SPECIAL EDUCATION ADVISORY COMMITTEE REGULAR MEETING

AGENDA JUNE 13, 2018

OUR STRATEGIC DIRECTION

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

Community Representative

ACHIEVEMENT AND WELL BEING

PROVIDING STEWARDSHIP
OF RESOURCES

FOSTERING STUDENT LEGISLA CONTROL CONT

ACHIEVING EXCELLENCE IN

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

Integration Action for Inclusion Representative

Gizelle Paine

LD Toronto Chapter Representative

Diane Montreuil Indigenous Representative

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
Assistant Recording Secretary: Sonia Tomaz, 416-222-8282 Ext. 2298

Rory McGuckin
Director of Education

Barbara Poplawski Chair of the Board

OUR MISSION

OUR VISION

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AGENDA

THE REGULAR MEETING OF THE SPECIAL EDUCATION ADVISORY COMMITTEE

PUBLIC SESSION

Wednesday, June 13, 2018 7:00 P.M.

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1.	Roll	Call & Apologies	
2.	Appr	oval of the Agenda	
3.	Decla	arations of Interest	
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5.	Deleg	gations	
6.	Prese	entations	
7.	Unfir	nished Business	
8.		es of Matters and Trustee Matters: (for which seventy-two hours' e has been given)	
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	GSN 2018-19	
	http://www.edu.gov.on.ca/eng/funding/1819/projections-2018-19-school-year-en.pdf	
	Discussion Summary 2018-19	
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9.i	Parents Reaching Out (Pro) Grant for Regional/Provincial Application	303 - 306
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Reports of Officials, and Special and Permanent Committees Requiring

10.

11.

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12.	Repor	ts of Officials for Information	
13.	Inquir	ies and Miscellaneous	
	13.a	From Tyler Munro regarding Special Education Qualifications for Principals	
	13.b	Budget Questions from Autism Ontario - Sandra Mastronardi	307 - 310
14.	Assoc	iation Reports	
	14.a	Learning Disabilities Association of Ontario (LDAO) June SEAC Circular - Sandra Mastronardi	311 - 319
	14.b	Autism Ontario - Sandra Mastronardi (To be Distributed)	
15.	Update Comm	e from Trustees on resolutions recommended to the Board by the nittee	

16.

17.

Pending List

Adjournment

320

MINUTES OF THE REGULAR MEETING OF THE SPECIAL EDUCATION ADVISORY COMMITTEE

HELD WEDNESDAY, APRIL 18, 2018 PUBLIC SESSION

PRESENT:

External

Members: Marilyn Taylor, Chair

Ashleigh Molloy, Vice-Chair

Rosanna Del Grosso – by teleconference

Sandra Mastronardi

Diane Montreuil – by teleconference

Tyler Munro Mary Pugh

Giselle Romanino Raul Vomisescu

Trustees: A. Andrachuk – by teleconference

A. Kennedy

G. Tanuan – by teleconference

Staff: C. Fernandes

P. DeCock A. Coke M. Kokai R. Macchia J. Wilhelm

S. Harris, Recording Secretary

1. Roll Call and Apologies

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

Prayers were offered for Giselle Romanino's uncle who will be undergoing surgery, the families of those who died tragically and who were impacted by the Humboldt Broncos bus accident, and the family of the University of Toronto student who died in a hit and run accident.

Apologies were tendered on behalf of Dario Imbrogno, John MacKenzie, Gizelle Paine, Laurie Ricciuto and Glenn Webster.

2. Approval of the Agenda

MOVED by Giselle Romanino, seconded by Tyler Munro, that the Agenda, as amended, to include the Addendum and Inquiries from Sandra Mastronardi, be approved.

The Motion was declared

CARRIED

3. Declarations of Interest

There was none.

4. Approval and Signing of the Minutes

MOVED by Trustee Kennedy, seconded by Giselle Romanino, that the Minutes of the Regular Meeting held on March 21, 2018, be approved.

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5. Delegations

MOVED by Sandra Mastronardi, seconded by Giselle Romanino, that Item 5a) be adopted as follows:

5a) Lisa Geelen regarding Toronto Catholic District School Board Diabetes Policy received.

MOVED in AMENDMENT by Trustee Kennedy, seconded by Trustee Andrachuk, that SEAC provide a copy of the presentation to the Board of Trustees and that SEAC recommend to the Board of Trustees that some action be taken around the Diabetes Policy.

The Amendment was declared

CARRIED

The Motion, as amended, was declared

CARRIED

MOVED by Trustee Kennedy, seconded by Tyler Munro, that Item 5b) be adopted as follows:

5b) Matthew DeAbreu regarding Management of Diabetes at Toronto Catholic District School Board received.

CARRIED

MOVED by Trustee Kennedy, seconded by Sandra Mastronardi, that Item 5c) be adopted as follows:

5c) Chris Jarvis regarding Diabetes at School received.

MOVED in AMENDMENT by Trustee Kennedy, seconded by Sandra Mastronardi, that SEAC recommend to the Board of Trustees that they consider delegations from Chris Jarvis, Matthew De Abreu and Lisa Geeelen, and that SEAC contact all delegates to consider delegating to the Board of Trustees at the same time that their delegations are being considered by the Board.

The Amendment was declared

CARRIED

The Motion, as amended, was declared

CARRIED

MOVED by Giselle Romanino, seconded by Ashleigh Molloy, that Item 5d) be adopted as follows:

5d) Laura DiCredico Timmons regarding Education Program – Other (EPO) Funds and Grants for Student Needs (GSNs) and What Impact would take place to Students with Autism Spectrum Disorder (ASD) Diabetes at School received.

MOVED in AMENDMENT by Sandra Mastronardi, seconded by Ashleigh Molloy, that the item be referred to staff.

The Amendment was declared

CARRIED

The Motion, as amended, was declared

CARRIED

Trustee Kennedy left the meeting.

12. Reports of Officials for Information

MOVED by Sandra Mastronardi, seconded by Ashleigh Molloy, that Items 12a) and 12b) be adopted as follows:

12a) Budget Report: Financial Planning and Consultation Review received.

&

12b) Budget Report: 2018-19 Grants for Student Needs Update received.

MOVED in AMENDMENT by Sandra Mastronardi, seconded by Ashleigh Molly, that SEAC recommend to the Board of Trustees that Union leaders, as partners in Education, both elementary and secondary, be invited to come to a SEAC meeting to help us to better understand how the Collective Agreement impacts special needs students in the classrooms.

The Amendment was declared

The Motion,	as	amended	, was	dec	lared
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9. Communications

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

9a) SEAC Monthly Calendar Review received.

The Motion was declared

CARRIED

MOVED by Ashleigh Molloy, seconded by Sandra Mastronardi, that Item 9b) be adopted as follows:

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

The Motion was declared

MOVED by Ashleigh Molloy, seconded by Giselle Romanino, that Item 9c) be adopted as follows:

9c) 2018-19 School Year Education Programs – Other (EPO) Funding – Memo from Bruce Rodrigues, Deputy Minister received.

The Motion was declared

CARRIED

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

9d) Grants for Student Needs (GSN) for 2018-19: Memo from Andrew Davis, Assistant Deputy Minister, Education Labour and Finance Division received.

The Motion was declared

CARRIED

MOVED by Sandra Mastronardi, seconded by Giselle Romanino, that Item 9e) be adopted as follows:

9e) Ministry of Education 2017 Governance Engagement: Letter from Bruce Drewett, Director Leadership, Collaboration and Governance Branch received.

The Motion was declared

MOVED by Sandra Mastronardi, seconded by Ashleigh Molloy, that Item 9f) be adopted as follows:

9f) Update on Medical and Conditions and Consultation received.

The Motion was declared

CARRIED

MOVED by Ashleigh Molloy, seconded by Tyler Munro, that Item 9g) be adopted as follows:

9g) Verbal Update to Special Education Programs for 2018-19 received.

The Motion was declared

CARRIED

MOVED by Sandra Mastronardi, seconded by Giselle Romanino, that Item 9h) be adopted as follows:

9h) March 31st Enrolment – Special Education received.

The Motion was declared

CARRIED

MOVED by Sandra Mastronardi, seconded by Ashleigh Molloy, that Item 9i) be adopted as follows:

9i) Staff Shortage – Verbal Discussion received.

The Motion was declared

12. Reports of Officials for Information

MOVED by Giselle Romanino, seconded by Ashleigh Molloy, that Item 12c) be adopted as follows:

12c) Verbal Update from Tyler Munro regarding Safe Schools Committee received.

The Motion was declared

CARRIED

13. Inquiries and Miscellaneous

- 13a) Inquiry from Sandra Mastronardi regarding Multi-Year Strategic Plan Consultation for SEAC noted.
- 13b) Inquiry from Sandra Mastronardi regarding 2018-19 Budget Consultation for SEAC noted.

14. Association Reports

MOVED by Sandra Mastronardi, seconded by Ashleigh Molloy, that Item 14a) be adopted as follows:

14a) Autism Ontario received.

The Motion was declared

	MOVED by Ashleigh Molloy, seconded by Tyler Munro, that Item 14b) be adopted as follows:
14b)	The Learning Disabilities Association of Ontario (LDAO) SEAC Circular, April 2018 received.
	The Motion was declared CARRIED
16.	MOVED by Sandra Mastronardi, seconded by Giselle Romanino, that Item 16a) Pending List be received.
17.	Adjournment
	MOVED by Ashleigh Molloy, seconded by Sandra Mastronardi, that the meeting adjourn.
	The Motion was declared
	CARRIED

SECRETARY

CHAIR



CORPORATE SERVICES, STRATEGIC PLANNING AND PROPERTY COMMITTEE

2018-19 BUDGET ESTIMATES (VOLUMES 1, 2, 3 – INCLUDES INSTRUCTIONAL)

"Rejoice always, pray continually, give thanks in all circumstances; for this is God's will for you in Christ Jesus"

1 Thessalonians 5:16-18

Created, Draft	First Tabling	Review
May 29, 2018	June 6, 2018	
D D C 1 C 4 11	CD . C . O.E.	

P. De Cock, Comptroller of Business Services & Finance

RECOMMENDATION 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

T. Robins Acting Associate Director of Planning and Facilities

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

A. EXECUTIVE SUMMARY

As per the requirements set out in the Education Act, TCDSB's budget estimates are balanced. The 2018-19 budget expenditure and revenue estimates appearing in Volumes I to V of the Budget Book are balanced; based on consensus enrolment and staffing projections, and calculated Grants for Student Needs (GSNs) and Other Program funding projections.

Two budget related reports have been submitted to facilitate Trustees with conflicts of interest on instructional related funding, at their own discretion, the opportunity to participate in non-instructional and reserve funding related discussions. Volumes I to III focus on both the overall budget as well as instructional related expenditures, while Volume IV focuses on non-instructional expenditures and Volume V on financial sustainability.

The first volume appearing in the 2018-19 Budget Book provides an overall contextual summary. The Volume is meant to provide trustees, parents and other stakeholders a snapshot of TCDSB's profile as a large, urban, diverse and Catholic school board. Enrolment data refers to the number of students projected to attend TCDSB schools in 2018-19, and is the key driver for revenue and expenditure calculations. Enrolment projections show an increase of 397 elementary students and 10 Secondary students for the 2018-19 school year. The total student population is expected to be 91,215

The overall Grants for Student Needs are projected to increase. TCDSB is projected to derive 92.8% of its operational revenues from the Provincial Grants for Student Needs (GSNs). The remaining funds are received in the form of Education Programs - Other (EPOs) and other government agencies. Total funding is expected to increase by approximately \$20.6M. 2018-19 Revenue projections are as follows:

Panel	2017-18	2018-19	Change
	(\$ B)	(\$B)	(\$B)
GSNs	1.04	1.06	0.02
EPOs	0.08	0.08	0.00
Total	1.12	1.14	0.02

The projected enrolment and estimated GSNs provide the capacity to determine the TCDSB's instructional and support service levels. The Education Act and its regulations concerning class sizes and required instructional minutes, consequently, prescribes TCDSB's service levels. The projected expenditures in the Instructional expenditure category are estimated in the table below:

Instructional Expenditure	2017-18	2018-19	Change
Categories	(\$ M)	(\$ M)	(\$M)
Classroom Teachers	619.2	631.6	12.4
Professionals & Paraprofessionals	51.4	53.8	2.3
In School Administration	67.4	68.7	1.2
Textbooks & School Computers	35.0	35.9	0.9
Education Assistants	53.7	54.4	0.7
Continuing Education	23.6	23.8	0.2
Resource Teachers	5.4	5.5	0.1
Occasional Teachers	29.3	29.4	0.1
Early Childhood Educators	27.3	27.2	(0.1)
Staff Development	3.2	2.9	(0.3)
Other Non-Operating	42.7	41.9	(0.8)
Total	958.2	975.1	16.9

The 2018-19 Budget Estimates includes additional investments in Instructional Expenditure Categories. The 2018-19 GSN announcement considered service level increases to both non-discretionary and discretionary areas of the Instructional expenditure budget. "Non-discretionary" investments are considered to be investments largely related to enrolment growth, restricted funding from the Province or required through arbitration settlements. "Discretionary" investments are generally those using remaining unrestricted GSN funding. In total, staff are recommending an increase of complement of 94.9 Full Time Equivalent (FTE) staff inclusive of new Elementary Teachers, Elementary Guidance Teachers, Secondary Teachers, Special Education Teachers, Special Education Professionals, and Vice-Principals.

(Please note that three additional FTEs for Non-Instructional are also recommended through the second report concerning budget on this same agenda.)

In addition to investments from the GSNs, the 2018-19 budget estimates recommends one-time Strategic Instructional Expenditure investments from the

Accumulated Surplus for Computer and Telephony Technology in the amount of \$1.4M.

The cumulative staff time required to prepare this report was 210 hours.

B. PURPOSE

1. This report has been prepared for the Board of Trustees in order to receive the Introduction Volume I and approve the 2018-19 Budget Estimates for Revenues (Volume II) and Instructional Expenditure Categories (Volume III), appearing in the attached 2018-19 Budget Book.

C. BACKGROUND

- 1. **Total GSN funding for the TCDSB is increasing.** The overall 2018-19 GSNs are increasing (refer to Volume II). The increased GSN amounts sets out the key provincial policy and funding changes supported by these regulations, such as investments in Special Education Supports, Mental Health Resources and a continuing reduction to class sizes to name just a few initiatives. It also sets out the funding measures intended to help boards keep up with inflationary costs and provincial discussion table labour agreements, salary and benefits increases.
- 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 Ministry consultation engagement sessions.
- 3. *EPO and Other funding amounts are declining*. Other revenues, i.e. Education Programs Other (EPO) and Tuition Fees are declining compared to 2017-18. The decline is primarily due to a reduced projection of international Visa student tuition fees.
- 4. New Investments in the education sector will increase TCDSB's service and support levels. The TCDSB was in a Multi-Year Recovery Plan (MYRP) for the last few years and difficult decisions reduced service levels across all functional areas of the Board. As a result, the 2018-19 GSN projections, has created an opportunity to reinvest in TCDSB's instructional expenditure areas (refer to Volume III) and recommend a balanced budget. These investment recommendations are provided at a high level for "Non-Discretionary"

investments and more specifically for "Discretionary" investments below. Further details can be found in Volume III of the Budget Book.

Non-Discretionary GSN Investments in Instructional Expenditures	FTE	(\$M)
Special Education Teachers	34.4	3.4
Elementary Teachers	33.5	3.3
Special Education – Other Professionals	12.0	0.8
Principals and Vice-Principals	4.0	0.7
Secondary Teachers	1.0	0.1
Total	84.9	8.3

Discretionary GSN Investments in Instructional Expenditures	FTE	(\$M)
Elementary Guidance Teachers	8.0	0.6
SHSM / Student Success Resource Teacher Leads	2.0	0.2
Total	10.0	0.8

Total Non-Discretionary and Discretionary GSN	FTE	(\$M)
Investments Grand Total	94.9	9.1

5. Staff are also recommending that a strategic investment of \$1.4M be made out of the Accumulated Surplus to support Computer and Telephony technology. Staff believe this is achievable given the surplus and still fiscally prudent, while responding to some urgent technology upgrade needs. Volume V provides context for how this fits in with the Reserve Strategy.

