was 23.2 per 1,000 males (1 in every 43 or 2.3 percent). The prevalence of ASD in females was 5.7 per 1,000 females (1 in every 175 or 0.6 percent). For every one female with ASD, there were four males with ASD.

PRINCE EDWARD ISLAND

In Prince Edward Island, diagnostic records of all individuals with ASD are referred to the Department of Education, Early Learning and Culture by either families, public or private diagnosticians, public or private service providers or schools. All cases are registered with PASS. Data from PASS represent 93.1 percent of the population of 5–17 year olds in Prince Edward Island based on 2015 census population estimates.

▶ **What was the ASD prevalence in Prince Edward Island in 2015?**

The 2015 overall prevalence of ASD in Prince Edward Island was 16.9 per 1,000 (1 in every 59 or 1.7 percent) 5–17 year olds.

▶ **What was the mode or most frequent age of diagnosis?**

The mode or most frequent age of diagnosis was 3 years old.

▶ **What was the prevalence by sex?**

ASD prevalence in males was 28.7 per 1,000 males (1 in every 35 males or 2.9 percent).

ASD prevalence in females was 5.4 per 1,000 females (1 in every 186 or 0.5 percent).

For every one female with ASD, there were five males with ASD.

NEW BRUNSWICK

In New Brunswick, the Department of Education and Early Childhood Development is divided into Anglophone and Francophone sectors, each with their own mechanisms for collecting information on their respective school populations and are responsible for education from Kindergarten to grade 12.

In New Brunswick the Anglophone sector represents 68.0 percent of the total population of 6–17 year olds, based on 2015 census population estimates for this age group.

▶ **What was the ASD prevalence in New Brunswick in 2015?**

The 2015 overall prevalence of ASD in New Brunswick was 12.6 per 1,000 (1 in 79 or 1.3 percent) of the population of 6–17 year olds in New Brunswick Anglophone schools. The data source did not collect date of diagnosis and therefore the most frequent age of diagnosis is undetermined.

▶ **What was the prevalence by sex?**

Among Anglophone students, ASD prevalence in males was 19.1 per 1,000 males (1 in every 52 or 1.9 percent) 6–17 year olds. For females, the estimated prevalence of ASD was 5.9 per 1,000 females (1 in every 170 or 0.6 percent) 6–17 year olds. For every one female with ASD, there were three males with ASD.

QUEBEC

In Quebec, Institut national de santé publique du Québec (INSPQ) ASD case data are identified by matching administrative files from the Régie de l'assurance maladie du Québec (RAMQ) and the Ministère de la Santé et des Services sociaux (MSSS), as part of the Système intégré de surveillance des maladies chroniques du Québec (SISMACQ). SISMACQ contains information from the RAMQ file on physicians' fee-for-service claims, which includes data on all medical acts billed to the RAMQ; and registration files for persons with provincial health insurance le Fichier d'inscription des personnes assurées.

In Quebec, these data represent 100 percent of 5–17 year olds compared to 2015 census population estimates.

▶ **What was the ASD prevalence in Quebec in 2015?**

The 2015 overall prevalence of ASD in Quebec was 15.5 per 1,000 (1 in 64 or 1.6 percent) of 5–17 year olds.

▶ **What was the prevalence by sex?**

In Quebec, the prevalence of ASD in males was 24.1 per 1,000 males (1 in every 41 or 2.4 percent). The estimated prevalence of ASD in females was 6.5 per 1,000 females (1 in every 153 or 0.7 percent). For every one female with ASD, there were four males with ASD.

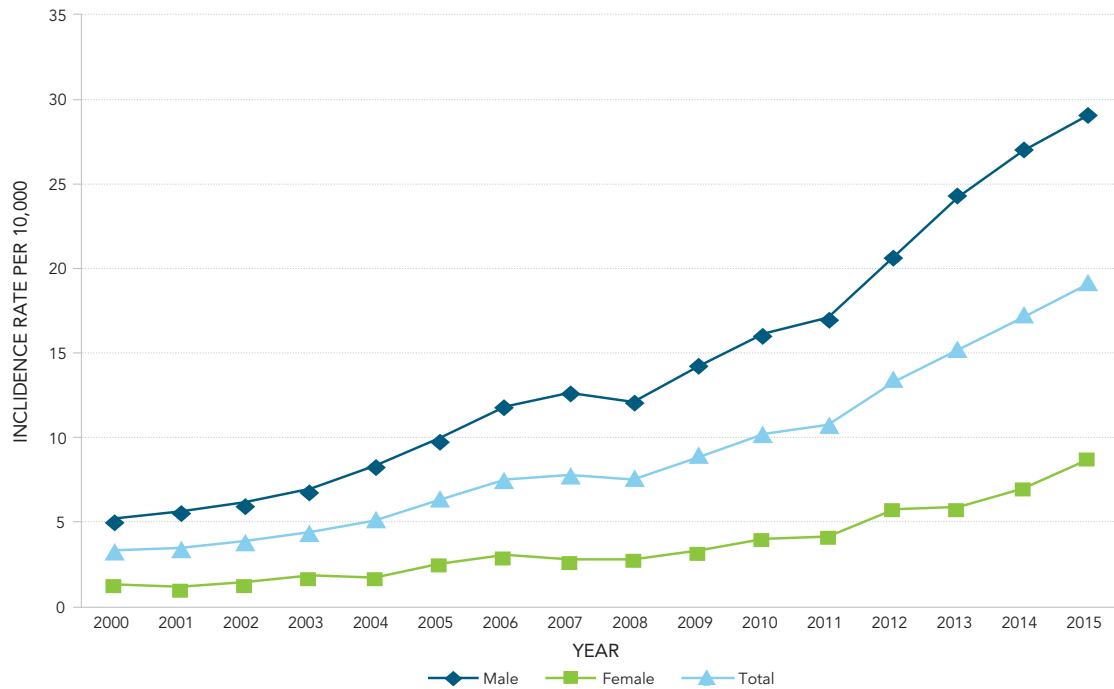
▶ **What was the 2015 ASD incidence rate in Quebec?**

The overall incidence rate increased from 3.9 per 10,000 in the year 2000 to 19.1 per 10,000 in 2015. These trends are illustrated in Figure 10. Incidence rates reflect only newly diagnosed ASD cases within a specific year.

▶ **What was the incidence rate by sex?**

For males in 2015, the overall incidence rate was 29.1 per 10,000. This went from 5.9 in the year 2000 to 29.1 in 2015. For females in 2015, the overall incidence rate was 8.8 per 10,000. This went from 1.4 in the year 2000 to 8.8 in 2015.

FIGURE 10: ASD incidence rate per 10,000 by sex in Quebec, 2000–2015



As noted in Figure 11 the incidence rate of ASD is increasing for all age groups. The age group with the greatest increases in incidence rates are with 1–4 year olds, followed by the 5–9 years old age group. Those whose age group is greater than 10 years old continue to increase, although not as dramatically as the younger age groups over time.

FIGURE 11: ASD incidence rate by year and age group per 10,000 in Quebec, 2000–2015

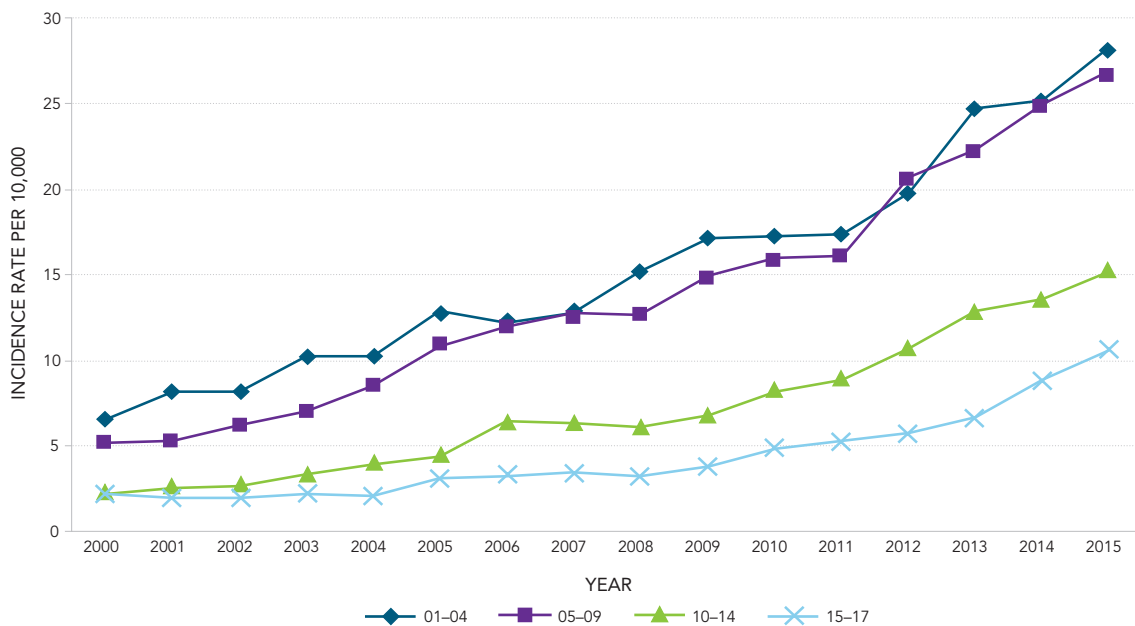
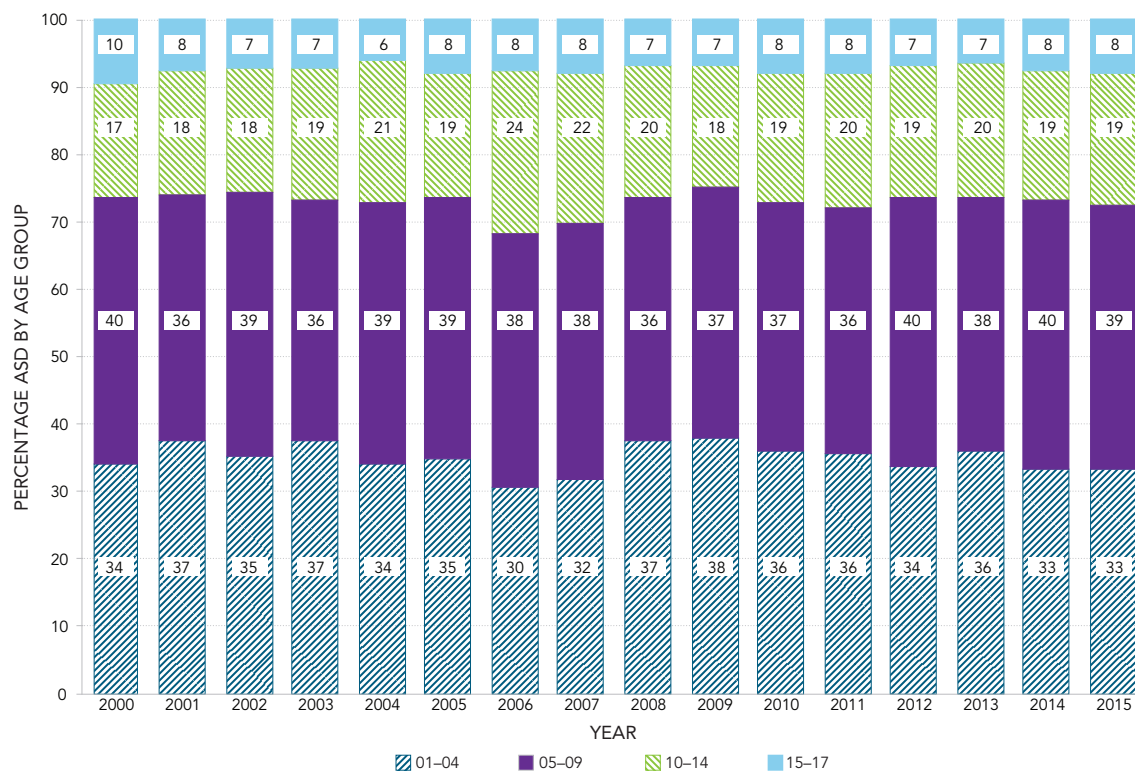


FIGURE 12: Percentage of ASD cases diagnosed by age group and year, Quebec, 2000–2015

Quebec data provided information on number of cases diagnosed in each age group by year (Figure 12). The proportion of new diagnoses across age groups remains fairly consistent over time. The majority of newly diagnosed cases predominantly occur in those less than 10 years old. Approximately three quarters of all cases are diagnosed by the age of 10.