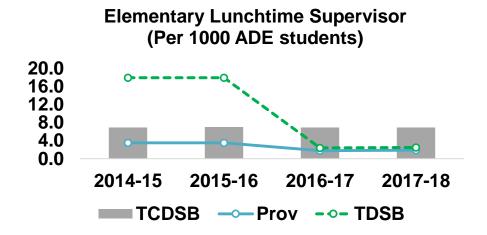
Discretionary Surplus Investments in Instructional Expenditures	(\$M)
Increase Investment in Computer & Telephony Technology	1.4

D. BUDGET CONSULTATION RESULTS:

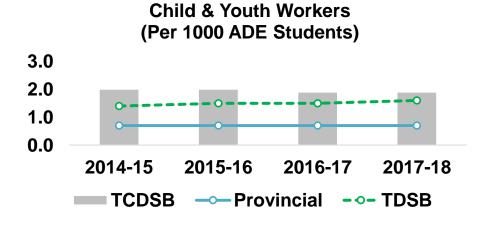
1. The 2018-19 budget consultation survey was administered to stakeholders between April 27, 2018 to May 10, 2018. Four hundred and thirty-five (435) stakeholders responded to the survey questions. Key questions posed for the Instructional areas were in Safe Schools, Special Education, Student Success, Equity in School Funding and Living our Catholic Values. The remainder of

this section provides both a summary of key consultation results and in some cases some additional data for context.

2. For Lunch Room Supervisors, opinions were split on this issue with just over 40% agreeing to strongly agreeing that supervision is adequate while 43% disagreed with the statement. The table below is provided to illustrate that the TCDSB is currently above both the Provincial average and the Toronto Public School Board (TDSB) allocation for Lunchtime Supervisors.



3. Over 50% of the respondents do not believe levels of Child and Youth Workers (CYW) is adequate in the classroom. While staff acknowledge the value of these workers and increased service levels in many areas of the instructional budget is in fact desirable, this year's budget has very little room for discretionary new investments. Additionally and for context, staff have provided a chart below indicating that TCDSB currently has a higher number of CYW's per 1000 students then both the TDSB and the Provincial average.



- 4. Over 80% of respondents agree or strongly agree that additional investments in technology for the classroom should be pursued. Staff advise that the current budget has proposed additional investments in this area.
- 5. Over 46% want more implementation of Before and After school programs. Staff advise that a Before and After school program report was before the Board earlier this year. The Board approved a recommendation whereby staff will continually monitor the need for Before and After school programs and add new programs where a need is identified and it is financially feasible to do so on a not for profit basis. It should also be noted that the TCDSB currently has Before and After school programs at 75% of its elementary schools.
- 6. 62% of respondents wanted the current method of allocating school block budgets based on socio-economic factors to be maintained. Staff advise that this same methodology has been maintained in the 2018-19 budget estimates.
- 7. On Resources and Learning materials provided to TCDSB students, over 55% agree that current resource levels are adequate. On the question of Catholic Faith-based activities, two thirds of respondents feel it is adequate. Staff advise that there have been no reductions in resources and learning materials. Funding for Catholic Faith-based activities have also been maintained for the 2018-19 budget estimates.
- 8. In addition, there were budget presentations to a large number of TCDSB stakeholders. This included two rounds of consultations with Unions and Federations, Audit committee, and the Ontario Association Parents in Catholic Education (OAPCE). An initial presentation was provided to the Special Education Advisory Committee (SEAC), but unfortunately due to some scheduling conflicts within SEAC a second round of consultation did not occur. Individual SEAC members were still invited to a subsequent consultation with OAPCE and Catholic Parent Involvement Committee (CPIC).
- 9. OAPCE was the only organization to provide a formal communication with regard to the budget consultation. That letter is appended at the end of this report. The communication describes a few issues and questions that were discussed during the meeting with staff. Finance and academic staff responded to these inquiries in-person. The most relevant part of this communication to the deliberation of the Instructional part of the budget is that they have asked

- that the allocation of new resources to CYWs, Education Assistants (EAs) and Social Workers be revisited.
- 10. Staff responded to a great deal of questions and comments through all consultations and it was fruitful for both staff and stakeholders alike. Some exchange of information is still ongoing with some stakeholders (union groups) and members of SEAC, but staff recommend that the budget be approved as is and ongoing dialogue can continue and lead in to the 2019-20 budget process.

E. STAFF RECOMMENDATION

- 1. That the Board of Trustees approve a balanced budget with a base budget increase in the Instructional Category by \$16.9M, inclusive of 94.9 new FTEs, as further detailed in Volume III of the Budget Book.
- 2. That the Board of Trustees approve for inclusion into the Instructional Expenditure Category budget a strategic one-time investment from Accumulated Surpluses of \$1.4M for Computer and Telephony Technology, as further detailed in Volume III of the Budget Book.

Toronto Catholic District School Board

2018 – 2019 Budget Estimates



May 17, 2018

Draft – Until approved by

Board of Trustees (Expected

June 6, 2018)



Board of Trustees

Catholic school trustees are the critical link between communities and school boards. Catholic ratepayers in City of Toronto elect 12 English Language Trustees to the Toronto Catholic District School Board during each municipal election. The Chair of the Board and the Vice-Chair are elected at the Inaugural meeting of the Board, and serve for one year.

Working together, a school trustee is responsible, as a member of the Board:

- To govern and set policy.
- To govern for the provision of curriculum, facilities, human and financial resources.
- To advocate for the needs of their communities.
- As a constituency representative, to explain the policies and decisions of the TCDSB to residents.

Trustees are available to help taxpayers, parents and others



Trustee Joseph Martino Ward 1: Etobicoke



Trustee Ann Andrachuk Ward 2: Etobicoke



Trustee Sal Piccininni Ward 3: North York



Trustee Patrizia Bottoni Ward 4: North York



Trustee Maria Rizzo Ward 5: North York



Trustee Frank D'Amico, CD Ward 6: York



Trustee Michael Del Grande
Ward 7: Scarborough/North York



Trustee Garry Tanuan Ward 8: Scarborough



Trustee Jo-Ann Davis Ward 9: Toronto



Trustee Barbara Poplawski Ward 10: Toronto



Trustee Angela Kennedy
Ward 11: East York/Toronto



Trustee Nancy Crawford Ward 12: Scarborough



Trustee Rhea Carlisle Student Trustee: All TCDSB Schools



Trustee Joel Ndongmi
Student Trustee: All TCDSB Schools



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EXECUTIVE SUMMARY

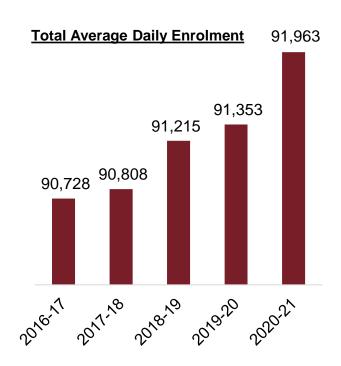
Balancing fiscal responsibility with service to our students

The Toronto Catholic District School Board's (TCDSB) budget process is largely about balancing the ongoing cost pressures associated with operating a large urban school board, and ensuring that students receive the best possible environment to encourage achievement and well-being through the lens of Catholic Faith.

TCDSB has made difficult decisions over the last few fiscal years to reduce staffing service levels in order to solve an ongoing deficit issue within the Board's previous budgets. This plan was called the "Multi-Year Recovery Plan" and has been achieved two years earlier than expected.



The 2018-19 Operating Budget Estimates focus on some new investments, while remaining conscious of fiscal restraint and planning for the future.



Our students and staff are at the centre of the budget

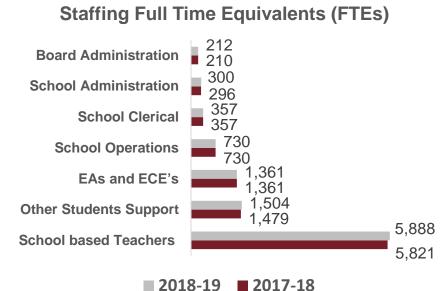
The primary cost drivers of TCDSB's budget are student enrolment and the related staffing levels required in the classroom. TCDSB is a growing board. 407 students are expected to be added in the 2018-19 school year. The Board will continue to grow in the foreseeable future.

As a result, staffing levels are also expected to grow. TCDSB currently has 10,255 Full Time Equivalent (FTE) positions



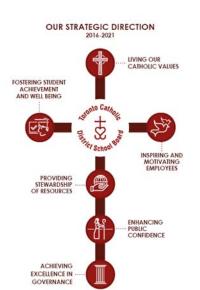
working at its 195 schools, Board Office and other administrative facilities.

2018-19 will see an additional 97.9 new FTEs added to the complement to address growth and increase service specific levels in 97% of this areas. year's budget increase is directly related to student and classroom related increases.



Linking the budget to the Multi-Year Strategic Plan

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.

This budget process includes some preliminary work on linking the budget to the MYSP. Staff attempted to allocate various portions of the budget to each of the six strategic directions to provide a conceptual level view of how the budget delivers on the MYSP. It is expected that future budgets will contain even

more detail on these allocations and will start to create a reciprocal relationship or "feedback loop" between these two strategic discussions.



Operating revenues are estimated to balance with operating expenditures

Based on legislation, school boards are not permitted to plan for in-year deficits in their budget setting process, with very few exceptions. TCDSB has followed some fiscally prudent approaches over the last several years to

balance its budget. Given the announcements by the Ministry of Education on additional funding, the 2018-19 budget has provided an opportunity to make several new investments while maintaining a balanced budget.

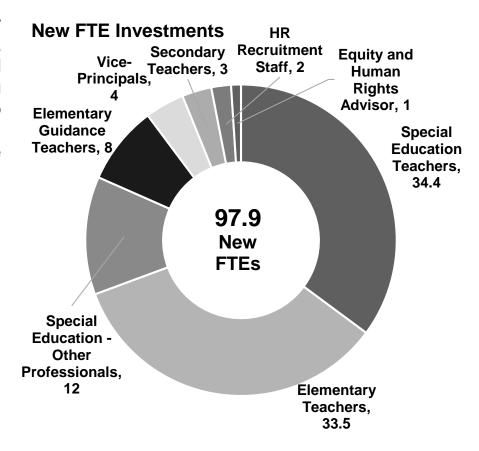
(\$M)	2017-18	2018-19
Operating	\$1,120.3	\$1,140.8
Revenues		
Less: Operating	\$1,120.2	\$1,140.7
Expenditures		
Operating Surplus	\$0.1	\$0.1

Several factors such as restrictions on funding eligibility, arbitration decisions with labour unions and new legislative requirements have caused pressures that have constrained TCDSB on how much new funding can be allocated to discretionary type investments. Despite these challenges, the TCDSB is planning for a notional surplus of \$0.1M in the 2018-19 fiscal year.

New investments in the system are recommended to bolster service levels

The 2018-19 budget contains several new investments ranging from classroom teachers to special education workers to an Equity and Human Rights advisor, that will help the board continue to provide high service levels to its students. The majority of these investments are based on restricted funding and arbitration decisions, but nevertheless are seen as critical and

positive new resources in a board that has had to reduce staffing in several areas to balance its fiscal position over the last few years.



Planning for the future requires a strategy to reserve funding

As the TCDSB In-Year and Accumulated Surpluses / (Deficits) emerges from the Surplus 25.7 deficit and the 25.0 MYRP. it has become 10.6 especially In Millions 3.9 important to consider how the Board treats accumulated (7.9)deficits, surpluses plans and strategic future 2014-15 2015-16 2016-17 2017-18 2018-19 School Year investments. The Education Act In Year Surplus/(Deficit) ← Accumulated Surplus/(Deficit) allows boards to create reserves for specific intended purposes. As long as



these reserved funds are uncommitted then they still contribute towards the Board's accumulated surplus.

At the end of the 2017-18 fiscal year, the TCDSB is expected to have an accumulated surplus of \$25.0M. \$10.5M is related to moving employees and retirees to new Provincially mandated benefit trusts. This surplus amount has not yet been confirmed by the Province. This leaves \$14.5M available to be reserved for specific purposes.

In recent history TCDSB has made some fiscally prudent decisions to begin informally reserving funding. This year's budget process recommends formalizing this approach. For instance, a motion was passed in the 2017-18 budget year that 1% of the accumulated surplus be set aside as a contingency to address potential in-year deficits in future years. This budget process recommends setting this aside in a "Operating Contingency Reserve". Once the potential benefit surpluses materialize then this amount would also be added to this reserve to work towards a contingency that is equivalent to 2% of the TCDSB's operating budget.

The reserve strategy has four primary action components for this year:

1. Consolidate some existing reserves into newly formed strategic reserves.

2018-19 New Consolidated Reserves (\$M)	
I.T. Infrastructure Reserve	\$2.18
Admin Facility Reserve	\$1.20
Total	\$3.38

2018-19 One-Time Strategic Investments (\$M)	
IT Hardware Replacements HR Recruitment Initiatives School Board Cooperative Inc. Services	\$1.40 \$0.12 \$0.22
Total	\$1.74

2. Identify one-time strategic investments for 2018-19 to be funded by the accumulated surplus.



3. Apportion the remaining available accumulated surplus in to new strategic reserves.

2018-19 New Strategic Reserves (\$M)		
Operating Contingency Reserve	\$11.20	
IT Strategic Systems Reserve	\$1.50	
Total	\$12.70	

% Allocation of In-Year Surpluse Strategic Reserves	es to
Operating Contingency Reserve (To Max of 2% Contingency)	50%
IT Strategic Systems Reserve	40%
Admin Facility Reserve Student Equity Strategic Reserve	5% 5%
Total	100%

4. Formulate a strategy to apportion in-year surpluses or fund in-year deficits at year end.



Toronto Catholic District School Board

Volume I: The TCDSB Context



This book provides both an overview and details of the proposed 2018-19 Budget Estimates

As Toronto Catholic District School Board (TCDSB) grows, so does it method of communicating a large and complex budget. The format of this book is the first step in creating a format that can be used by trustees, parents, staff, students and other stakeholders to understand and navigate the budget.



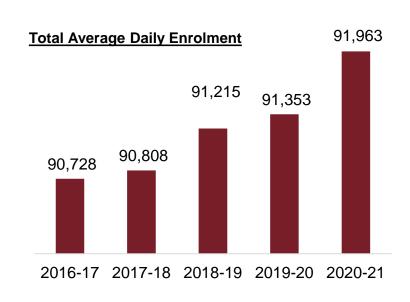
This changed format is still in the early stages of its evolution and will likely improve as we move to future budget cycles.

The book starts in this Volume by providing some context on the TCDSB in terms of its students, staff, transportation issues and the budget process. It then provides an overview of

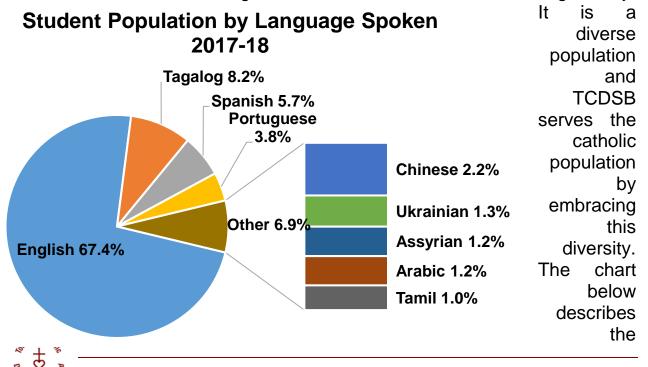
revenue sources and how the TCDSB is funded in Volume II. Volumes III and IV provide an overview and details of expenditures and new investments in Instructional and Non-Instructional activities in the organization, respectively. Finally, Volume V provides context on Financial Sustainability and recommends a Reserve Strategy to consider as we move forward.

Our Students are the most valuable part of this organization

Our student enrolment is what drives the organization and consequently also the budget process. With student а population of 90,808 in 165 Elementary Schools and 31 Secondary Schools, the TCDSB is one of the five largest Ontario Boards in (including Catholic and Public).



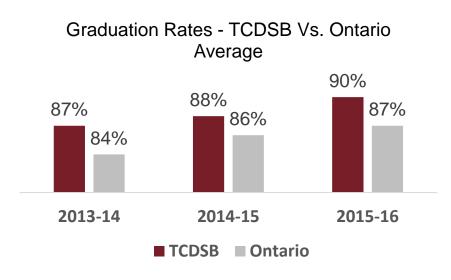
The TCDSB thrives in a large urban environment in Canada's largest City.



demographics through the lens of languages spoken. The information contains groups that are above 1% of the Population.

Our students are achievers and our system is built to graduate educated,

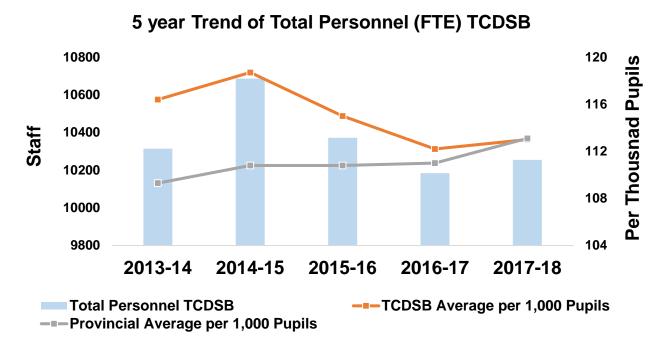
Catholic and contributing members of society. Our graduation rates have consistently higher trended than that of provincial averages over the last few years.



Our Staff provide the necessary human resources to fulfill our mandate as Catholic educators

TCDSB has a total of 10,255 FTE positions as of the 2017-18 school year. A little more than 50% of this staff is comprised of school based teachers, while another 30% make up Education Assistants, Early Childhood Educators and other Student Support staff. Another 18% of staff is for School Administration (Principals and Vice-Principals), school clerical staff, school operations, while the remaining 2% is for Board Administration. Over the last 5 years, the TCDSB has reduced its staffing levels to meet financial pressures it faced in terms of matching staffing expenditures to the funds received by the Province. As can be seen by the chart below, the TCDSB has moved to a point where overall service levels from a staffing point of view are matching those of provincial averages, while remaining fiscally sustainable. Certain specific areas such as School Administration, School Operations and Board Administration are below the provincial average, while other classroom based areas are still trending above the provincial average.





Transportation is one of the largest non-staffing related expenses for the Board

The Toronto Student Transportation Group (TSTG) is a consortium between the Toronto Public Board and the Toronto Catholic Board. It services a large and dynamic student population within the City of Toronto. A majority of funding dollars are directed towards the student transportation services for students with special needs. Unique needs, geography, and modified program hours are just some of the factors impacting the delivery of transportation services for special needs students.

For large capacity buses the routing methodology that provides the most cost effective solution given the geography and student density is the coupling of runs. This means that bus runs will service one school community and then proceed out again to service another school community. This maximizes the use of the bus while improving the level of service for students.

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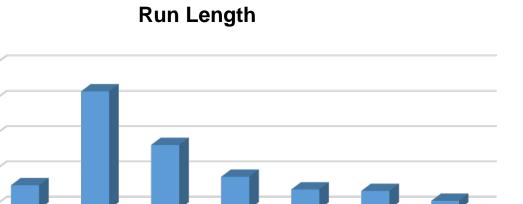
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1-10

11-20

21-30



41-50

51-60

60 +

Technology in the school bus industry has been expanding rapidly in the last few years. Additional communication tools will be launched to provide schools and parents better access to the buses that are servicing their schools. School bus delay notifications will no longer be isolated to e-mail but expanded to include text messages, RSS feeds, and applications to better communicate delays and service announcements to our school communities and families.

31-40

Run Time in Minutes

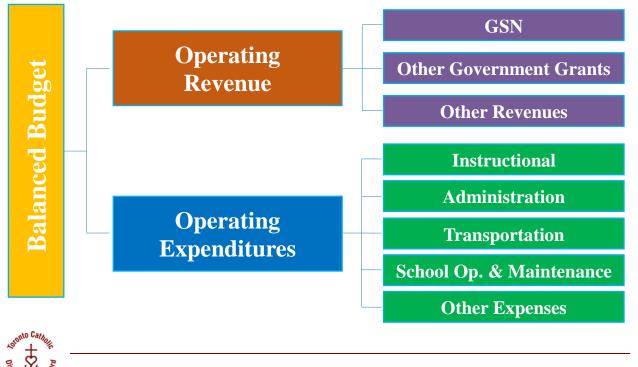
Creating a budget is an iterative and consultative process

School boards are required to submit the 2018-2019 Estimates (budget) forms to the Ministry by June 30, 2018. The 2018-19 Budget includes Operating Budget sections that have been prepared on a modified cash basis, which is consistent with prior years. However, school boards are required to prepare their budgets in accordance with Public Sector Accounting Board (PSAB) standards.

OEP Draft Enrolment Based upon the draft Official Enrolment Projection Projections (OEP) along with the updated Ministry of Education funding information, budget staff build draft revenue **Ministry Funding** expenditures for and **Updates** deliberations of the Board and consultation with the public. Through several meetings, the Board of Trustees receive information from board staff and public deputations. Draft Revenue & Expenditure end-result of these meetings is the approval Determination of the budget by the Board for submission to the Ministry of Education. The goal **Board Approval** is for the Board to have a Meetings transparent and accountable

budget to stakeholders which ties into the goals of Multi-Year Strategic Plan and Ministry guidelines.

The basic breakdown of the TCDSB budget is depicted in the illustration below, however a considerable amount of detail and complexity lies beneath each of the boxes represented by the revenues and expenditures.



Boards are required by the Education Act to submit a balanced budget to the Ministry of Education. This means that the following simple equation must be met (with few exceptions):

Operating Revenue = Operating Expenditures

Preliminary linkages have been identified to illustrate how the budget delivers on the Multi-Year Strategic Plan (MYSP)

The following section provides a brief overview of the linkages that staff have identified between the budget and the MYSP. This should only be considered as preliminary in nature and more work will be completed in future budget cycles to deepen the understanding of these linkages. The figures below are provided as one way of viewing the budget. They are not for approval purposes, but rather for informational purposes. Subsequent sections of this book provide budget figures for approval in a more functional format. Please note that all expenses are rounded to the nearest \$0.1M, therefore some expenses noted as \$0.1M may be lower.



LIVING OUR CATHOLIC VALUES

To understand and apply Catholic Teachings to all that we do

1.	Chaplaincy	\$2.5M
2.	Religious Program Materials & Resources	\$1.5M
3.	Religious Retreats	<u>\$0.1M</u>
		<u>\$4.1M</u>

It should be noted that "Living Our Catholic Values" figure has been derived by including "direct" expenses. TCDSBs "indirect" expenses, which include hundreds of millions of dollars of teaching and support staff costs, truly reflect an overall investment in our Catholic system and "Living Our Catholic Values".





FOSTERING STUDENT ACHIEVEMENT AND WELL-BEING

To support our students in achieving academic excellence and meeting the Ontario Catholic School Graduate Expectations

Instructional Day School Staff & Supplies	\$760.7M
2. Student Support Services	\$68.5M
3. Special Education Programs & Services	\$4.3M
4. Safe School Team	\$0.2M
5. Student Transportation Services	\$35.7M
6. Student Nutrition Program – Angel Foundation	\$0.1M
7. Student Pediculosis Program	\$0.1M
G	\$869.6M



ENHANCING PUBLIC CONFIDENCE

To create enhanced, regular communication with all stakeholders

1. Executive Offices	\$5.1M
2. Communications Office	\$0.6M
	\$5.7M





PROVIDING STEWARDSHIP OF RESOURCES

To establish integrated decision-making structures and processes to support responsive and responsible allocation of resources

1. Business Administration	\$4.8M
2. Corporate Services	\$1.1M
3. Facility & Planning Services	\$1.7M
4. Computer & Information Technology	\$23.5M
5. School Operations & Maintenance	\$98.1M
·	\$129.2M



ACHIEVING EXCELLENCE IN GOVERNANCE

To lead and model best practices in Board governance

1. Trustees & Trustee Services	\$0.9M
2. Parliamentarian Services	<u>\$0.1M</u>
	\$1.0M



INSPIRING AND MOTIVATING EMPLOYEES

To create a learning and work environment that is equitable and diverse, and that supports professional learning, innovation and collaboration

Human Resources	\$6.3M
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Toronto Catholic District School Board

Volume II: Operating Revenue



School Board Operating Revenues come from three major sources

Grants for Student Needs (GSNs) Provincial Source

- Classrooms
- Schools
- Locally managed system
- Specific Priorities

Education Programs - Other (EPOs) Provincial Source

- Time limited
- Specific
- Enveloped
- Uncertain and unpredictable
- Not always incorporated in to the operating budget as a result of the above

Other Revenues Various Sources

- Adult education fees
- VISA or nonresident tuition
- Interest revenue
- Daycare
- Fundraising by schools

Grants for Student Needs (GSN) funding is primarily driven by student enrolment

The majority of operating funding received by TCDSB comes from the annual GSN. The GSN is a collection of grants, which supports funding for the classroom, school leadership and operations, specific student-

related priorities and local management by school boards. The key determinant for these grants is enrolment. The measure of enrolment used for funding purposes is the average daily enrolment (ADE) of pupils. Boards report the full-time equivalent of pupils enrolled for each school year as of October 31st and March 31st, the two 'count dates' during a school board's fiscal year. The calculation of ADE is based on an average of the full-





time equivalent pupils reported on the two count dates. The GSN is a collection of grants by grouping grants under the following headings:

Funding for classrooms focuses on providing classroom resources.

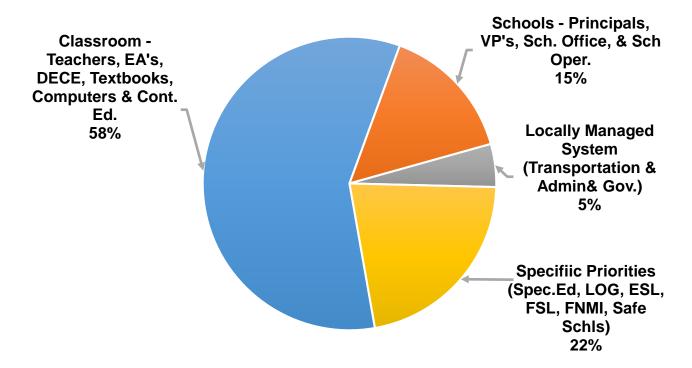
Funding for schools provides the resources to ensure schools have the leadership they need and are clean and well-maintained facilities for learning.

Funding a locally managed system aims to ensure board leadership carries out focused activities to support alignment of resources.

Funding for specific priorities speaks mainly to the Achieving Excellence goal of closing gaps by, for example, meeting special education needs and improving language proficiency.

The Following Chart Breaks the GSN in the four areas described above Funding for Classrooms (Foundation & Continuing Ed.), Funding for Schools (Principals, VP's, Sch. Office & School Operations), locally managed systems (Transportation & Administration & Governance), and Specific Priorities (English as Secondary Language (ESL), French as Secondary Language (FSL), Learning Opportunities Grant (LOG), First Nations, Métis, and Inuit (FNMI), Safe Schools).

2018-19 Operating Allocation Percentages by 4 Major Categories



The ministry recognizes that conditions vary widely across Ontario and the funding formula cannot take every situation into account. So local school boards have flexibility in how they use funding, within the overall accountability framework. Appendix 2A provides a description of the specific grants under each of the headings above as well as the expected increase for TCDSB in the 2018-19 school year.

The following Chart summarizes the Grants for Student Needs (GSN's), EPO's and Other revenues estimated to be received in 2018-19 with a comparison to the 2017-18 Revised Estimates. An increase of \$23M in GSN's is estimated with an estimated decrease in EPO and Other revenues of (\$2.4M) for a net increase in operating revenues of \$20.6M.

TCDSB 2018/19 Operating Grants & Other Revenues Estimates (000's)

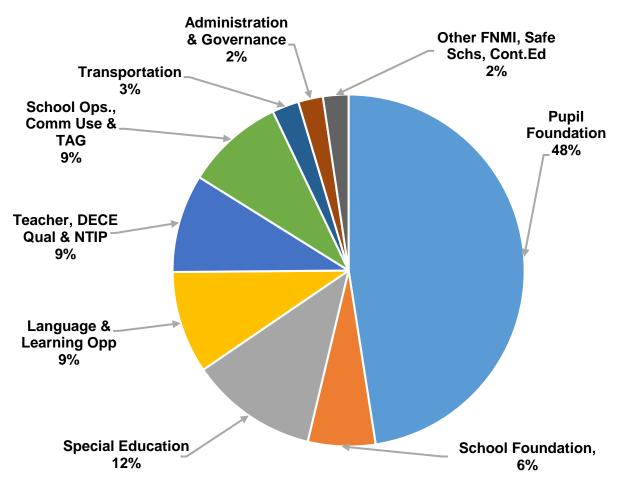
Revenues	2017/18 Budget Revised Estimates	2018/19 Budget Estimates	Variance Incr./(Decr.)
Pupil & School Foundation	554,097	568,710	14,613
Special Education	119,949	124,132	4,183
Language	37,418	39,588	2,170
Learning Opportunity	59,070	59,882	812
Continuing Education and Summer School	16,667	17,408	741
Teacher Qualification and Experience/NTIP	99,997	95,456	(4,541)
Transportation	24,963	26,066	1,102
Administration and Governance	22,761	24,019	1,257
School Operations	88,130	90,334	2,204
Community Use of Schools	1,262	1,253	(9)
Declining Enrolment Adjustment	95	24	(71)
Temporary Accommodation	3,674	4,056	382
First Nation, Métis and Inuit Education	4,415	4,590	175
Safe Schools	2,817	2,820	2
Total Operating Grants	1,035,316	1,058,336	23,020
Grants Anticipated due to New Contracts	0	0	0
Other Grants & Other Revenues	84,910	82,505	(2,406)
Total Operating Grants and Other Revenues	1,120,227	1,140,841	20,614

*Numbers may not add due to rounding.



The following chart provides a percentage breakdown of the grant allocations proposed for the 2018-19 budget.

2018-19 GRANT ALLOCATIONS (\$1,058.3 MILLIONS)





VOLUME II - APPENDICES



APPENDIX 2A

DESCRIPTION OF GSN FUNDING:

Pupil Foundation Grant (Increase by \$13.1M)

For 2018-19, funding through the Pupil Foundation Grant is projected to be \$503.1M for TCDSB.

The largest single element of the GSN TCDSB receives, provides funding for the salaries of classroom teachers, early childhood educators for full-day kindergarten, educational assistants, and other teaching staff such as teacher librarians and guidance counsellors. It also funds textbooks, classroom supplies and classroom computers.

In 2018-19, additional funding is being provided through this grant for more teachers to help grade 7 and 8 students make successful academic transitions and engage in career and pathways planning.

The grant is calculated on a per-pupil basis. There are four different per-pupil amounts at the elementary level, depending on the grade in which a student is enrolled – kindergarten, primary (grades 1 to 3), junior (grades 4 to 6), intermediate (grades 7 to 8) – and for (grades 9 to 12) secondary students. Funding for (grades 4 to 8) class size of 24.96 were \$1.9M; Enrolment increases, 1.5% Salary increase and Benefits decrease of 0.167% or \$9.8M.

For classroom teachers, the per-pupil amounts reflect benchmark salaries and benefits, class size requirements and preparation time. For other staff, the per-pupil amount is based on salaries and benefits and staffing levels.

Qualifications and Experience Grant (Decreased by \$4.5M)

This grant provides additional support for classroom staff who have qualifications and experience above those provided for through the Pupil Foundation Grant.



- The Teacher Qualifications and Experience allocation provides funding to boards with teachers who, because of their qualifications and experience, have average salaries different from the benchmark level used in the Pupil Foundation Grant. (Hiring 78.9 FTE new teachers combined with retirements reduced this grant by (\$4.5M) as new teachers are typically paid less than their more experienced counterparts)
- The Early Childhood Educators Qualifications and Experience allocation is provided for boards with early childhood educators who, because of their qualifications and experience have average salaries different from the benchmark. (ECE Q&E increased by \$0.4M)
- The Benefits Trusts allocation provides the incremental funding required to support the transition of benefit plans for staff to the Employee Life and Health Trusts. (Increase of \$1.9M which will flow to the Trust Funds)
- The other allocations under this grant include historical adjustments to the funding of non-teaching salary costs and funding for programs to mentor and train new teachers (NTIP decrease by \$0.07M). The 2017-18 0.5% for centrally negotiated PD of \$4.4M was removed in 2018-19 as it was a one-time amount)

Continuing education and other programs (Increase by \$0.7M)

This grant supports a range of programs aimed at adult learners and day school students, including secondary students who have completed more than 34 credits and wish to continue their studies. The grant is projected to total \$17.4M in 2018-19 for TCDSB:

 The adult day school allocation supports day school programming for students who are at least 21 years of age as of December 31 of the current school year.