BRITISH COLUMBIA

In British Columbia, a province-wide system called Integrated Case Management captures and integrates data, including elements required for ASD surveillance. In British Columbia the data represent 99.4 percent of the population based on 2015 census population estimates for ages 5–17 years old.

► What was the ASD prevalence in British Columbia in 2015?

In 2015, overall prevalence of ASD in British Columbia was 14.7 per 1,000 (1 in 68 or 1.5 percent) of 5–17 year olds.

► What was the prevalence by sex?

In British Columbia the prevalence of ASD in males was 23.6 per 1,000 males (1 in 42 or 2.4 percent). The prevalence of ASD in females was 5.3 per 1,000 females (1 in 188 or 0.5 percent). For every one female with ASD, there were five males with ASD.

YUKON

The Yukon Department of Education gathers data on students with ASD through the Yukon Student Information System. All cases that have a letter of diagnosis from a health care professional stating the student meets DSM criteria for ASD are included in the Yukon data. The data represent 91.1 percent of the population based on 2015 census population estimates for 5–17 year olds.

▶ **What was the ASD prevalence in the Yukon in 2015?**

The 2015 overall prevalence of ASD in the Yukon was 8.0 per 1,000 (1 in 126 or 0.8 percent) of the population.

▶ **What was the mode or most frequent age of diagnosis?**

The mode or most frequent age of diagnosis was 5 years old.

▶ **What was the prevalence by sex?**

In the Yukon the prevalence of ASD in males was 12.8 per 1,000 males (1 in 78 or 1.3 percent). The prevalence of ASD in females was 2.6 per 1,000 females (1 in every 379 or 0.3 percent). For every 1 female with ASD, there were 5 males with ASD.

FUTURE DIRECTIONS

ASD can have significant health, social, emotional, and financial impacts on individuals, their families, and their caregivers. Many Canadians living with ASD need appropriate supports to reach their full potential, while family and caregiver quality of life can also be improved if timely and appropriate support services are offered throughout the lifespan.

Surveillance data can help illustrate the picture of ASD in Canada, in addition to informing policies and programs aimed at improving the lives of those impacted by ASD. These findings offer a first glimpse of ASD in Canada based on data from NASS. The 2015 data are beginning to provide answers, but are also creating new questions that may be answered by NASS over time.

Beyond this important milestone of publishing the inaugural NASS 2018 Report, PHAC will continue to release NASS findings using diverse approaches, including data blogs, data tables, infographics and web updates to meet the need of diverse audiences.

More broadly, future directions for NASS will centre on:

- Working towards full program implementation of NASS in having each PT join as feasibility and validation work is completed in their respective jurisdictions;
- Supporting PT surveillance capacity and infrastructure development;
- Capitalizing on opportunities to enhance NASS through exploring the potential to include additional data elements and indicators, e.g., incidence beyond Quebec, ethnicity, and other comorbidities; and,
- Examining the possibility of expanding surveillance to other ASD populations, e.g., children less than 5 years of age; and adult populations.

The development work required to build NASS was significant, and the collaborative effort of all who played a role in its achievements is gratefully recognized. The data in this report are made possible only through the ongoing participation of PT partners and advice given by the ASD-AC.

The new evidence generated by NASS, combined with the ongoing work by health professionals, researchers and non-government organizations across Canada, will support governments and other stakeholders in their work to improving the quality of life for those living with ASD.

TECHNICAL ANNEX: NASS SURVEILLANCE METHODS

1. INTRODUCTION

The purpose of the Technical Annex for NASS Surveillance Methods is to provide further details on the methods used to collect ASD data for the NASS. With all surveillance systems, the case definitions, data sources, comprehensiveness of these data and privacy protocols are essential for effective and efficient ongoing surveillance initiatives.

2. NASS PARTICIPATING PROVINCES AND TERRITORY

Collection of PT data was initiated in 2015. As of 2017, seven PTs have contributed 2015 data to NASS, they are: Prince Edward Island, New Brunswick, Newfoundland and Labrador, Nova Scotia, Quebec, British Columbia and the Yukon. Retrospective data have also been collected from Newfoundland and Labrador (2003–2009), Prince Edward Island (2003–2015), and Quebec (2000–2015); which support analysis of trends over time within these regions. As full implementation is a phased process the remaining PTs will be brought into NASS as their data are assessed, and feasibility and validation projects are completed.

The population coverage varies amongst participating PTs. Nova Scotia's data for 2015, included 40 percent of the population under surveillance as two of the largest school boards did not participate. In New Brunswick, 68 percent of the population 6–17 year olds is represented in NASS since presently only those who attend the Anglophone schools are included. The remaining PTs have representation of between 91 and 100 percent of the total school-aged population reflected in their 2015 NASS reporting.

Corresponding data for all participating PTs are given in Table 3: Provincial and territorial comparisons by prevalence, population representativeness, data sectors and data sources.

TABLE 3: Provincial and territorial comparisons by prevalence, population coverage, data sectors and sources, 2015

GEOGRAPHIC LOCATION	ASD PREVALENCE PER 1000	ASD RATIO 1 IN X	POPULATION AND PERCENT UNDER SURVEILLANCE (AGES 5–17)	DATA SECTOR(S)	DATA SOURCE NAME
Total NASS	15.2	1:66	– Total population 5–17 year olds – 40% of the population	Education, social services and health	Varied
Newfoundland and Labrador	17.5	1:57	– All school boards – 97% of the population	Education	Educational Service Database
Nova Scotia	14.6	1:68	– 6 of 8 school boards – 40% of the population	Education	Technology for Improving Education Network (TIENET), Student Information System
Prince Edward Island	16.9	1:59	– Total population 5–17 year olds – 93% of the population	Education, health and social services	PEI Autism Surveillance System (PASS)
New Brunswick	12.6	1:79	– Anglophone school boards only – 68% of the population – does not include 5 year olds	Education	Student Education Program database
Quebec	15.5	1:64	– 100% of the population receiving health services	Health and social services	Système intégré de surveillance des maladies chroniques du Québec (SISMACQ)
British Columbia	14.7	1:68	– Population receiving social services – 99% of the population	Social services	Integrated Case Management system
Yukon	8.0	1:126	– All school boards – 91% of the population	Education	Student Information System

3. IDENTIFICATION AND ASSESSMENT OF DATA SOURCES AND DATA

ENVIRONMENTAL SCANS

All potential ASD data holders within each PT were identified and extensive interviews were conducted to determine the criteria for ASD cases (i.e., case definition), the comprehensiveness of the data (who was counted, who was not counted) and data elements collected, within the identified data source. At the end of the interviews, the interviewees were asked to identify other potential “data sources” in their jurisdictions. This snowball approach for identifying other sources of ASD data was lucrative in identifying sources that may not have otherwise been considered.

The environmental scans were conducted in all PTs with the exception of Quebec who notified NASS of the best data source at the current time in their province. Once the “best” data source was identified either a feasibility project, validation study or the collection of data harmonization templates followed.

Through these consultations with PTs, PHAC identified the various administrative sources of data available from PTs for ASD surveillance, and explored the feasibility of integrating these data into the national ASD surveillance system.

The environmental scan reviewed ASD-specific data from four key areas, as described below.

- **Health:** ASD health data across the country can be collected through PT Departments/ Ministries of Health (such as through physician billing, hospital admission/discharges), Regional Health Authorities, and specialized health care centres/hospitals.
- **Education:** Education databases capture information on students who attend publically funded education programs and in some provinces it captures homeschooled individuals as well. In addition to special education services, this information may include ASD diagnostic information and psychoeducational assessments.
- **Social Services:** Social Service databases capture data on individuals who are registered and receiving services, often from government-funded programs, and/or those receiving financial contributions through programs funded by PTs for services for their condition or to support their employment.
- **Research Teams:** Some universities across Canada lead research projects that involve the linking of administrative data sets from different sectors. These teams have collected extensive information on individuals with ASD in selected geographic areas.

Data from potential administrative data sources, which met minimal criteria, were considered as a potential data source for NASS. Additional criteria assessed included: simplicity, flexibility, data quality, acceptability, sensitivity, predictive value positive, representativeness, timeliness, and stability. Each potential data source was further evaluated using data harmonization templates which attempted to measure and quantify each of these parameters.

FEASIBILITY AND VALIDATION PROJECTS

Once potential data sources had been identified, selected PTs were approached to do additional work to determine the feasibility of their data as a source for surveillance. Please note that projects did not occur in place of the pre-data collection review. Projects were completed in:

- **Nova Scotia:** a feasibility project to determine the validity of data entered into the provincial Department of Education diagnostic module (including case definition validation, which provided the diagnosis, prevalence analysis, and a comparison of prevalence estimates to known expected prevalence estimates).
- **Newfoundland and Labrador:** a date of diagnosis project was completed to ensure the dates were included in the present system.
- **Quebec:** a thorough review of the SISMACQ program as a source of data for NASS was completed. Additional work looking at other variables available including socioeconomic status, comorbid conditions and other variables were included.

- **Ontario:** a feasibility project was done with the Ministry of Education to review aggregate estimates of numbers of cases of ASD by school board and by rural vs. urban schools, to determine if this source could be used for surveillance.
- **Manitoba:** an intensive validation study to determine best algorithms for identification of cases was completed. This validation work determined the best algorithms to be used in Manitoba in contributing data to NASS.
- **Saskatchewan:** a feasibility project looking at the use of education data was completed. Additional work is needed to determine if education ASD prevalence data could be used in NASS.
- **Nunavut:** a feasibility project looking at the best algorithms using several administrative data sources was completed.

4. CASE ASCERTAINMENT

CASE DEFINITIONS

In consultation with experts, NASS case definition was developed with the aim of being practical and robust enough for the purposes of making standardized comparisons across Canada while also providing the most accurate estimate possible of Canadian children and youth that have been diagnosed with ASD. NASS case definition takes into account the diversity in clinical practice and service delivery across and within PTs. All cases reported in NASS must meet criteria given in NASS case definition.

The criteria listed below for the case definition serve as a public health surveillance case definition for individuals diagnosed with ASD in Canada.

TABLE 4: NASS ASD case definition

<p>Both criteria must be met:</p> <ol style="list-style-type: none"> 1. The diagnosis of ASD is provided or confirmed by a licensed* health care professional(s)* 2. The diagnosis of ASD is based on the clinical criteria in the Diagnostic and Statistical Manual (DSM)* for Mental Disorders or the case is identified as ASD in the International Classification for Diseases (ICD)*.
<p>*NOTES</p> <ul style="list-style-type: none"> • 'licensed' include those physicians, psychologists, and nurse practitioners, who are permitted by their affiliated governing College to practice and diagnose in Canada. Physicians include any licensed medical doctor (MD). • Health care professionals include: physicians, psychologists, or nurse practitioners, whose scope of practice includes ASD diagnosis or an ASD diagnostic team • DSM: American Psychiatric Association. Diagnostic and statistical manual of mental disorders (IV or V ed.). Washington, DC. • ICD: World Health Organisation. International Statistical Classification of Diseases and Related Health Problems, 9th or 10th Revision (ICD-9/10). Geneva: WHO.

As part of the validation process within the feasibility, validation or data harmonization templates, the case definition for each data source was validated against these criteria.

DSM/ICD CRITERIA

- **Education:** for education sources all ASD diagnoses must come from a licensed health care provider. A letter of diagnosis is provided to the schools as proof of diagnosis. Letter of diagnosis may or may not state that the case met “DSM criteria”, however if a licensed health care provider provided the diagnosis then it was assumed that this criterium was used.
- **Health Services:** for Quebec, health services data were used for NASS. These health service data were obtained by the matching of administrative files from:
 1. the Régie de l'assurance maladie du Québec (RAMQ) and the MSSS, which made up the Système intégré surveillance des maladies chroniques du Québec (SISMACQ) available at the INSPQ. SISMACQ contains information from RAMQ file on physicians' fee-for-service claims, which includes data on all medical acts billed to the RAMQ;
 2. registration file for persons with provincial health insurance, which provides demographic data and information on health insurance eligibility periods. It contains date of birth and death, postal code and health insurance eligibility status for all individuals with a health insurance number valid for at least one day since the start of the SISMACQ reference period (April 1, 1996);
 3. Maintenance et exploitation des données pour l'étude de la clientèle hospitalière (MED-ÉCHO) hospitalizations file, which identifies primary and secondary diagnoses associated with hospital admissions;
 4. Registre des événements démographiques provides the death file.