- The high-credit day school allocation is for day school programming for secondary students who have completed more than 34 credits and wish to continue their studies at the continuing education funding rate.
- The summer school allocation supports programming offered during the summer for day school pupils. (Increase of \$0.5M due to more student accessing summer school and e-Learning courses)
- The continuing education allocation supports a variety of programs delivered inside and outside the classroom (for example, through correspondence, self-study or e-learning), including credit courses for the purpose of e-learning a secondary school graduation diploma. (\$0.07M increase in projected students taking Night, Saturday & elearning credit courses through Continuing Education)
- The other allocations of this grant support the teaching of international and indigenous languages at the elementary level and assessments of mature students' prior learning. (1.5% Salary increase and Benefits decrease of \$0.3M)

FUNDING FOR SCHOOLS:

School Foundation Grant (Increase by \$1.5M)

This grant provides funding for principals, vice-principals and office support staff, as well as administrative supplies. The total School Foundation Grant for TCDSB is projected to be \$65.6M in 2018-19. It is divided into an elementary school and a secondary school portion. This grant includes measures which:

- Recognize a school's size as well as its remoteness and whether it is operating in a minority language context; and
- Provide greater funding overall for principals in combined elementary and secondary schools (subject to minimum enrolment limits),



and in elementary or secondary schools with multi-buildings subject to minimum enrolment limits. (Increase of \$0.5M due to multiple campuses and plus \$0.5M due to 1.5% Salary and Benefits 0.167% decrease)

School Operations Grant

This grant supports the costs of operating, maintaining and repairing school facilities. Under the formula, funding is adjusted for boards that have older schools with unique design features such as wide hallways, large shop spaces, and auditorium spaces. TCDSB is projected to receive \$95.6M in school operation, community use of schools and temporary accommodations grants.

 The school operations allocation, which addresses operating costs such as heating, lighting, maintenance and cleaning of schools, consists of several components. The largest component is based on a benchmark operating cost associated with a standard floor area for each elementary and secondary pupil. (2% Utility increase of \$0.8M; plus Enrolment increase of \$0.5M and a 1.5% Salary and 0.167% Gratuity decrease of \$0.8M)

FUNDING FOR A LOCALLY MANAGED SYSTEM:

School Board Administration and Governance Grant (Increase by \$1.3M)

This grant provides funding for board administration and governance costs, including those related to board-based staff and board offices and facilities. In 2018-19, TCDSB is projected to receive \$24.1M.

 The board administration funding model, developed in consultation with school boards, provides funding for board-level leadership, staff and related supplies and services. The model recognizes ten core functions that all boards, regardless of size, must perform. At the same time, it recognizes that enrolment is an important driver of higher administrative expenses. This new model replaces a way of allocating funding that relied more heavily on the size of boards' enrolment. (1.5% Salary increase and -0.167% Benefits decrease results in an overall increase of \$0.2M)

- New for 2018-19, the program leadership allocation provides funding to support six lead positions that were previously funded through other allocations within the GSN as well as funding outside of the GSN. (Increase of \$1M as 7 Program Leadership FTE move into board admin from other GSN and EPO Grants)
- The other allocations of this grant include funding for trustee compensation, parent engagement, consolidation accounting, internal audit, supports to improve school boards' information management, and the transformation of learning and teaching in the physical and virtual environment.
- Following Ministry consultations with the education sector, the GSN provides base funding for trustees honoraria increased by \$400 for a new base limit of \$6,300. Further updates to this grant component are expected in the future.

Student Transportation Grant (Increase by \$1.1M)

This grant provides school boards with funding to transport students to and from school. It is projected to be \$26.1M in 2018-19 for TCDSB:

- The enrolment adjustment is made available only for school boards with increasing enrolment, and is based on the percentage increase in enrolment.
- The cost update adjustment factor, which recognizes the increasing costs of providing transportation services, is 4% for 2018-19. The calculation applies the adjustment factor to each board's 2017-18 transportation grant. (Increase of \$1M)
- The fuel escalator and de-escalator provides for funding increases or decreases by comparing the actual price of diesel fuel for southern school boards and northern school boards to a benchmark price.



 Details on the other allocations within this grant, which cover transportation to provincial or demonstration schools, school bus rider safety training (Increase \$0.08M).

Declining Enrolment Adjustment (\$0.07M)

Much of a school board's revenue is determined by enrolment. When enrolment goes down, funding also declines. School boards can adjust their costs downward as well, but this may take more than one year. The declining enrolment adjustment recognizes this need for extra time. The grant, is projected to be \$0.02M in 2018-19.

FUNDING FOR A SPECIFIC PRIORITY:

Learning Opportunities Grant (Increase by \$0.8M)

The Learning Opportunities Grant (LOG) provides funding to help students who are at greater risk of lower academic achievement. TCDSB is projected to receive a total \$59.9M in 2018-19.

- The demographic allocation, which represents the largest share of LOG funding, is based on social and economic indicators that signal a higher risk of academic difficulty for students. The indicators are low household income, low parental education, one-parent households, and recent arrival to Canada. This allocation is distributed to boards based on the ranking of each of their schools on these measures, and a weighting of the measures themselves. Boards can use this funding for initiatives such as breakfast programs, homework clubs, reading recovery and independent supports. (Increase of \$0.5M in demographic allocation, 1.5% increase for Salaries and a decrease of 0.167% for Benefits)
- The Local Priorities Fund addresses 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.



- The student achievement envelope comprises six discrete allocations.
 These allocations, which directly support programs introduced over the past decade to improve student achievement, include the following:
 - Literacy and Math outside the school day, which funds remedial courses or classes for students who are at risk of not meeting the curriculum standards for literacy or math and/or the requirements of the Grade 10 literacy test. (Increase of \$0.05M for Grade 6 students)
 - Student Success, Grade 7 to 12, which funds a range of resources and activities to improve student engagement in secondary schools. (Moved PLA Amounts of (\$0.7M) to Board Administration)
 - Grade 7 and 8 Student Success Literacy and Numeracy teachers, which recognizes the need to help students in earlier grades so they are better prepared for the transition to secondary school and beyond.
 - Ontario Focused Intervention Partnership Tutoring, which helps boards set up and/or expand tutoring programs for students who are not achieving the provincial standard in reading, writing, or math.
 - The **Specialist High Skills Major** program, which allows students to customize their secondary school experience and build on their strengths and interests by focusing on a specific economic sector.
 - o The **Outdoor Education** program, which provides elementary and secondary students with learning experiences in the outdoors. There is flexibility in how boards may use the individual allocations, as long as the total funding is spent on the programs within the envelope. Any unspent funding must be used on the programs within the envelope in a future school year. (Increase for 1.5% Salary and (0.167%) Benefits decrease)



 The other allocations of this grant provide funding for teacherlibrarians and/or library technicians.

Special Education Grant

This grant provides boards with funding for programs, services, and/or equipment for students with special education needs. Boards may use the grant only for special education, and must set aside any unspent funding to use for special education in a future school year. There is flexibility in how they may use some of the individual allocations within the grant, as long as the funds are spent on special education. The grant, which is projected to total about \$124.1M in 2018-19 for TCDSB, is made up of six allocations:

- The Special Education Per Pupil Amount (SEPPA) provides every board with foundational funding toward the cost of special education supports.
- Recognizing the variation across boards in the share of students with special education needs, the nature of the needs, and boards' ability to meet them, the **Differentiated Special Education Needs Amount** (**DSENA**) aims to better align the allocation with boards' needs and resources. In 2018-19, a new multi-disciplinary supports amount is being added as new component to DSENA, which will support increased special education programs and services.
- Under the Special Equipment Amount (SEA), each board receives a
 base amount plus a per-pupil amount, which together may be used to
 buy computers, software and other equipment for students with special
 education needs in line with funding guidelines. In addition, boards
 may submit claims to recover the costs, less a deductible, of other
 equipment recommended by a qualified professional for a student with
 specific special education needs.
- The other allocations of the grant are the Special Incidence Portion (SIP) for students who require two or more full-time staff to address their health and safety needs and those of others at their school. In addition, there is funding to provide instruction in a care, treatment, custody or



correctional facility, and an amount to support board-level expertise in applied behavioral analysis.

Language Grant (\$2.2M)

This grant provides funding to meet school boards' costs for language instruction. It includes five allocations, and projected to total \$39.6 million in the 2018-19 school year for TCDSB:

- English as a Second Language / English Literacy Development funding is provided to English-language school boards to support students who need extra help developing proficiency in English. It consists of a recent immigrant component to supports students who are eligible based on their country of birth and who have been in Canada four years or less, and a diversity in English-language learner's component that reflects an estimate of the number of children in a board whose language spoken most often at home is neither English nor French. (Increase of \$0.5M for the DELL plus \$0.3M for 1.5% Salary & Benefits plus \$1.1M for new students estimated to arrive from a non-English speaking country)
- French as a Second Language funding, available only to Englishlanguage boards, supports the costs of French instruction. It provides a per-pupil amount for each student. (Increase in enrolment for French \$0.01M plus \$0.1M for Salary & Benefits)

Indigenous Education Grant (\$0.2M)

The Indigenous Education Grant, supports programs designed for Indigenous learning. It is made up of four allocations, and is projected to total \$4.6M in 2018-19 for TCDSB as detailed below:

 The Indigenous Languages allocation supports elementary and secondary Indigenous Language programs. At the elementary level, funding is based on the number of pupils enrolled in the Indigenous Language program and the average daily minutes of instruction. At the secondary level, funding is provided for each Grade 9 to 12 pupil enrolled



in a credit course.

- The **Indigenous Studies** allocation supports secondary credit courses in Indigenous Studies, providing a per-pupil amount for Grade 9 to 12 students. (\$0.2M increase in enrolment and 1.5% Salary & Benefits)
- The Per-Pupil Amount allocation supports Indigenous students, and reflects the estimated percentage of Indigenous students in a board's schools, based on census data. Some of these funds may be used to support a dedicated Indigenous Education Lead in each school board.
- The Board Action Plan's allocation supports the implementation of programs and initiatives aligned with the 16 strategies and actions identified in the Ontario First Nation, Métis, and Inuit Framework Implementation Plan.

Safe and Accepting Schools Supplement (Increase by \$2,000)

This funding supports the Safe Schools Strategy and provides targeted support to secondary schools in priority urban neighbourhoods. The grant, made up of two allocations, is projected to total \$49.1M in 2018-19:

- The Safe and Accepting Schools allocation includes two components. One supports non-teaching staff such as social workers, child and youth workers, psychologists, and attendance counsellors who work to prevent and mitigate risks to the school environment. The other supports programs for long-term suspended and expelled students, and prevention and intervention resources. Both components provide a per-pupil amount and also reflect a board's demographic characteristics and dispersion distance. (Enrolment increase of \$2,000)
- The **Urban and Priority High Schools** allocation helps boards respond to challenges in select secondary schools, e.g. lack of access to community resources, poverty, conflict with the law, academic achievement issues or a combination of these factors.



Toronto Catholic District School Board

Volume III: Instructional Related Expenditures

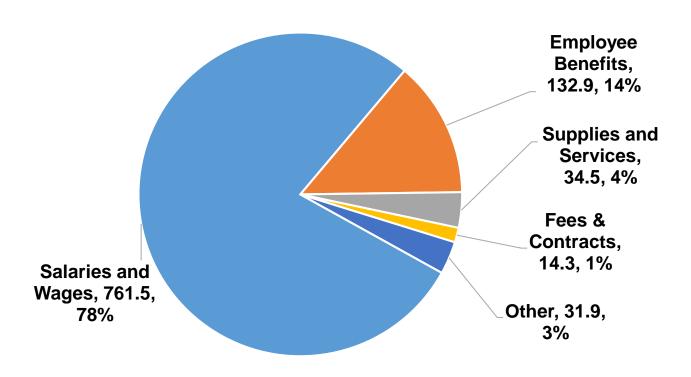


Instructional Related Operating Expenditures are mostly wages and benefits for teaching staff

Instructional operating expenditures are comprised mostly of wages and benefits for teachers, special education workers, other support staff and school administration. The remainder of the expenditures are also directly classroom related and include school based supplies as well as technology in the classroom.

The following chart provides an overview of instructional-related expenditures by functional category. Appendix 3B provides a detailed breakdown of the entire instructional-related budget.

2018-19 INSTRUCTIONAL EXPENDITURES BY CLASSIFICATION (\$M)





The largest increases are proposed for classroom teachers and special education professionals

The chart below provides a comparison between the 2017-18 budget and the 2018-19 budget estimates by category. On the following page is a brief analysis of each line item (referenced by line #) explaining the differences between each year's budget. As noted, the overwhelming increases originate from classroom teachers and special education investments.

Classroom Expenditures Increases / (Decreases) (\$000)

	Instructional Related Expenditure Categories	2017/18 Budget Revised Estimates	Net Change Increase / (Decrease)	2018/19 Budget Estimates
1	Classroom Teachers	619,161	12,425	631,586
2	Occasional Teachers	29,253	111	29,365
3	Education Assistants	53,673	686	54,359
4	Designated Early Childhood Educators	27,328	(103)	27,224
5	Professional & Para- professionals	51,427	2,340	53,767
6	Textbooks & Classroom Supplies	25,147	717	25,864
7	Computers	9,866	151	10,017
8	Staff Development	3,202	(270)	2,932
9	In School Administration	67,431	1,249	68,680
10	Teacher Consultants & Coordinators	5,414	132	5,546
11	Continuing Education (incl. International Language./Summer Schools.)	23,581	247	23,828
12	Other Non-Operating	42,729	(828)	41,901
	Total Instructional	958,212	16,857	975,069

Instructional Related Expenditures Variance Analysis

- 1 Classroom Teacher costs have increased due to funded changes in salary and benefits of \$4.3M; new positions have been added to the classroom based on enrolment growth as well as new funding announcements.
- **2** The Occasional Teachers' salary and benefit costs have increased.
- **3** Education Assistants costs have increased by \$0.7M mainly due to an increase in funding for salary and benefits costs.
- **4** Designated Early Childhood Educators costs have decreased by \$0.1M mainly due to pay-out of the professional development costs.
- **5** Professionals and Para-professionals have increased by \$2.3M mainly due to funding increases for salary, and benefit costs of \$1.3M, and additional staff based on funding announcements have been added to this group.
- 6 Textbook and Classroom Supplies have increased by \$0.7M due to French Immersion Support for new classes and an increase in technology related expenses.
- 7 Increase in computer leasing costs.
- 8 Decrease in New Teacher Induction Program (NTIP) funding.
- 9 In School Administration costs have increased due to the addition of 4 Vice-principals and Principal professional development coverage for a total cost of \$0.6M. Salary, and benefits and professional development costs have increased by \$0.6M.
- **10** Teacher Consultants and Coordinators increased by \$0.1M due to salary and benefit increases.
- **11** Continuing Education increased by \$0.2M due to salary and benefit increases.
- **12** Other Operating costs have decreased due to a reduction in funding for other Education Program projects of \$0.8M.



Highlights of the New Investments include the following:

More teachers for careers and pathways planning. \$0.8M or 8 FTE for Guidance Teachers to provide additional support for Grade 7 and 8 students engaged in career and pathways planning that will prepare them for success in high school.

Increasing investment in Mental Health Workers. \$0.35M has been added in the budget process, to fund approximately 1 Chief of Mental Health and 6 Mental Health positions. Four of these mental health leads will be funded by converting four contract positions to permanent positions. These mental health workers will support students in secondary schools who have mental health concerns through continued and expanded mental health awareness.

More funding to address Special Education Assessment waitlists. The TCDSB is investing in four permanent FTE's for Multi-Disciplinary Teams by converting four contract positions to permanent staffing to provide schools with permanent staffing to address current waitlists for special education assessments.

Additional funding for students with Special Education needs. \$3.4M in funding, has been allocated to fund Special Education teachers allocated through the Special Education Grant, which will support increased special education programs and services. This amount includes the addition of 34.4 Teachers.

The following tables provide detail of the new FTEs being recommended for inclusion in the 2018-19 budget. It provides the FTEs in terms of "Non-Discretionary" additions (based on restricted funding, legislative changes and arbitration settlements), and "Discretionary" additions (due to GSN flexibility).

Non-Discretionary GSN Investments in Instructional Expenditures

Program	FTE	(\$M)
Special Education Teachers	34.4	3.40
Grades 4-8 Teachers	18.5	1.80
Health and Safety Elementary Teachers	7.0	0.70
Elementary Teachers Increase due to enrollment	6.0	0.60
Multi-Disciplinary Teams (Conversion of 4 FTE	4.0	0.40
contract positions)		
Increase of Vice-Principals	4.0	0.50
Health and Safety Secondary Teachers	3.0	0.30
Full Day Kindergarten (FDK)Teachers	2.0	0.20
Chief of Mental Health - EPO Funding	1.0	0.15
Mental Health Staff - EPO Funding	2.0	0.20
Mental Health Staff (Conversion of 4 FTE	4.0	-
contract positions)		
Increase in Autism Services	1.0	0.10
Secondary Teacher Reductions due to Enrolment	(2.0)	(0.20)
Increase Principal coverage for Professional	-	0.20
Development		
Total	84.9	\$8.35

Discretionary GSN Investments in Instructional Expenditures

Program	FTE	(\$M)
Elementary Guidance Teachers	8.0	0.6
SHSM / Student Success Resource Teacher Leads	2.0	0.2
Total	10.0	\$0.8

An additional one-time strategic investment of \$1.4M is also proposed to be made out of Accumulated Surplus to support Computer and Telephony technology. Staff believe this is achievable given the accumulated surplus amount, and still remain fiscally prudent, while responding to some urgent technology upgrade needs. Volume V provides the context for how this fits in with the proposed Reserve Strategy. Appendix 3A provides some more detail on this investment.



VOLUME III - APPENDICES



Appendix 3A

2018-19 One-time Strategic Investments			
Investment Description	\$M		
Information Technology Replacements	1.4		
Funds will be used to make point in time investments in IT hardware for the Board, such as school computers, printers, networking and other similar needs.			
Total	\$1.4		



CLASSROOM INSTRUCTION

		2017/2018	0040/0040	Differe	nce
Expenditures	2016/17 Actuals	Revised Estimates	2018/2019 Estimates	\$	%
Instructional Day School	\$ 710,157,620	\$ 747,792,694	\$ 760,845,698	\$ 13,053,005	1.7%
School Office	65,532,026	67,229,668	68,478,617	\$ 1,248,949	1.9%
Student Support Services	40,479,158	43,183,984	44,722,416	\$ 1,538,432	3.6%
Curriculum & Accountability	5,259,022	6,290,173	6,773,174	\$ 483,000	7.7%
Staff Development	1,026,109	1,390,183	1,120,427	\$ (269,756)	-19.4%
Student Success	2,679,460	2,966,242	2,836,861	\$ (129,381)	-4.4%
Special Education Departments	2,249,431	4,248,164	4,276,289	\$ 28,125	0.7%
Safe School Team	88,115	201,500	201,500	\$ -	0.0%
Continuing Education	23,347,568	23,580,991	23,827,952	\$ 246,961	1.0%
Computer Services & Information Technology	15,325,001	21,969,885	23,520,691	\$ 1,550,805	7.1%
Other Non-Operating Expenditures		42,728,918	41,901,155	\$ (827,763)	-1.9%
Budgets Transferred from Administration & Governance to Classroom Instruc	tion	(3,370,491) (3,435,884)	,	
TOTAL	\$ 866,143,510	\$ 958,211,911	\$ 975,068,896	\$ 16,856,985	1.8%



Instructional Day School

		2017/18		Difference		
Expenditures	2016/17 Actuals	Revised Estimates	2018/2019 Estimates	\$	%	
CLASSROOM TEACHERS - ELEMENTARY				*		
Classroom Teachers - Salaries	\$ 328,172,348	\$ 337,537,172	\$ 348,224,667	\$ 10,687,495	3.2%	
Classroom Teachers - Benefits	45,694,517	52,664,713	51,482,686	\$ (1,182,027)	-2.2%	
Librarian Teachers & Technicians - Salaries	2,443,945	4,385,797	4,240,485	\$ (145,312)	-3.3%	
Librarian Teachers & Technicians - Benefits	653,491	1,146,864	1,105,201	\$ (41,664)	-3.6%	
Guidance Teachers - Salaries	1,175,406	1,062,071	1,806,580	\$ 744,509	70.1%	
Guidance Teachers - Benefits	99,010	166,958	267,915	\$ 100,957	60.5%	
Mileage Provision	367,902	405,000	405,000	\$ -	0.0%	
CLASSROOM TEACHERS - SECONDARY						
Classroom Teachers - Salaries	179,147,452	183,022,471	185,977,061	\$ 2,954,590	1.6%	
Classroom Teachers - Benefits	23,608,896	28,129,771	27,251,450	\$ (878,321)	-3.1%	
Librarian Teachers - Salaries	2,592,656	2,450,024	2,512,721	\$ 62,697	2.6%	
Librarian Teachers - Benefits	508,694	385,144	372,637	\$ (12,507)	-3.2%	
Guidance Teachers - Salaries	7,734,798	6,567,300	6,735,361	\$ 168,061	2.6%	
Guidance Teachers - Benefits	669,679	1,032,379	998,854	\$ (33,525)	-3.2%	
Mileage Provision	205,803	205,000	205,000	\$ -	0.0%	
TOTAL CLASSROOM TEACHERS	593,074,597	619,160,664	631,585,618	12,424,953	2.0%	
OCCASIONAL TEACHERS						
Elementary - Salaries	17,217,267	15,876,286	17,085,493	\$ 1,209,207	7.6%	
Elementary - Benefits	1,790,221	4,023,565	3,791,502	\$ (232,063)	-5.8%	
Secondary - Salaries	7,093,754	7,335,474	6,823,998	\$ (511,476)	-7.0%	
Secondary - Benefits	720,144	2,018,118	1,663,940	\$ (354,178)	-17.5%	
TOTAL OCCASIONAL TEACHERS	26,821,386	29,253,443	29,364,933	111,490	0.4%	



Instructional Day School

		2017/18	2010/2010	Difference		
Expenditures	2016/17 Actuals	Revised Estimates	2018/2019 Estimates		\$	%
EDUCATIONAL ASSISTANTS						
Elementary - Salaries	28,964,893	28,199,876	29,469,991	\$	1,270,115	4.5%
Elementary - Benefits	9,103,006	9,896,754	10,143,571	\$	246,817	2.5%
Secondary - Salaries	11,954,272	11,530,347	10,969,811	\$	(560,536)	-4.9%
Secondary - Benefits	3,482,163	4,046,356	3,775,809	\$	(270,547)	-6.7%
TOTAL EDUCATIONAL ASSISTANTS	53,504,334	53,673,332	54,359,182		685,849	1.3%
DESIGNATED EARLY CHILDHOOD EDUCATORS						
Elementary - Salaries	16,864,695	21,028,339	21,245,579	\$	217,240	1.0%
Elementary - Benefits	4,962,547	6,299,211	5,978,506	\$	(320,705)	-5.1%
TOTAL DESIGNATED EARLY CHILDHOOD EDUCATORS	21,827,242	27,327,550	27,224,085		(103,465)	-0.4%
TEXTBOOKS & CLASSROOM SUPPLIES						
Elementary School Block Allocation	3,889,655	4,848,426	4,883,495	\$	35,069	0.7%
Secondary School Block Allocation	3,423,581	3,568,060	3,572,046	\$	3,986	0.1%
Secondary High Cost Course Allocation	337,900	337,900	337,900	\$	-	0.0%
International Baccalaureate Programme - Michael Power & St. Joseph's	75,000	75,000	75,000	\$	-	0.0%
International Baccalaureate Programme - Pope John Paul II	58,943	58,943	58,943	\$	-	0.0%
International Baccalaureate Programme - St Mary CSS	50,000	50,000	50,000	\$	-	0.0%
International Baccalaureate Programme - TBD	-	100,000	100,000	\$	-	0.0%
French Immersion - Support	20,000	115,000	121,600	\$	6,600	5.7%
Religious Program Resources	509,610	1,500,000	1,500,000	\$	-	0.0%
Regional Arts Programs	-	40,000	40,000	\$	-	0.0%
Alternative Program & Placement for Limited Expulsion (A.P.P.L.E.)	11,460	18,000	18,000	\$	-	0.0%
Arrowsmith Programme (4 Sites Licenses and Supplies)	28,760	46,920	46,920	\$	-	0.0%
Outdoor Education	764,973	765,148	768,980	\$	3,832	0.5%



Instructional Day School

		2017/18 Revised	2018/2019	Difference		
Expenditures	2016/17 Actuals		Estimates	\$	%	
Classroom Needs Provision	57,210	100,000	100,000	\$ -	0.0%	
Invest 100k in each of the next 5 years in Elementary Music	100,000	152,000	152,000	\$ -	0.0%	
Superintendents Special Project Funds	21,398	26,950	26,950	\$ -	0.0%	
School Nutrition Programs - Angel Foundation for Learning	-	100,000	100,000	\$ -	0.0%	
Student Council	16,000	16,000	16,000	\$ -	0.0%	
Elementary CSLIT Student Leadership Fund	6,017	10,000	10,000	\$ -	0.0%	
International Languages & Other Programs Learning Resources	-	93,000	93,000	\$ -	0.0%	
School Projects	713	50,000	50,000	\$ -	0.0%	
Mini Olympics	20,000	20,000	20,000	\$ -	0.0%	
Pediculosis Program	48,604	45,000	45,000	\$ -	0.0%	
Religious Retreats & Chaplains	49,914	50,000	50,000	\$ -	0.0%	
Urban & Priority High School Grants - Msgr. Fraser	465,613	397,798	285,857	\$ (111,941)	-28.1%	
Urban & Priority High School Grants - J.C. McGuigan CSS	276,670	285,857	296,003	\$ 10,145	3.5%	
Urban & Priority High School Grants - St. Patrick's CSS	262,000	266,696	266,696	\$ -	0.0%	
Urban & Priority High School Grants - Father Henry Carr	-	200,000	271,085	\$ 71,085	35.5%	
Commission, Health Insurance and School Budget Transfer for VISA Student	3,753,575	4,008,953	4,008,953	\$ -	0.0%	
FNMI - Native Studies & Aboriginal Amount	682,465	1,032,052	947,453	\$ (84,599)	-8.2%	
TOTAL TEXTBOOKS & CLASSROOM SUPPLIES	14,930,061	18,377,704	18,311,881	(65,823)	-0.4%	
TOTAL	\$ 710,157,620	\$ 747,792,694	\$ 760,845,698	13,053,005	1.7%	



School Office

		2017/18		Difference		
Expenditures	2016/17 Actuals	Revised Estimates	2018/2019 Estimates	\$	%	
ELEMENTARY				·		
Elementary Principal Salaries	\$ 20,476,960	\$ 20,966,304	\$ 21,394,896	\$ 428,592	2.0%	
Elementary Principal Benefits	2,517,141	2,687,339	2,802,547	\$ 115,208	4.3%	
Elementary Vice Principal Salaries	4,915,982	5,084,550	5,684,801	\$ 600,251	11.8%	
Elementary Vice Principal Benefits	604,026	636,454	727,655	\$ 91,200	14.3%	
Elementary Professional Development Provision	37,316	95,960	433,070	\$ 337,111	351.3%	
SECONDARY						
Secondary Principal Salaries	4,417,369	4,625,914	4,515,858	\$ (110,056)	-2.4%	
Secondary Principal Benefits	643,002	579,045	578,030	\$ (1,015)	-0.2%	
Secondary Vice Principal Salaries	6,308,880	6,472,248	6,383,253	\$ (88,994)	-1.4%	
Secondary Vice Principal Benefits	841,800	810,158	817,056	\$ 6,898	0.9%	
Secondary Professional Development Provision	2,921	40,965	105,230	\$ 64,264	156.9%	
SECRETARIES						
School Secretary Salaries	17,468,230	16,387,510	16,537,461	\$ 149,951	0.9%	
School Secretary Benefits	5,115,720	5,569,757	5,643,811	\$ 74,054	1.3%	
Supply Secretary Costs	920,870	1,239,129	1,239,129	\$ -	0.0%	
OFFICE EXPENSES						
Principals & Vice Principal Expenses	25,796	36,770	37,320	\$ 550	1.5%	
Principals & Vice Principal Mileage Expenses	67,021	130,000	130,000	\$ -	0.0%	
School Office Supplies allocation	97,951	100,000	100,000	\$ -	0.0%	
School Office Furniture, Equipment and Computers	239,811	575,800	90,000	\$ (485,800)	-84.4%	
Orientation Centre, Program Ads	25,000	40,000	40,000	\$ -	0.0%	
Course Reimbursement	-	20,000	20,000	\$ -	0.0%	
School Telephones	806,230	1,131,765	1,198,500	\$ 66,735	5.9%	
TOTAL	\$ 65,532,026	\$ 67,229,668	\$ 68,478,617	\$ 1,248,949	1.9%	



Student Support Services

	2040/47		0040/0040	Difference			
Expenditures	2016/17 Actuals	Revised Estimates	2018/2019 Estimates		\$	%	
Student Support Salaries	\$ 5,958,295	\$ 6,502,259	\$ 6,025,579	\$	(476,680)	-7.3%	
Student Support Benefits	1,532,939	1,819,924	1,752,415	\$	(67,509)	-3.7%	
Child Youth Worker Salaries	8,710,946	8,726,344	9,170,467	\$	444,123	5.1%	
Child Youth Worker Benefits	2,625,179	2,445,211	2,673,696	\$	228,485	9.3%	
Psychologist Salary	4,620,681	4,566,771	5,057,825	\$	491,054	10.8%	
Psychologist Benefits	1,150,546	1,279,656	1,500,136	\$	220,481	17.2%	
Social Worker Salaries	5,148,483	5,310,763	5,736,572	\$	425,808	8.0%	
Social Worker Benefits	1,215,862	1,488,130	1,672,526	\$	184,396	12.4%	
Speech & Language Salaries	3,621,813	3,670,912	3,741,856	\$	70,944	1.9%	
Speech & Language Benefits	886,315	1,028,627	1,090,957	\$	62,330	6.1%	
Elementary Lunchtime Student Supervisors	1,130,950	1,364,569	1,364,569	\$	-	0.0%	
Translators & Interpreter Services	69,179	100,000	100,000	\$	-	0.0%	
EAP Costing - Shepell	-	486,000	650,000	\$	164,000	33.7%	
Ontario Focused Intervention Partnership (OFIP) Tutoring	312,162	374,268	376,154	\$	1,886	0.5%	
School Effectiveness Framework	194,651	285,313	-	\$	(285,313)	-100.0%	
Car Allowance	32,928	37,044	32,928	\$	(4,116)	-11.1%	
Student Information Services Supplies	56,185	60,000	60,000	\$	-	0.0%	
Mileage & Cellular Phone Provision	428,035	793,528	814,096	\$	20,568	2.6%	
Specialist High Skills Major (SHSM)	454,433	523,583	514,829	\$	(8,754)	-1.7%	
TDSB Vision Services	341,452	424,852	424,852	\$		0.0%	
Secondary Student Supervisors	1,636,154	1,629,967	1,696,537	\$	66,570	4.1%	
Contracted Child Support Workers	285,712	200,000	200,000	\$	-	0.0%	
MISA - Managing Information for Student Achievement	66,256	66,263	66,421	\$	158	0.2%	
TOTAL	\$ P492478,858f	<u>3\$()</u> 43,183,984	\$ 44,722,416	\$	1,5333432	50 of 59 3.6%	



Curriculum & Accountability

		2017/18	0040/0040	Difference	
Expenditures	2016/17 Actuals	Revised Estimates	2018/2019 Estimates	\$	%
Coordinators & Resource Teachers Salaries	\$ 3,932,986	\$ 4,592,974	\$ 4,955,822	\$ 362,849	7.9%
Coordinators & Resource Teachers Benefits	652,512	758,640	828,792	70,152	9.2%
Mobile Phone Provision	6,117	4,365	4,365	-	0.0%
Mileage Expenses	-	10,000	10,000	-	0.0%
Supplies & Resources					
Religion	32,951	56,485	56,485	-	0.0%
Physical Education	104,976	122,384	122,384	-	0.0%
Dramatic Arts	18,469	20,540	20,540	-	0.0%
Social Studies	-	16,261	16,261	-	0.0%
Math	15,887	28,242	28,242	-	0.0%
Language Arts	22,917	64,187	64,187	-	0.0%
Music	65,479	80,448	80,448	-	0.0%
French	38,356	39,368	39,368	-	0.0%
Visual Arts	27,671	32,521	32,521	-	0.0%
Co-operative Education	57,286	12,837	62,837	50,000	389.5%
Science & Family Studies	13,368	65,043	65,043	-	0.0%
Technological Studies	8,246	8,558	8,558	-	0.0%
Business Studies	947	6,746	6,746	-	0.0%
Curriculum & Accountability	114,566	126,663	126,663	-	0.0%
Library	3,015	38,512	38,512	-	0.0%
Media Services	-	17,117	17,117	-	0.0%
Research	135,019	145,491	145,491	-	0.0%
Guidance	7,522	34,233	34,233	-	0.0%
English as a Second Language	731	8,558	8,558	-	0.0%
TOTAL	\$ 5,259,022	\$ 6,290,173	\$ 6,773,174	\$ 483,000	7.7%



Staff Development

				2017/18			Differ	ence
Expenditures	2010	6/17 Actuals	I	Revised Estimates	_	18/2019 timates	\$	%
Occasional Teacher Salaries & Benefits	\$	99,437	\$	300,000	\$	300,000	\$ -	0.0%
New Teacher Induction Program (NTIP)		632,231		846,606		576,850	(269,756)	-31.9%
Professional Development Expenditures		294,441		243,577		243,577	-	0.0%
TOTAL	\$	1,026,109	\$	1,390,183	\$	1,120,427	\$ (269,756)	-19.40%