ICD-9 codes are used to codify diagnoses in the medical services file for the entire observation period from January 1, 1996, to March 31, 2014, as well as in the MED-ÉCHO file until March 31, 2006, while codes from the 10th revision (ICD-10) are used in the MED-ÉCHO file as of April 1, 2006.

- **Social Services:** social service data were used in British Columbia. Since 2007 these data have been collected by the Autism Funding Branch of the Ministry of Children and Family Development. Current data about the British Columbia autism funding program are captured in the province-wide Integrated Case Management system. The aggregated data in this system are data which were submitted to NASS.

DATA ELEMENTS

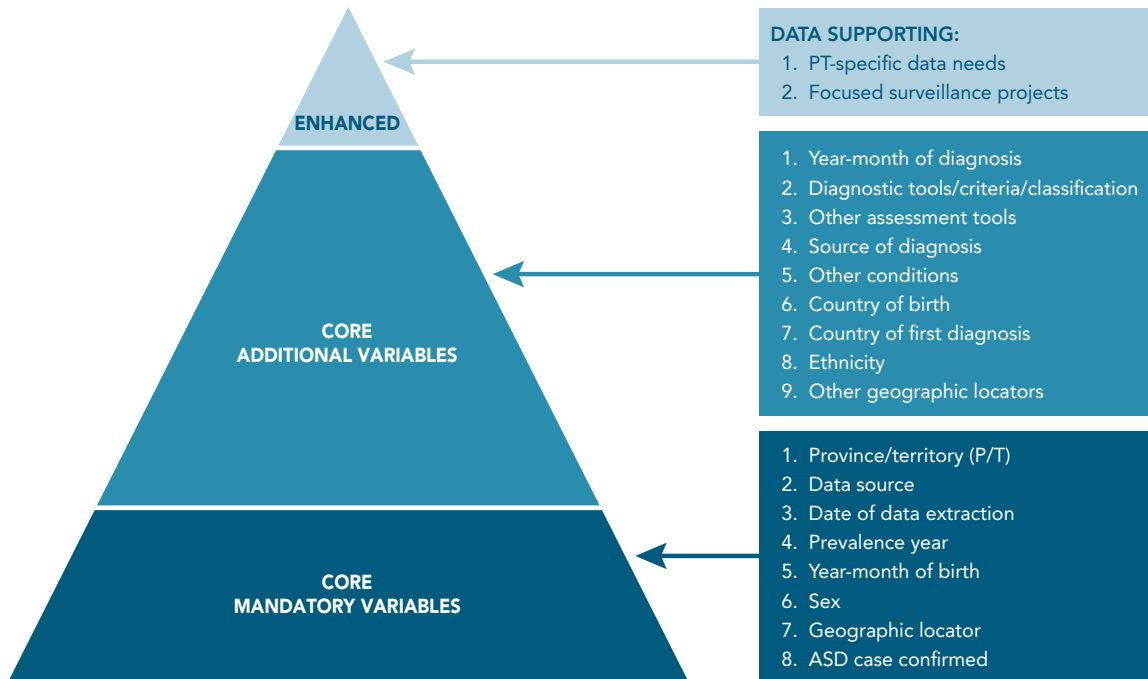
As it was recognized that the best data sources were different between PTs, the data elements collected were categorized into three groups. The first group contains the mandatory or “core minimal” data elements and these are the bare minimal data elements for a data source. The entire core minimal data elements needed to be within a system before it would be considered viable to use in NASS. The data elements collected were categorized as follows:

- **Core Data Set (Minimal):** Provides the core health surveillance data elements describing person (year-month of birth; sex; ASD flag), place (PT; geographic locator; data source), and time (date of data extraction; prevalence year) for each ASD case.
- **Core Data Set (Additional) (as available):** Complements the minimal data set by providing added information to help understand a more comprehensive picture of ASD in Canada. Data elements include information on the: date of diagnosis (i.e., year-month); diagnostic criteria, tools (i.e. Autism Diagnostic Interview—Revised and Autism Diagnostic Observation Schedule), scores or classification; other assessment tools and scores (e.g. adaptive behaviour, developmental scores and intelligence testing); source of diagnosis; other conditions (e.g. epilepsy, anxiety disorders); country of birth; country of first diagnosis; ethnicity; other geographic locators; and, citizenship.
- **Enhanced Data Set:** Provides data elements that are generally obtained in highly focused and specialized data sources where even more information is collected than in a typical administrative setting (e.g. Early Intensive Behavioural Intervention services, school, hospital). For instance, this may include information about maternal health prior to birth, neonatal medical information, the kinds of supports and interventions that an individual with ASD and/or their family have received. These data would inform additional and informative data analysis, and targeted surveillance studies.

NASS Data Elements Dictionary provides a detailed description for each NASS data element and presents the coding guidelines for NASS data elements. This document is a comprehensive reference for both PHAC and its PT partners, facilitating clear communication and agreements, and the standardization of data across data sources.

Each PT is expected to provide, at a minimum, the core (mandatory) variables (Figure 13). Core (additional) variables are sought where available.

FIGURE 13: NASS data elements



DATA QUALITY REVIEW

All data prior to and after data transfer went through extensive reviews outlined below, as part of, or following the consolidation of jurisdiction level data. The steps in the review are outlined below:

- **Data Harmonization Templates:** As part of, or following the consolidation of jurisdiction level data, PT lead departments were strongly encouraged to use Data Harmonization Templates, established by PHAC, as a best practice to support surveillance data evaluation and data quality validation. This helped facilitate data quality documentation, monitoring and improvement. These templates were used to capture and communicate to PHAC crucial information, such as case identification pathways and act as an important means for ensuring the accuracy (e.g., consistency with NASS case definition), timeliness (e.g., data particular to the relevant surveillance reporting year) and completeness (e.g., capture of various data elements) with data collection before data are transferred to PHAC.
- **Data Reviews:** once data harmonization templates were received the data elements and aggregate data were reviewed. This included a review of the data elements, data format and determination of the comprehensiveness of reporting of that specific element. The aggregate data review included a review of the most recent data by age and sex. This review determined if data appeared to be outside of what would be expected for the age and sex reported.
- **Data Quality Protocols:** the data quality protocols were established for post-submission of data where comprehensiveness, missing variables and review of outliers was completed. These reviews were shared with the PTs and corrections and validation were provided.

- **Missing Data:** criteria for all data elements were established where if < 10% of a specific element was missing than it was still analyzed. If > 10% of a specific data element was missing a meeting was called to determine the utility of the data, after attempts to collect the missing data had already occurred.

STRENGTHS AND LIMITATIONS

Table 5 presents the strengths and limitation criteria for assessing public health surveillance systems applied to NASS.

TABLE 5: Assessment of the strengths and limitations of NASS data¹⁰

CRITERIA	RATING	COMMENTS
Simplicity	High	Data already exist and are collected for administrative purposes. All data sources use the same case definition. Duplicate checks are already done at the submission stage. Few resources are needed to acquire the data.
Flexibility	Moderate	Data fields are already established however there is some flexibility in that change to what is being collected can be implemented.
Data quality	High	Established coding for ASD via ICD codes or educational codes. Very few missing fields. Validation projects were implemented in many of the participating PTs. Completeness of data element reporting was performed as part of the data quality review. All cases met the case definition and minimum criteria for data submission.
Acceptability	High	Data collection was seen as an important surveillance activity for all participating PTs. The purpose and goal of NASS reinforced the acceptability of both the system and its content.
Sensitivity	Moderate	The true sensitivity would be difficult to measure without a research study. However, most PTs services are contingent on diagnosis and therefore being identified and counted as a case is more likely to occur. While there will be some cases that are not identified in PT systems these numbers are believed to be minimal.
Predictive value positive	High	A strength of NASS lies in that each data source has the same strict case definition criteria. All cases must meet these criteria. A validation study of confirmation of cases was performed in Nova Scotia with a 99% accuracy in reporting of cases. NASS includes both the identification of ASD cases and those without ASD (e.g., with educational sector, data is based on all enrolled children). Patterns and trends remain stable over time, whether examining overall analyses or age/sex breakdowns.
Representativeness	High	Of the PTs contributing to NASS it has been established that they represent 88% of the populations within those PTs and 40% of the total population of children and youth ages 5–17 in Canada.
Timeliness	Moderate-High	Data are transferred annually. For educational data, the data are transferred during the summer when changes to the PT databases are minimal. This is valuable for the calculation of prevalence.
Stability	High	As the data sources have been established for other administrative purposes within each corresponding PT the stability of the systems is quite strong.
Overall	Moderate-High	Overall the strength of this system to estimate the prevalence of ASD is moderate to high.

NASS can only pick up ASD cases that have an official diagnosis entered into the data source. Undiagnosed cases, education sources where the diagnosis has not been shared with the school by the parents, and those missed entries in the system would not be captured. It is felt that these numbers would be minimal. For health data sources the limitation of case counts would include those who have been misdiagnosed and those whose coding has been entered incorrectly. Social service data are limited to cases that are obtaining services and therefore would not capture those who opt out of services or who have decided to pay privately for services.

The data collected within NASS is limited to the information available in the source records. As NASS evolves, there will be additional data elements with plans to include services and comorbid conditions. With the exception of Quebec, NASS estimates are primarily prevalence information and as such, no other PT at this point in time can provide incidence data.

Since denominators used are different between the education (school enrolment denominator) and health and social services (which use the census as denominator), the accuracy of the numbers will be better for the education data sources. When comparing prevalence estimates using as the denominator source school board enrolment or the census, the prevalence estimates decreased between 0.05 and 0.10 percent.

PRIVACY

ASD surveillance, like all surveillance, involves the electronic collection, use, and storage of health-related information on individuals. NASS undertakes comprehensive measures to ensure privacy of the individual's data captured in the system is not breached.

The Office of the Privacy Commissioner of Canada oversees compliance with Canada's *Privacy Act*, and government institutions must conduct Privacy Impact Assessments (PIA) for new or redesigned programs and services that raise privacy issues. PIAs are used to identify the potential privacy risks, and help eliminate or reduce those risks to an acceptable level. They also include information on how personal information is collected, used, disclosed, stored and ultimately destroyed. The NASS has completed a PIA to meet these requirements.

NASS collects data from participating PT partners based on pre-arranged data sharing agreements (i.e., a Memorandum of Agreement). These agreements are used to set out a clear blueprint of how a PT will participate in NASS and include provisions for data sharing governance. On an on-going annual basis, participating PT partners gather local/regional level data (e.g., individual records of cases) consistent with NASS ASD case definition, aligned with common data set, specification, and procedural standards, as identified in corresponding MOAs and various guidance materials, including PHAC's Data Indicators Framework and Data Elements Dictionary. Ownership of collected data resides with individual PTs, while PHAC provides a stewardship role, reviews data quality, develops tools, and generates analytic reports.

NASS does not collect or require personal information concerning names, addresses or social insurance numbers of individuals. All data are de-identified by PT data providers prior to being transferred to PHAC; with the removal and/or truncation of any direct identifying variables (e.g., only partial dates of birth, dates of diagnosis and postal codes are collected).

Measures are undertaken when producing public reports to ensure that robust data suppression approaches are in place when dealing with geographic areas with small sizes to mitigate the risk of re-identification of individuals (as described below).

ANALYTIC METHODS USED FOR CALCULATIONS OF PREVALENCE

► Prevalence Denominators

- **Health services:** Quebec used health services data and their denominator included all those who were eligible for Quebec's health insurance plan for at least one day between January 1, 1996, and March 31, 2015
- **Education:** Nova Scotia, Newfoundland and Labrador, New Brunswick (Anglophone schools only), Prince Edward Island and the Yukon all used school system data for the denominators
- **Social services:** British Columbia provided social service data and their denominators were derived from BC government statistics. These population estimates are derived using methods described and are consistent in aggregate form with the Statistics Canada produced annual (July 1) provincial level totals.