Student Success

		2017/18	0040/0040	Differ	ence
Expenditures	2016/17 Actuals	Revised Estimates	2018/2019 Estimates	\$	%
Literacy				·	
Resource Materials	\$ 38,893	\$ 40,000	\$ 40,000	\$ -	0.0%
Meeting Expenses	7,638	59,000	59,000	-	0.0%
Professional Development - Occasional Teachers	255,343	225,000	225,000	-	0.0%
Professional Development - Student Success Learning Network	264,749	170,000	170,000	-	0.0%
Ontario Secondary School Literacy Test - 200 Days	17,160	30,000	30,000	-	0.0%
Conferences (Reading for the Love of it)	10,131	35,000	35,000	-	0.0%
Numeracy					
Resource Materials	17,281	95,000	95,000	-	0.0%
Meeting Expenses	11,313	40,000	40,000	-	0.0%
Professional Development - Occasional Teachers	187,287	265,000	190,000	(75,000)	-28.3%
Professional Development - Student Success Learning Network	212,832	190,000	190,000	-	0.0%
Pathways					
Resource Materials	35,083	35,000	35,000	-	0.0%
Meeting Expenses	1,717	20,000	20,000	-	0.0%
Professional Development - Occasional Teachers	10,454	140,000	140,000	-	0.0%
Professional Development - Student Success Learning Network	120,999	150,000	150,000	-	0.0%
Special Initiatives	102,778	210,000	155,619	(54,381)	-25.9%
Communications & Marketing	18,545	40,000	40,000	-	0.0%
Catholic Community Culture & Caring					
Resource Materials	21,494	40,000	40,000	-	0.0%
Meeting Expenses	34,983	50,000	50,000	-	0.0%
Professional Development - Occasional Teachers	534,007	330,000	330,000	-	0.0%
Special Initiatives	376,104	200,000	200,000	-	0.0%
Conferences	67,901	100,000	100,000	-	0.0%



Student Success

		2017/18		Differ	ence
Expenditures	2016/17 Actuals	Revised Estimates	2018/2019 Estimates	\$	%
Student Success Teams (SSTs)					
Resource Materials	355	20,000	20,000	-	0.0%
Meeting Expenses	42,595	40,000	40,000	-	0.0%
Professional Development - Occasional Teachers	195,243	187,000	187,000	-	0.0%
Supervisory Officer - Approved Days	675	140,000	140,000	-	0.0%
School Support	2,123	15,000	15,000	-	0.0%
Honorariums	-	10,000	10,000	-	0.0%
Supervisory Officer - Support	3,404	10,000	10,000	-	0.0%
Transportation	88,371	80,242	80,242	-	0.0%
TOTAL	\$ 2,679,460	\$ 2,966,242	\$ 2,836,861	\$ (129,381)	-4.4%



Special Education Departments

		2017/18	0040/0040	Differ	ence
Expenditures	2016/17 Actuals	Revised Estimates	2018/2019 Estimates	\$	%
SPECIAL SERVICES DEPARTMENT					
Special Equipment Amount (SEA)	\$ 1,643,422	\$ 3,504,402	\$ 3,463,013	\$ (41,389)	-1.2%
Special Services Department	210,996	225,368	225,368	-	0.0%
Fees & Services	62,410	100,040	100,040	-	0.0%
School Budget Allocations	108,772	165,686	165,686	-	0.0%
CURRICULUM SUPPORT UNITS					
North York	3,336	11,744	11,744	-	0.0%
Etobicoke	6,049	11,744	11,744	-	0.0%
Toronto	5,091	11,744	11,744	-	0.0%
Scarborough	5,845	16,244	16,244	-	0.0%
Social Worker Services	11,510	10,066	10,066	-	0.0%
Deaf & Hard Of Hearing	8,292	12,584	12,584	-	0.0%
Care & Treatment & Correctional Facilities (Section 23)	34,470	62,214	62,214	-	0.0%
Speech & Language	25,891	26,950	26,950	-	0.0%
Gifted Programs	50,291	11,744	11,744	-	0.0%
Autism Services	8,406	11,744	81,258	69,514	591.9%
Psychology Services	64,648	65,890	65,890	-	0.0%
TOTAL	\$ 2,249,431	\$ 4,248,164	\$ 4,276,289	28,125	0.7%



Safe School Team

		2017/18		Diffe	ence
Expenditures	2016/17 Actuals	Revised Estimates	2018/2019 Estimates	\$	%
Office					
Mobile Phones & Parking	\$ 17,420	\$ 20,500	\$ 20,500	-	0.0%
Supplies, Photocopying, Printing Costs	44,440	44,500	44,500	-	0.0%
Resource Support					
Safe Schools Action Team, Symposium, Programs	12,149	25,000	25,000	-	0.0%
SRO Support	-	10,000	10,000	-	0.0%
Psychiatric Consultation (APPLE)	-	31,000	31,000	-	0.0%
Professional Development					
Safe Schools Certification Modules & Workshops	11,014	11,500	11,500	-	0.0%
Canadian Safe School Network Conferences	-	12,000	12,000	-	0.0%
Safe School Staff Conferences & Professional Development	2,697	10,000	10,000	-	0.0%
Shadow Box Learning Styles	395	17,000	17,000	-	0.0%
Safe Schools Joint Professional Development (OECTA)	_	20,000	20,000	-	0.0%
TOTAL	\$ 88,115	\$ 201,500	\$ 201,500	-	0.0%



Continuing Education

		2017/18	2042/2042	Differen	ice
Expenditures	2016/17 Actuals	Revised Estimates	2018/2019 Estimates	\$	%
Adult Credit Diploma (Day/Night)					
Salaries	\$ 2,006,033	\$ 2,240,672	\$ 2,399,655	158,983	7.1%
Benefits	148,598	174,000	159,000	(15,000)	-8.6%
Other Expenses	58,837	103,000	103,000	-	0.0%
Adult Credit Diploma-Msgr Fraser					
Salaries	400,909	540,000	555,000	15,000	2.8%
Benefits	51,558	100,000	85,000	(15,000)	-15.0%
Summer School					
Salaries	6,240,563	5,980,000	6,410,000	430,000	7.2%
Benefits	426,832	330,000	450,000	120,000	36.4%
Other Expenses	274,280	245,000	290,000	45,000	18.4%
Adult English as a Second Language (ESL) & Citizenship					
Salaries	2,433,918	2,500,000	2,150,000	(350,000)	-14.0%
Benefits	510,826	450,000	350,000	(100,000)	-22.2%
Other Expenses	758,000	780,440	644,190	(136,250)	-17.5%
International Languages					
Salaries	4,686,902	4,685,000	4,735,000	50,000	1.1%
Benefits	1,165,892	1,176,000	1,165,000	(11,000)	-0.9%
Other Expenses	41,336	45,000	45,228	228	0.5%



Continuing Education

		2017/18		Differ	ence
Expenditures	2016/17 Actuals	Revised Estimates	2018/2019 Estimates	\$	%
Language Instruction for Newcomers to Canada (LINC) / Ministry of Training, Colleges & University (MTCU)					
Salaries	2,111,265	2,237,519	2,207,519	(30,000)	-1.3%
Benefits	485,528	590,000	550,000	(40,000)	-6.8%
Other Expenses	1,546,291	1,404,360	1,529,360	125,000	8.9%
TOTAL	\$ 23,347,568	\$ 23,580,991	\$ 23,827,952	246,961	1.0%



Computer Services & Information Technology

		2017/18	2040/2040	Differ	ence
Expenditures	2016/17 Actuals	Revised Estimates	2018/2019 Estimates	\$	%
Salaries	\$ 6,284,718	\$ 6,817,994	\$ 6,834,232	16,239	0.2%
Benefits	1,656,503	1,877,382	1,933,917	56,535	3.0%
Supplies & Services					
Car Allowance	33,205	32,928	24,696	(8,232)	-25.0%
Membership Fees	-	9,088	9,330	242	2.7%
Printing	2,658	6,250	3,000	(3,250)	-52.0%
Repairs - Computer Technology	5,084	37,686	100,000	62,314	165.4%
Telephone	114,160	143,247	138,800	(4,447)	-3.1%
Data Communications	254,648	323,295	245,500	(77,795)	-24.1%
Office Supplies & Services	158,168	187,705	244,860	57,155	30.4%
Furniture & Equipment	4,051	216,033	32,250	(183,783)	-85.1%
Computer Lease	72,032	662,000	92,025	(569,975)	-86.1%
Contractual & Professional Services	170,020	313,784	486,500	172,716	55.0%
Software Fees & Licenses	3,152,260	3,999,651	5,181,860	1,182,209	29.6%
Computer Technology Maintenance Fee	39,002	121,251	9,126	(112,125)	-92.5%
School Computers & Printers (Purchase/Leasing costs)	1,400,593	2,248,970	3,377,175	1,128,205	50.2%
Academic Computer Repairs	121,464	373,000	490,000	117,000	31.4%
Network Equipment & Infrastructure	58,018	273,000	630,500	357,500	131.0%
WAN & Internet Service (including Amortization of WAN Project)	1,501,198	2,665,548	1,984,500	(681,048)	-25.6%
Systems Maintenance	289,676	209,482	1,200,829	991,347	473.2%
Investment in Information Technology	-	1,350,000	400,000	(950,000)	-70.4%
Academic Technology & Computer Studies	7,544	36,800	36,800	_	0.0%
Qlik Initiative	-	64,791	64,791	-	0.0%
TOTAL	\$ 15,325,001	\$ 21,969,885	\$ 23,520,691	1,550,805	7.1%



2018/19 Budget Consultation to TCDSB

As representatives and advocates for parents in the TCDSB, OAPCE Toronto is pleased to offer the following recommendations and inquiries regarding the draft TCDSB Budget for the 2018/19:

The following observations & queries were discussed during our consultation meeting TDCSB staff

- 1. **FTE Growth**, OAPCE expressed concerns regarding the pace of FTE growth of ~95 during 18/19. The budget includes hiring 2 HR professionals to accommodate the hiring of ~95 FTE. OAPCE is not supportive of hiring 2 HR FTE's to support the FTE growth, but rather leverage current HR resources to either allow slower organic compliment growth, alternatively current HR talent could be refreshed to support the hiring goals. Although we are in agreement with the hiring of retired Principals to support the process of new hiring, we do not support the amount of salary discussed for this task to be fulfilled.
- 2. **Support Staff, most importantly Child Youth Workers, Educational Assistants and Social Workers** with the increase of Special Education Teachers, and the Ministry of Education's focus on Mental Health and Well-Being, as parents we recognize the need for our children and suggest that this be revisited.

- 3. <u>A multi year budget</u> would also be helpful in understanding how the current years budget ties into the Boards multi year strategic visions.
- 4. <u>Capital plan</u> OAPCE suggested that opportunities should be explored to generate energy savings through Solar Panels, Green & Cool roofs, leveraging government grants on both capital investment and eco friendly design. The Capital plan was not shared with OAPCE for review during the budget consultation. Upon completion, OAPCE would appreciate the opportunity to review and provide feedback on the Capital Plan.
- 5. **IT Strategic Plan**, OAPCE suggests seeking infrastructure investments to update telephone system which costs the board ~\$800k per year or nearly \$300 per month per school. A VoIP system would save the board a considerable amounts. Upon completion, OAPCE would like appreciate the opportunity to review and provide feedback on IT Strategic Plan.

We discussed the need for SAP (Finance) and Student Data System upgrades that we're required. OAPCE suggested partnering with Ontario Universities or Colleges to support the Requests for proposals for each of these significant core system upgrades.

Other General Queries

- 1. How has the actual spending in the current year aligned to the 2017/18 budget
- 2. Has sufficient amounts been invested to enhance curriculum, specifically for Math as it seems to be an area that can be improved.
- 3. How does feedback from Parents / Stakeholders get incorporated into the budget? What about Audit, how are issues raised by these groups incorporated into the budget and does a linkage exist.

- 4. What are the major changes from the prior year?
- 5. Any Risk's in the budget?
- 6. Do we have all the numbers on one page with a comparative from prior year? (Simpler version of the appendix)
- 7. Is there is a plan in order to increase the school's block budget as they were cut 35% when the board went into deficit 3 years ago.

The following Questions were discussed on the Appendix

- 1. Pg 47. What are Religious Resources of \$1.5m? What are the initiatives being worked on in this area? What and how should parents / students / teachers etc. see these come through? These costs were explained to be part of the fully alive program, however the increase from 2017 to 2018 to 2019 was being reviewed and may potentially reduced.
- 2. Pg 48. What are School Nutritional Programs of \$100k? How does this impact the students? These cost were explain as being part of cost for administering nutritional programs where schools obtain grants.
- 3. Pg. 49 School Telephones Why so high? Seems like \$300 per month per school (200 schools) what's the nature of the expense and can't this be reduced? *See comments earlier*.
- 4. Pg. 59. Technology Seems to be increasing, what specifically are we doing to invest in technology? Long-term strategy is unclear.... should paper based resources be decreasing as these cost increase? If not why? 1. Licenses / Software 2. WAN / Internet 3. IT Investment *See comments earlier*.

We thank you for involving us in the consultation regarding the draft budget and always look forward to working with the TCDSB to ensure that the parent voice is present.

OAPCE Toronto Executive Team



CORPORATE SERVICES, STRATEGIC PLANNING AND PROPERTY COMMITTEE

2018-19 BUDGET ESTIMATES (VOLUMES 4, 5 INCLUDES NON-INSTRUCTIONAL)

"Therefore, there is now no condemnation for those who are in Christ Jesus, because through Christ Jesus the law of the Spirit who gives life has set you free from the law of sin and death."

Romans 8:1-2

Created, Draft	First Tabling	Review
May 29, 2018	June 6, 2018	

P. De Cock, Comptroller of Business Services & Finance

RECOMMENDATION 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

T. Robins
Acting Associate Director
of Planning and Facilities

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

A. EXECUTIVE SUMMARY

As per the requirements set out in the Education Act, TCDSB's budget estimates are balanced. The 2018-19 Non-Instructional budget expenditure estimates appearing in volume IV is balanced; based on consensus enrolment and staffing projections, and calculated Grants for Student Needs (GSN) and Education Programs - Other (EPO) funding projections. Volume V provides a strategy by which, under the current legislation, the TCDSB may work towards further financial sustainability through a reserve strategy.

Two budget related reports have been submitted to facilitate Trustees with conflicts of interest on instructional related funding, at their own discretion, the opportunity to participate in non-instructional and reserve funding related discussions. Volumes I to III focus on both the overall budget as well as instructional related expenditures, while Volume IV focuses on non-instructional expenditures and Volume V on financial sustainability. The two reports and associated Volumes of the Budget Book are intended to be read together for a fulsome understand of the budget, but are separated for the purposes of public debate.

The projected enrolment and estimated GSNs provide the capacity to determine the TCDSB's non-instructional support service levels. The Education Act and its regulations concerning Board Administration and Governance, for example, upper expenditure limits and trustee's honoraria calculations, consequently prescribes TCDSB's service levels. The projected expenditures in the Non-Instructional expenditure category appear in the table below:

Non-Instructional	2017-18	2018-19	Change
Expenditure Categories	(\$M)	(\$ M)	(\$M)
School Operations & Maintenance	95.9	98.1	2.2
Administration & Governance	27.7	28.5	0.8
Transportation	35.1	35.7	0.6
Other–Temporary Accommodations	3.2	0.1	3.3
Total	162.0	165.6	3.6

The 2018-19 Budget Estimates include additional discretionary investments in the Non-Instructional Expenditure Category. The 2018-19 GSN announcement considered service level increases to both non-discretionary and

discretionary areas of the Non-Instructional expenditure category budget. "Non-discretionary" investments are considered to be investments largely related to enrolment growth, restricted funding from the Province or required through arbitration settlements. "Discretionary" investments are generally those using remaining unrestricted GSN funding. The additional investments into the non-discretionary category primarily include investments for inflationary costs in utilities, fuel and provincial discussion table improvements to salary and benefits. It also includes a new Full Time Equivalent (FTE) for an Equity and Human Rights Advisor, which is a new restricted funded position by the Province. Recommended discretionary investments include funding for a Student Travel Planner (STP) and two FTE positions related to Human Resource Recruitment. A one-time investment from Accumulated Surplus in the amount of \$0.34M is also recommended for 2018-19.

The cumulative staff time required to prepare this report was 210 hours.

B. PURPOSE

1. This report has been prepared for the Board of Trustees in order to approve the 2018-19 Budget Estimates for Non-Instructional Expenditure Categories (Volume IV) and the Reserve Strategy (Volume V), appearing in the attached 2018-19 Budget Book.