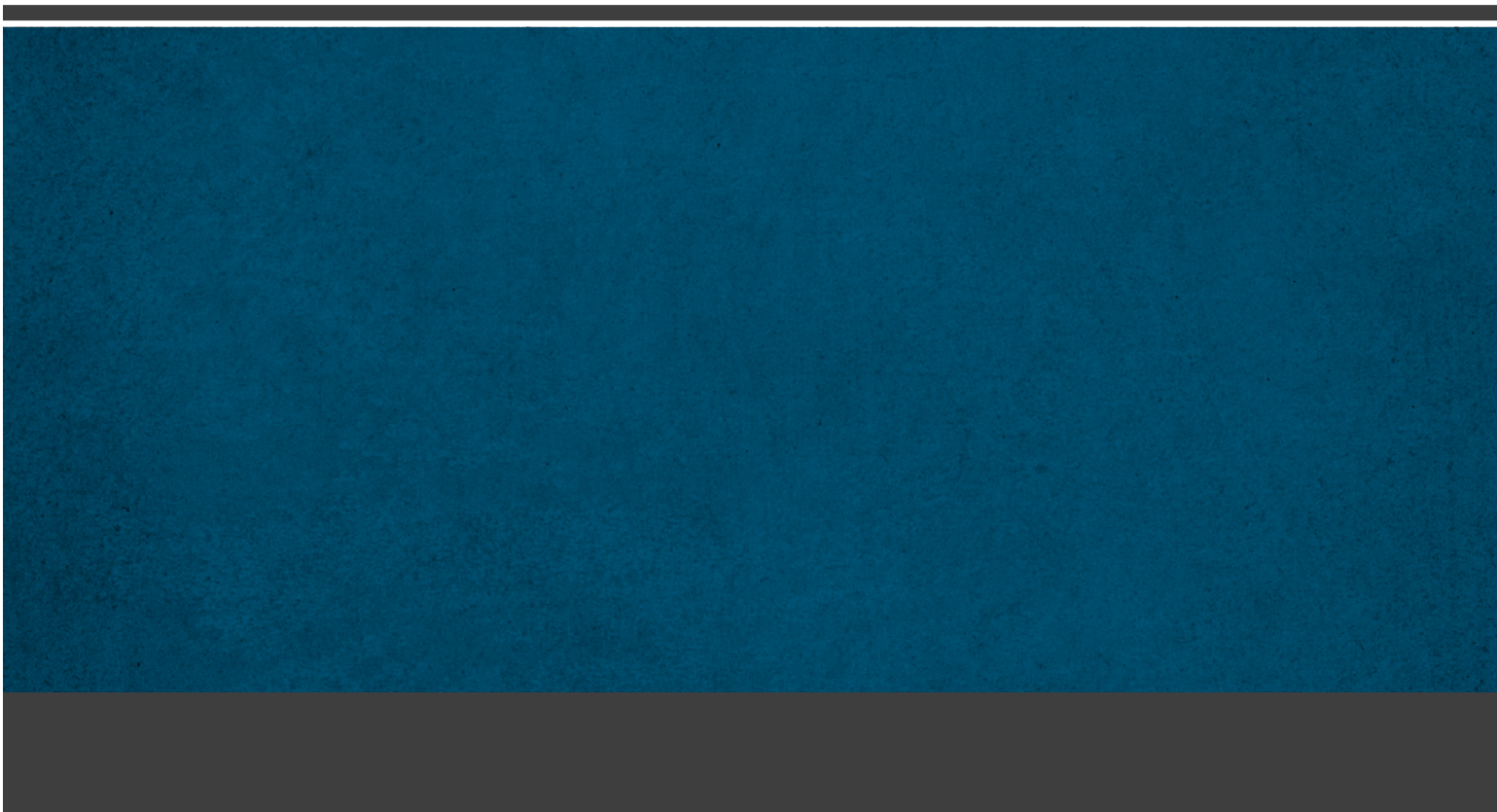
► Prevalence Numerators

The total number of ASD cases within the surveillance year was collected via three different methods.

- **Point prevalence:** for Ministry/Department of Education school based ASD data, a point prevalence method was used. The dates for the point prevalence ranged from July and August for all PTs providing education data, i.e., Nova Scotia, Newfoundland and Labrador, New Brunswick (Anglophone schools only), Prince Edward Island and the Yukon. A feasibility study done in Nova Scotia showed that summer point prevalence estimates did not vary more than 0.1 percent when compared to end of calendar year estimated and therefore the summer point prevalence data were used for all NASS participating PT submitting school based data.
- **Aggregate prevalence:** For 2015 Quebec and British Columbia provided aggregate numerator data tables. Aggregate data have proven to be a valid method of receiving surveillance data (e.g., The Canadian Chronic Disease Surveillance System uses aggregate data for a variety of chronic conditions in Canada). Aggregate data have no personal identifiers attached.
- **Suppression of cells with aggregate data:** data that included more than one descriptor (e.g. age and sex) where a cell size was less than five were suppressed using formulas which randomly put a number between one and four in the cell.

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LDAO SEAC CIRCULAR

April 2018

The Learning Disabilities Association of Ontario (LDAO) SEAC Circular is published 5 times a year, in September, November, February, April and June.

The following are some topics that your SEAC should be looking at. Action items and/or recommendations for effective practices will be underlined.

Feel free to share any of this information or the attachments with other SEAC members. As always, when you are planning to introduce a motion for the consideration of SEAC, it is particularly important that you share all related background items with your fellow SEAC reps.

The topics covered by this SEAC Circular:

1. More changes at the Ministry of Education
2. Funding announcements and the Special Education Budget process
3. Mental Health initiatives
4. Governance Engagement Consultation update

List of Supplementary Materials:

1. Staffing Announcement Mem
2. Special Education Funding 2018-19 Summary
3. Mental Health & Addictions memo
4. Governance Engagement Memo

Note: You can access the SEAC Circular and supplementary materials at www.ldao.ca/ldao-services/public-policy-advocacy/seac-circulars/.