C. BACKGROUND

- 1. Additional GSN increases in the Non-Instructional Expenditure Category are required in the future. The current GSNs do not adequately fund or mitigate ongoing cost pressures associated with inflation, utility and fuel rate increases, aging administrative facilities and information technology infrastructure upgrades. The 2018-19 GSNs also include funding for ongoing investments to meet prior year's labour agreements for salary and benefits investments.
- 2. New Investments in the education sector and increased regulation of the education sector has increased TCDSB's requirement for more service and support levels. The TCDSB was in a Multi-Year Recovery Plan (MYRP) for the last few years and difficult decisions reduced service levels across all functional areas of the board. As a result, the Non-Instructional Expenditure Category requires a moderate reinvestment of funds in order to mitigate current and future anticipated operational risks.

3. Investments are recommended to continue providing the service levels necessary on the Non-Instructional side of operations to support the Instructional side. Non-Discretionary investments are predominantly for utility increases, increases in transportation costs and labour related increases governed by collective agreements, but this year also includes a restricted funded position of a new Equity and Human Rights Advisor. Some minor discretionary investments are recommended to help bolster service levels in both the area of transportation safety and the HR capacity to recruit for vacancies predominantly found on the Instructional side of the organization. The following tables outline these proposed investments.

Non-Discretionary GSN Investments in Non-Instructional Expenditures	FTE	(\$M)
Equity and Human Rights Advisor	1.0	0.15
Total	1.0	0.15

Discretionary GSN Investments in Non-Instructional Expenditures	FTE	(\$M)
Student Travel Planner	0.0	0.05
Human Resources Recruitment Staff	2.0	0.22
Total	2.0	0.27

In addition to investments from the GSNs, the 2018-19 budget estimates recommend modest Non-Instructional strategic one-time investments from the Accumulated Surplus as follows to also help bolster operational readiness to address recruitment and absenteeism:

Discretionary Surplus one time Investments in Non-Instructional Expenditures	(\$M)
HR Recruitment	0.12
Retain School Board Cooperative Inc. (SBCI) Attendance Support Services	0.22
Total	0.34

D. BUDGET CONSULTATION RESULTS

- 1. The 2018-19 budget consultation survey was administered to stakeholders between April 27, 2018 to May 10, 2018. Four hundred and thirty five (435) stakeholders responded to the survey questions. Key questions posed for the Non-instructional areas focused on the areas of Transportation Services and Facilities.
- 2. For Transportation, 70% of those surveyed agreed or strongly agreed that TCDSB should continue to provide transportation services to non-qualifying and exceptional students. 55% of respondents also agreed that TCDSB should invest in a Student Travel Planning (STP) facilitator. Staff advise that these costs have been included in the current budget.
- 3. 62% of the respondents agreed or strongly agreed that their schools are clean and safe. On the question of maintaining school facilities, 97.6% agreed with this as a top priority. Staff advise that the current complement of custodial staff and various maintenance contracts have been maintained in the 2018-19 budget estimates.
- 4. In addition, there were budget presentations to a large number of TCDSB stakeholders. This included two rounds of consultations with Union and Federations, Audit committee, and the Ontario Association Parents in Catholic Education (OAPCE). An initial presentation was provided to the Special Education Advisory Committee (SEAC), but unfortunately due to some scheduling conflicts within SEAC a second round of consultation did not occur. Individual SEAC members were still invited to a subsequent consultation with OAPCE and Catholic Parent Involvement Committee (CPIC).
- 5. OAPCE was the only organization to provide a formal communication with regard to the budget consultation. That letter is appended at the end of this report. The communication describes a few issues and questions that were discussed during the meeting with staff. Finance and academic staff responded to these inquiries in-person. The most relevant part of this communication to the deliberation of the Non-Instructional part of the budget is that they are unsupportive of the hiring of two new FTEs for HR recruitment and are rather suggesting that capacity be found from within that Department. They are supportive of the onetime investment in hiring of retired Principals to assist with recruitment, but not the salary level allocated for these purposes. Finally, they

- have made some suggestions on Information Technology (IT) related efficiencies that could be sought moving forward. Staff will take the IT suggestions in to consideration when approaching IT Strategic planning.
- 6. Staff responded to a great deal of questions and comments through these consultations and it was fruitful for both staff and stakeholders alike. Some exchange of information is still ongoing with some stakeholders (union groups) and members of SEAC, but staff recommend that the budget be approved as is and ongoing dialogue can continue and lead in to the 2019-20 budget process.

E. STAFF RECOMMENDATION

- 1. That the Board of Trustees approve a balanced budget with a base budget increase in the Non-Instructional Category by \$3.6M, inclusive of 3 new FTEs, as further detailed in Volume IV of the Budget Book.
- 2. That the Board of Trustees, for inclusion into the Non-Instructional Expenditure Category budget, approve a strategic one-time investment from Accumulated Surpluses of \$0.34M for Human Resource related initiatives, as further detailed in Volume IV of the Budget Book.
- 3. That the Board of Trustees approve the Reserve Strategy as detailed in Volume V of the Budget Book.

Toronto Catholic District School Board

Volume IV: Non-Instructional Related Expenditures

Non-Instructional Expenditures are necessary to support student achievement and well-being

While the majority of TCDSB's expenditures are on Instructional related activities, there are several functions within the organization that are Non-Instructional in nature, but still play a critical role in providing safe and enriching environments for students. They are also key to ensuring that stewardship of the Board's physical assets and monies are provided for with a high degree of quality. Non-Instructional Operating Expenditures can be summarized in four main areas: Administration and Governance, Transportation, School Operations and Maintenance, and Other Expenditures. Appendix 4B provides a detailed breakdown.

Administration and Governance expenditures include costs such as operating the Board office (Catholic Education Centre) and central facilities, system-wide based staff and expenditures, including supervisory officers and their support staff. Transportation expenditures includes costs to transport students between home and school, as well as costs for late buses, clubs and sport teams events and field trips. School operations and maintenance includes custodial, maintenance and school operations staff salaries and benefits, utilities, insurance and other expenditures to maintain clean and safe school environments. Other expenditures include funding for special purpose projects.

The following chart provides an overview of Non-Instructional related Expenditures by functional class.

CLASSIFICATION (\$M)

Supplies and Services, \$28.6, 17%

Employee Benefits, \$19.6, 12%

Salaries and Wages, \$66.1, 40%

Other, \$3.3, 2%

2018-19 NON-INSTRUCTIONAL EXPENDITURES BY



The chart below provides a comparison between the 2017-18 budget and the 2018-19 budget estimates by category. On the following page is a brief analysis of each line item (referenced by line #) explaining the differences between each year's budget. The largest increase is in School Operations and Maintenance, mainly due to inflationary pressures.

Non-Instructional Expenditures Increases / (Decreases) (\$000)

	Non-Instructional	2017/18 Budget Revised Estimates	Net Change Increase / (Decrease)	2018/19 Budget Estimates
1	Administration and	A 0	^ - 10	***
	Governance	\$27,727	\$746	\$28,473
2	School Operations &			
	Maintenance	95,867	2,235	98,103
3	Transportation	35,145	588	35,733
	Sub-total Non-			
	Instructional	158,739	3,569	162,309
	<u>Other</u>			
4	Temporary Accommodation	3,222	114	3,335
	TOTAL EXPENDITURES			
	Non-Classroom	\$161,961	\$3,683	\$165,644

Non-Instructional Expenditures Variance Analysis

- 1 Board Administration and Governance category has increased by \$0.7M due to funded increases in salary and benefits costs of \$0.5M and Human Resource recruitment team of two FTE's for \$0.2M.
- 2 School Operations and Maintenance have increased by \$2.2M due to funded increases in salary and benefits of \$0.1M, utility costs of \$0.5M, insurance costs have increased by \$0.2M and maintenance and operating costs of \$1.4M.



- **3** Transportation costs have increased by \$0.6M mainly due to increased costs of contractual rate increases.
- **4** Temporary Accommodation costs have increased due to higher leasing costs of \$0.1M.

Highlights of New Investments include the following:

- An addition of a Student Travel Planner. To build upon the experience and knowledge gained since the 2011 introduction of the School Travel Planning in TCDSB schools, and to fund an expanded STP Facilitator role to assist in completing the feasibility study and undertaking implementation of school-specific action plans designed to address traffic safety problems and promote sustainable modes of travel in TCDSB communities.
- 2. An addition of a Equity and Human Rights Advisor. The mandate of the Equity and Human Rights Advisor is to, through moral suasion, work with the Director of the Board and with the board's senior team in order to further foster cultures of respect for human rights and equity, and to help identify and address systemically based human rights and equity issues, and to make generally known the availability of regionally based concerns and complaints services and to, where appropriate, refer members of board communities to the service.
- 3. An increase in the HR Recruitment capacity. A 2014 Deloitte audit referenced the need for additional human and financial Recruitment resources as well as the need to leverage technology. 1000 external hires and 2500 internal hires were processed annually over the past 5 years. Two additional recruitment staff are required to maintain the unprecedented demand for new hires in the organization.
- 4. *Increasing the base amount of the Trustee Honoraria.* Increasing the base amount of the Trustee Honoraria from \$5,900 to \$6,300 annually per Provincial directive. It should be noted that this has been included for disclosure, but has no material impact on the budget.



The following tables provide detail of the new FTEs being recommended for inclusion in the 2018-19 budget. It provides the FTEs in terms of "Non-Discretionary" additions (based on restricted funding, legislative changes and arbitration settlements) as well as "Discretionary".

Non-Discretionary GSN Investments in Non-Instructional Expenditures	FTE	(\$M)
Equity and Human Rights Advisor	1.0	0.15
Total	1.0	0.15

Discretionary GSN Investments in Non-Instructional Expenditures	FTE	(\$M)
Student Travel Planner	0.0	0.05
Human Resources Recruitment Staff	2.0	0.22
Total	2.0	0.27

An additional one-time strategic investment of \$0.3M is proposed from Accumulated Surpluses to address human resource issues related to recruitment and absenteeism. As the current complement, even with the two additional FTEs proposed, is expected to be unable to handle the work load of all new hires it is recommended that retired staff be hired on a short-term basis to help with the recruitment of staff. These investments are further detailed in Appendix 4A.

VOLUME IV - APPENDICES



Appendix 4A

2018-19 One-time Strategic Investments	
Investment Description	\$M
Human Resource Recruitment Initiatives	0.120
Additional Human Resource capacity by engaging retired School Principals and Vice-Principals is required to ensure Recruiting Interview Panels possess the requisite skill sets and expertise. The increased volume of recruiting workload exceeds existing staffing capacity and negatively impacts upon staffing vacancy fill-rates.	
School Board Cooperative Inc. (SBCI) Attendance Support Services Extend the contract with SBCI to address attendance management issues identified by TCDSB staff and recent internal audits as a high priority and significant cost and academic operational pressure. SBCI Support services will continue to organize and operationalize	0.223
structural changes within the Sick Leave and Disability Department. Total	\$0.343



NON-CLASSROOM

		2017/2018	0040/0040	Differe	nce
Expenditures	2016/17 Actuals	Revised Estimates	2018/2019 Estimates	\$	%
Director's Office	5,643,978	5,945,986	6,005,181	\$ 59,195	1.0%
Communications	537,379	540,077	622,178	\$ 82,102	15.2%
Human Resources	5,121,653	6,053,069	6,283,453	\$ 230,384	3.8%
Business Administration	4,231,872	4,763,205	4,816,324	\$ 53,119	1.1%
Legal Fees	884,054	915,000	1,000,000	\$ 85,000	9.3%
Corporate Services	1,031,780	1,163,460	1,091,996	\$ (71,464)	-6.1%
Employee Relations	552,452	772,142	827,766	\$ 55,624	7.2%
Facilities Services & Planning Services	1,381,452	1,561,624	1,679,234	\$ 117,610	7.5%
Catholic Education Centre	1,612,379	2,518,323	2,586,256	\$ 67,932	2.7%
Transportation	33,319,894	35,145,198	35,732,608	\$ 587,410	1.7%
Operations & Maintenance	89,778,457	95,867,259	98,102,743	\$ 2,235,484	2.3%
Other Expenditures	119,437	124,106	125,262	\$ 1,156	0.9%
Temporary Accomodation		3,221,513	3,335,243	\$ 113,730	3.5%
Budgets Transferred to Classroom Instruction from Administration and Gover	nance	3,370,491	3,435,884		
TOTAL	\$ 144,214,786	\$ 161,961,454	\$ 165,644,129	\$ 3,682,675	2.3%



Director's Office

		2017/18	0040/0040	Differ	ence
Expenditures	2016/17 Actual	Revised Estimates	2018/2019 Estimates	\$	%
Director/Supervisory Officers Salaries	\$ 2,865,984	\$ 2,859,861	\$ 2,957,605	97,744	3.4%
Director/Supervisory Officers Benefits	824,075	939,059	878,113	(60,946)	-6.5%
Director & Supervisory Officers Professional Development	47,283	40,000	42,500	2,500	6.3%
Director & Supervisory Officers Other Expenses	63,303	51,912	43,680	(8,232)	-15.9%
Office Support Staff Salaries	909,850	824,456	850,226	25,770	3.1%
Office Support Staff Benefits	212,263	216,080	218,168	2,088	1.0%
Trustees & Student Trustees Honorariums	256,833	267,177	272,052	4,875	1.8%
Trustees & Student Trustees Other Expenses	126,744	377,680	373,077	(4,603)	-1.2%
OCSTA Annual Membership Fee	210,118	210,978	210,978	-	0.0%
OCSOA Membership Fees	32,895	32,895	32,895	-	0.0%
Director's Office					
Printing	3,341	15,000	15,000	-	0.0%
Telephone	1,456	2,500	2,500	-	0.0%
Supplies	87,483	98,388	98,388	_	0.0%
Contractual Services	2,349	10,000	10,000	-	0.0%
TOTAL	\$ 5,643,978	\$ 5,945,986	\$ 6,005,181	59,195	1.0%



Communications

		2017/18		Differ	ence
Expenditures	2016/17 Actuals	Revised Estimates	2018/2019 Estimates	\$	%
Salaries	\$ 383,479	\$ 365,983	\$ 436,193	70,210	19.2%
Benefits	103,630	95,920	111,927	16,007	16.7%
Supplies & Services					
Car Allowance	11,369	12,348	8,232	(4,116)	-33.3%
Printing	6,145	7,500	7,500	-	0.0%
Telephone	3,385	4,000	4,000	-	0.0%
Supplies	29,371	54,326	54,326	-	0.0%
TOTAL	\$ 537,379	\$ 540,077	\$ 622,178	82,102	15.2%



Human Resources

		2017/18	0040/0040	Differ	ence
Expenditures	2016/17 Actuals	Revised Estimates	2018/2019 Estimates	\$	%
Salaries	\$ 3,558,325	\$ 4,072,019	\$ 4,253,986	181,967	4.5%
Benefits	967,887	1,067,227	1,091,587	24,360	2.3%
Central Temporary Staffing	150,295	85,000	85,000	-	0.0%
Summer Help (Temporary Staffing)	-	85,000	85,000	-	0.0%
Negotiation Costs	18,217	125,719	125,719	-	0.0%
New Teacher Induction Program NTIP Provision	50,000	50,000	50,000	-	0.0%
Workplace Safety Team Professional Development Fund	-	50,000	50,000	-	0.0%
Whistle Blower Security	-	75,000	75,000	-	0.0%
Central Bargaining - OCSTA	43,017	43,017	43,017	-	0.0%
Car Allowance	32,928	37,044	24,696	(12,348)	-33.3%
Professional Development	24,443	15,000	15,000	-	0.0%
Printing	7,362	8,000	8,000	-	0.0%
Telephone	9,493	10,000	11,406	1,406	14.1%
Supplies	72,081	97,250	97,250	-	0.0%
Recruitment of Staff	86,333	80,000	80,000	-	0.0%
Professional Services	61,953	82,811	117,811	35,000	42.3%
Software Fees & Licensing Fees	39,321	69,982	69,982	-	0.0%
TOTAL	\$ 5,121,653	\$ 6,053,069	\$ 6,283,453	230,384	3.8%



Business Administration

		2017/18	0040/0040	Differ	ence
Expenditures	2016/17 Actuals	Revised Estimates	2018/2019 Estimates	\$	%
Salaries	\$ 3,333,032	\$ 3,694,546	\$ 3,745,698	51,152	1.4%
Benefits	879,825	968,296	961,146	(7,150)	-0.7%
Supplies & Services					
Materials Management	8,295	9,116	9,116	-	0.0%
Payroll Services	27,186	28,920	28,920	-	0.0%
Business Services	31,675	37,328	46,444	9,116	24.4%
Printing Services	(264,409)	(100,000)	(100,000)	-	0.0%
Bank Charges & Other Fees	95,135	25,000	25,000	-	0.0%
Audit Fees	121,133	100,000	100,000	-	0.0%
TOTAL	\$ 4,231,872	\$ 4,763,205	\$ 4,816,324	53,119	1.1%