You can access Ministry memos by date at: <http://www.edu.gov.on.ca/eng/policyfunding/memos/>

I. More changes at the Ministry of Education

The February LDAO SEAC Circular announced that Shirley Kendrick had been appointed as Director of the Special Education/Success for All Branch. Since that time, Shirley has assumed the role of interim Assistant Deputy Minister in the Student Support & Field Services Division, and Julie Williams, a manager in the Special Education/Success for All Branch, is now interim Director of the branch.

2. Funding announcements and the Special Education Budget process

On March 26, 2018, the Ministry released information on the **2018-19 Grants for Student Needs (GSN) Funding** (subject to regulations made by the Lieutenant Governor in Council under the Education Act) in Memorandum 2018 B06: [Grants for Student Needs Funding for 2018-19](#). The **Special Education Grant** comes under the GSN.

In addition, Memorandum 2018 B07: [2018-19 School Year Education Programs – Other \(EPO Funding\)](#) announced projected EPO (Education Programs – Other) funding envelopes.

The memos announced new funding to address waitlists for assessments (under EPO Funding) and to increase special education services (under the Special Education Grant).

Over the next three school years, the ministry is to provide approximately \$125 million in **EPO funding** to address current waitlists for assessments, beginning with a projected \$20 million in 2018-19. School boards will have to apply for the funding, based on their needs, in order to build capacity and/or develop local approaches to provide timely, responsive assessments.

Over \$170 million in funding, over the next three years, is to be allocated through the **Special Education Grant**, to support increased special education programs and services, including:

- Funding for a multi-disciplinary team or equivalent for all boards (four additional FTEs per school board) to build board capacity and help teachers, education assistants, and other staff better understand and adapt to the unique needs of their students;
- Funding for other staffing resources to support students with special education needs;
- Funding to build capacity and provide direct support to students with special education needs in recognition of the increase in demand for services

There is some information on board by board allocations in Appendices in [Grants for Student Needs Funding for 2018-19](#) and in Appendix A – [2018-19 School Year EPO Funding Allocations](#). More details will be available when the funding **Technical Paper** is released.

Under the **GSN**, the *Local Priorities Funding*, initiated in 2017-18, will continue to be available to address a range of local priorities and needs, including more special education staffing to support children in need, “at-risk” students and adult education.

SEACs should ask for a presentation on their school board’s special education budget, including both GSN and EPO funding initiatives. The presentation should include plans for addressing the issue of waitlists for assessments.

Effective practices can be found at: www.paac-seac.ca/home/paac-on-seac-effective-practices-handbook-for-seac-members/section-3-seac-roles-and-responsibilities/3-6-special-education-budget-and-financial-statements/

3. Mental Health initiatives

Under **EPO funding** in 2018-19, the ministry will be providing funding for about 180 new mental health workers in secondary schools. By the end of 2019-20 all school boards with secondary schools will receive funding for at least one mental health worker (regulated health professional) plus additional funding to support province-wide research and evaluation of the new mental health supports. A *Memo to Directors* on March 22, 2018 (attached) also announced new annual funding for the Mental Health ASSIST initiative, and the embedding of Social Emotional Learning (SEL) throughout the refreshed curriculum, to promote mental health and well-being for all students.

Announcements of mental health initiatives in other Ministries can be found at: [Ontario Making Historic Investment in Mental Health and Addictions Care for Every Stage of Life](#)

4. Governance Engagement Consultation update

The November 2017 LDAO SEAC Circular had information on how to respond to a consultation on School Board Governance issues. A March 28, 2018 Memo announced next steps planned as a result of feedback received to the consultation.

Proposed changes to the regulation regarding **student trustees** would, if approved, provide student trustees with more time and greater support by:

- 1) requiring all school boards to have at least two student trustees (to encourage collaboration and shared ownership of responsibilities);
- 2) providing school boards with the option of a two-year, staggered term of office or a one-year term of office; and
- 3) for boards that maintain a one-year term of office, moving the student trustee election date to the end of February (to enable greater time and opportunity for orientation and mentoring of incoming student trustees). The changes would be for the 2019-20 school year.

The Ministry will be examining possible legislative changes that would allow student trustees to move board motions. PAAC on SEAC has been looking at the role of student trustees on SEAC. Currently there is no legislated role except as one of the designated trustees on SEAC. It would be useful to get input from student trustees on special education issues, even if they are not voting members. LDAO SEAC members are invited to share their experiences with participation of student trustees, to dianew@LDAO.ca

Also relevant to SEAC, amendments to the **electronic meetings** regulation are being proposed that would, if approved, permit boards to include in policy the ability for board and committee chairs to preside over meetings electronically, in certain circumstances that would be outlined in the regulation. These changes would apply to SEAC Chairs.

Questions? Email Diane Wagner at dianew@LDAO.ca or call (416) 929-4311 Ex. 22 (Mon.)

SEAC PENDING LIST AS AT APRIL 18, 2018

1. Staff update the Special Education Plan and resource documentation accessible to students and parents online to reflect current and accurate information. (requested September 2016- ongoing)
2. Staff to consider increasing Empower in high schools when the budget is balanced and the accumulated deficit is eliminated and bring it back to SEAC pending balanced budget (requested in 2015)
3. SEAC recommended to the Board of Trustees to investigate the costs to possibly promote SEAC Special Education information through innovative technological methods. (requested April 2017)
4. SEAC requested a report on whether or not the program to assist with social thinking (PAST) could be expanded to the secondary panel. (May 2017)
5. SEAC recommend to the Board of Trustees that they refer the Anaphylaxis Policy to be updated by the Governance and Policy Committee to reflect part a) below.

Additionally, SEAC recommend to the Board of Trustees an update to the Anaphylaxis Protocol and Guidelines to reflect b), c) and d) as listed below.

- a) There is a need to update Policy to reflect transitions of students between two schools, and specifically, but not limited to elementary and secondary schools;
- b) Initiate communication between elementary and secondary schools regarding anaphylactic needs for students who enroll in the summer secondary transition course;
- c) Include in the Anaphylaxis Protocol and Guidelines, information on the transition process and general communications with students, including recommendations arising out of CSLIT meetings scheduled for later this year; and
- d) Include in the Secondary Health and Safety Binder located in schools a page on the communication plan to be used with students and date implemented. (Nov. 2017- previously moved by Board)