Legal Fees

			2017/18		Diffe	rence
Expenditures	2016/	17 Actuals	Revised Estimates	2018/2019 Estimates	\$	%
Legal Fees & Services - General Corporate & Safe Schools	\$	70,198	\$ 150,000	\$ 150,000	-	0.0%
Legal Fees & Services - Employee Relations		620,861	450,000	500,000	50,000	-100.0%
Legal Fees & Services - Planning & Facilities		192,996	315,000	350,000	35,000	-100.0%
TOTAL	\$	884,054	\$ 915,000	\$ 1,000,000	85,000	-100.0%



Corporate Services

		2017/18	0040/0040	Difference	
Expenditures	2016/17 Actuals	Revised Estimates	2018/2019 Estimates	\$	%
Salaries	\$ 735,059	\$ 781,241	\$ 727,782	(53,459)	-6.8%
Benefits	192,888	204,754	186,749	(18,005)	-8.8%
Professional Development	47,658	82,700	82,700	-	0.0%
Printing	1,156	1,200	1,200	-	0.0%
Telephone	1,870	2,000	2,000	-	0.0%
Supplies	36,620	26,088	26,088	-	0.0%
Contractual Services	12,412	57,861	57,861	-	0.0%
Software Fees & Licensing Fees	-	3,500	3,500	-	0.0%
Car Allowance	4,116	4,116	4,116	-	0.0%
TOTAL	\$ 1,031,780	\$ 1,163,460	\$ 1,091,996	(71,464)	-6.1%



Employee Relations

		2017/18	00404040	Difference	
Expenditures	2016/17 Actuals	Revised Estimates	2018/2019 Estimates	\$	%
Salaries	\$ 413,800	\$ 566,290	\$ 613,029	46,739	8.3%
Benefits	107,829	148,418	157,303	8,885	6.0%
Professional Development	5,766	7,500	7,500	_	0.0%
Printing	266	10,000	10,000	-	0.0%
Telephone	1,467	3,000	3,000	_	0.0%
Supplies	15,234	13,770	13,770	-	0.0%
Professional Services	7,747	19,048	19,048	-	0.0%
Car Allowance	343	4,116	4,116	_	0.0%
TOTAL	\$ 552,452	\$ 772,142	\$ 827,766	55,624	7.2%



Facilities Services & Planning Services

		2017/18		Difference	
Expenditures	2016/17 Actuals	Revised Estimates	2018/2019 Estimates	\$	%
Salaries	\$ 1,051,486	\$ 1,140,404	\$ 1,291,087	150,683	13.2%
Benefits	273,945	298,886	331,293	32,407	10.8%
Supplies & Resources					
Facilities Services Department	12,172	12,243	12,243	-	0.0%
Capital Development Department	3,527	3,500	3,500	-	0.0%
Planning Department	22,147	30,348	18,000	(12,348)	-40.7%
Development Services	6,948	11,227	7,111	(4,116)	-36.7%
Admissions Department	102	1,000	1,000	-	0.0%
Facilities Legal Services Department	8,626	10,000	10,000	-	0.0%
Capital Planning Capacity Program	2,498	54,016	5,000	(49,016)	-90.7%
TOTAL	\$ 1,381,452	\$ 1,561,624	\$ 1,679,234	117,610	7.5%



Catholic Education Centre

		2017/18		Difference	
Expenditures	2016/17 Actuals	Revised Estimates	2018/2019 Estimates	\$	%
Custodial Salaries	\$ 519,393	\$ 350,535	\$ 406,126	55,591	15.9%
Custodial Benefits	146,999	91,871	104,212	12,341	13.4%
CEC Facility Utilities & Maintenance	684,689	600,000	600,000	-	0.0%
CEC Amortization of Previous Building Improvements	261,298	1,475,917	1,475,917	-	0.0%
TOTAL	\$ 1,612,379	\$ 2,518,323	\$ 2,586,256	67,932	2.7%



Transportation

		2017/18	2010/0010	Differ	ence
Expenditures	2016/17 Actuals	Revised Estimates	2018/2019 Estimates	\$	%
Administrative Salaries	\$ 930,536	\$ 932,113	\$ 963,558	31,445	3.4%
Administrative Benefits	242,634	245,317	237,421	(7,897)	-3.2%
Temporary Assistance		57,000	57,000	-	0.0%
Office Supplies & Services	61,507	82,400	132,400	50,000	60.7%
TRANSPORTATION - REGULAR INSTRUCTION					
Music	34,673	36,571	37,303	731	2.0%
Outdoor Education	3,557	12,106	12,348	242	2.0%
Excursions for Handicapped Students	14,391	37,127	37,870	743	2.0%
Ontario Schools Deaf & Blind	-	37,439	38,188	749	2.0%
Regular Home to School	14,664,184	14,044,388	14,325,276	280,888	2.0%
Student Safety	43,037	92,911	94,769	1,858	2.0%
Safe Schools	8,957	10,609	10,821	212	2.0%
Kindergarten	-	-	-	-	0.0%
Remedial Language	129,363	133,244	135,909	2,665	2.0%
Regular Transit Fares for Scholars & Children	31,491	49,745	50,740	995	2.0%
Safe Schools Transit Fares (Scholars)	-	14,302	14,588	286	2.0%
Transit Fares for Adults	-	1,931	1,970	39	2.0%
Summer School	380,450	412,449	420,698	8,249	2.0%
Bilingual Program Transit Fares (Scholars & Children)	31,870	74,336	75,822	1,487	2.0%
Exceptional Circumstances (Tickets)	436,764	496,062	505,983	9,921	2.0%
Fuel Escalation Charge Provision	(75,550)	100,000	150,000	50,000	50.0%
Regular Home to School for New Routes	-	-	-	-	0.0%
Software Fees & Licenses	90,722	317,772	180,926	(136,846)	-43.1%
Physical Transportation	-	2,370	2,417	47	2.0%
Transportation Consortium	74,043	375,000	382,500	7,500	2.0%



Transportation

		2017/18		Differe	nce
Expenditures	2016/17 Actuals	Revised Estimates	2018/2019 Estimates	\$	%
TRANSPORTATION - SPECIAL EDUCATION					
Vision, Hearing & Speech	2,199,742	2,265,734	2,311,049	45,315	2.0%
Medical & Handicapped	7,955,385	8,194,047	8,357,927	163,881	2.0%
Special Education Transit Fares for Adults	3,801	12,228	12,473	245	2.0%
Developmentally Disabled Transit Fares for Scholars	8,983	7,903	8,061	158	2.0%
Special Transit Fares for Scholars & Children	165,735	116,456	118,786	2,329	2.0%
Developmentally Disabled	574,188	592,426	604,275	11,849	2.0%
Section 23 Programs	773,469	796,671	812,604	15,933	2.0%
Special Education	3,814,927	3,920,930	3,999,348	78,419	2.0%
Co-operative Education (Special Education & W/C) & Transit Tickets	721,035	967,823	987,179	19,356	2.0%
ONE-TIME TRANSPORTATION SERVICES					
One-time Transportation Services due to New School Construction	\$ -	\$ 705,788	\$ 652,399	(53,389)	-7.6%
TOTAL	\$ 33,319,894	\$ 35,145,198	\$ 35,732,608	587,410	1.7%



Operations & Maintenance

		2017/18		Differ	ence
Expenditures	2016/17 Actuals	Revised Estimates	2018/2019 Estimates	\$	%
Salaries	\$ 42,552,374	\$ 46,808,852	\$ 47,230,180	421,328	0.9%
Benefits	13,020,198	14,999,339	14,702,722	(296,617)	-2.0%
Utilities	19,894,334	18,544,856	19,068,893	524,037	2.8%
Insurance	2,228,839	2,200,000	2,350,000	150,000	6.8%
Professional Development Provision	73,275	37,806	126,751	88,945	235.3%
Printing and Photocopying	8,258	1,994	8,258	6,264	314.1%
Plant Operations Supplies	1,053,249	1,140,000	1,289,520	149,520	13.1%
Automobile Reimbursement	60,709	66,121	60,709	(5,412)	-8.2%
Travel Expense Allowance	110,166	124,537	110,166	(14,371)	-11.5%
Vehicle Fuel	119,691	120,064	130,000	9,936	8.3%
Repairs-Custodial Equipment	145,453	160,381	150,000	(10,381)	-6.5%
Telephone Expense	93,051	98,731	128,096	29,365	29.7%
Office Supplies and Services	36,275	34,624	41,275	6,651	19.2%
Maintenance Supplies and Services	3,499,503	3,993,749	4,201,000	207,251	5.2%
Vehicle Maintenance and Supplies	236,921	131,289	236,921	105,632	80.5%
Replacement Furniture & Equipment	409	92,608	256,151	163,543	176.6%
Additional Equipment - Vehicles	804	140,081	180,000	39,919	28.5%
Rental Lease Vehicles	53,978	51,073	75,000	23,927	46.8%
Other Professional Fees (Health & Safety)	169,585	93,121	169,585	76,464	82.1%
Other Contractual Services	6,421,384	7,028,033	7,587,516	559,482	8.0%
TOTAL	\$ 89,778,457	\$ 95,867,259	\$ 98,102,743	2,235,484	2.3%



Other Expenditures

		2017/18	0040/0040	Differ	ence
Expenditures	2016/17 Actuals	Revised Estimates	2018/2019 Estimates	\$	%
Parental Involvement Funding	117,806	122,106	123,262	1,156	0.9%
Partnership Development Department - Office Supplies & Services	1,631	2,000	2,000	-	0.0%
TOTAL	\$ 119,437	\$ 124,106	\$ 125,262	1,156	0.9%

Toronto Catholic District School Board

Volume V: Financial Sustainability

Financial Sustainability requires looking forward

School Board funding is almost entirely dependent on Provincial grants. A large portion of these grants remain stable year over year and therefore the TCDSB is able, to a certain extent, to consider it's sustainability beyond an annual budget process. Historically, much concentration is placed on



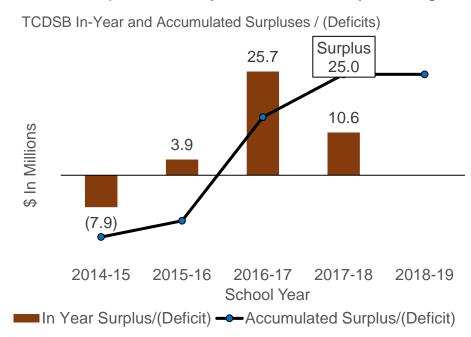
balancing the funding received by the Province with the planned expenditures for the year. Often a Board may face one-time increases or decreases in expenditures, which puts the budget out of balance. It also may be faced with "structural deficits" arising from legislative or labour arbitration decisions that essentially place an ongoing cost burden

that is greater than the funding received by the Province. In order to remain sustainable the TCDSB should consider funding strategies that are beyond an annual view and also that works within the current legislative permissions granted to it by the Province.

In isolation, an Accumulated Surplus is not a solution to Financial Sustainability

The mechanism by which most School Boards, including the TCDSB, mitigates against the risks of potential in-year deficits is by holding an

"Accumulated Surplus". These are the result of adding all of the previous year's inyear surpluses and holding this sum of money as a type of "rainy day" fund that can be used to offset in-year deficits in future years.





The TCDSB made difficult decisions to eliminate various structural deficits in order to arrive at an expected Accumulated Surplus of \$25.0M at the end of the 2017-18 fiscal year. TCDSB Trustees were forward thinking in that they passed a motion that 1% of the Accumulated Surplus would be held as a form of contigency against future year deficits. This aligns with the Province's recommendation that a minimum of 1% be accumulated for these purposes. This year's budget process recommends taking this notion one step further to more fully embrace a sustainable path forward.

A Reserve Strategy is necessary to complement an Accumulated Surplus and mitigate the risk against in-year deficits

The Education Act allows School Boards to create something called "Reserves". These are special purpose type funds that are restricted to a specific type of expenditure and can be funded by the Accumulated Surplus. The TCDSB already has several of these types of reserve accounts, however the strategy to set these monies aside has not been previously formalized and occurs on an ad-hoc basis. This year staff are recommending that the strategy begin to be formalized so that funds from the Accumulated Surplus can be strategically set aside for potential future in-year deficits as well as for one-time large expenditures that can change from year to year. Investments in enterprise wide Information Technology (IT) systems is a good example of this.

New consolidated reserves are recommended to be created out of some existing ones

As stated earlier, the TCDSB has several reserves included in its 2017-18 Financial Statements. Many of these reserves are operational in nature and simply carryover projects/initiatives from previous years where the monies are yet to be spent. A full list of these reserves can be found in Appendix 5A. There are some reserves that lend themselves to being a part of larger strategic reserves. Those reserves concerning renewal of Administrative Facilities and IT Infrastructure make sense to consolidate and create two new strategic reserves as the projects may be phased over multiple years.



There are also areas for which TCDSB receives minimal grant funding and it is both logical and more sustainable to create strategic reserves to better plan for and implement related projects over the long term. In total, these

reserves would be seeded with \$3.38M of funding. It should be noted that some of these monies may be in use within the 2017-18 fiscal year so the starting balances may be less than

2018-19 New Consolidated Reserves (\$M)		
I.T. Infrastructure Reserve \$2.18		
Admin Facility Reserve \$1.20		
Total	\$3.38	

\$3.38M when beginning the 2018-19 fiscal year. Starting to build up these reserves will allow both Facilities and IT staff better flexibility to respond to priorities that may arise, which are not provided for through base budget GSN funding or EPO grants from the Ministry.

One-time strategic investments are recommended for 2018-19 from the Accumulated Surplus

During the 2017-18 Revised Budget Estimate discussion, the Board of Trustees allocated various one-time strategic funding from the Accumulated Surplus. Before considering a further Reserve Strategy beginning in 2018-19, any further strategic one-time investments must be considered.

2018-19 One-Time Strategic			
Investments (\$M)			
IT Hardware Replacements	\$1.40		
HR Recruitment Initiatives	\$0.12		
SBCI Attendance Support	\$0.22		
Services			
Total	\$1.74		

For the 2018-19 fiscal year, staff are recommending in Volumes 3 and 4 of this Budget Book three one-time investments from the Accumulated Surplus totaling \$1.75M. All three investments have been assessed by Senior Staff as being high priority and critical to the success of the

organization moving in to the future. Staff believe that these are fiscally prudent investments given their broad impact on the organization.



The remainder of the Accumulated Surplus is recommended to be allocated to new Strategic Reserves

The 2017-18 Accumulated Surplus is expected to be \$25.0M. After deducting \$1.74M for one-time investments in 2018-19 this leaves a balance of \$23.26M. Further reducing this amount by an estimated ASO Benefit

Surplus of \$10.50, leaves a balance to be allocated of \$12.7M. It is necessary to deduct the ASO Benefit Surplus until such time as that amount is confirmed by the Province. It is recommended that the \$12.7M be allocated to the following two Strategic Reserves: 1) Operating Contingency Reserve, and 2) IT Strategic Systems Reserve.

2018-19 New Strategic R (\$M)	leserves
Operating Contingency	\$11.20
Reserve (To max of 2%	
Contingency)	
IT Strategic Systems	\$1.50
Reserve	
Total	\$12.70

The Operating Contingency reserve is recommended to act as a contingency to offset future in-year deficits. \$11.2M is approximately 1% of TCDSB's operating budget and is in line with the motion approved by Trustees. This reserve is envisioned to operate with a minimum and maximum amount. The minimum would be 1% of the operating budget, while the maximum amount held in the reserve would be 2% of the operating budget. It should be noted that the Province has indicated that 2% is the optimal amount to be held in contingency.

The IT Strategic Systems Reserve, which is separate and distinct from the IT Infrastructure Reserve, is not for hardware replacement. Rather, it is to address long term financial planning for replacement of major enterprise wide systems. TCDSB is facing several challenges over the coming years with either completely replacing or upgrading large scale systems such as its Student Information System and its HR and Finance Enterprise system also known as "SAP". These are large multi-year and multi-million dollar investments that require careful implementation and financial planning to achieve. Some money exists in the base budget for this system work, but it is anticipated that the cost will greatly exceed the amounts allocated at this point. By creating an initial reserve with seed monies this should help to start a sustainable financial plan, but more will need to be allocated in future years.



In-Year surpluses are recommended to be apportioned to Strategic Reserves on a formula basis

In order to provide a framework by which accumulated surpluses are treated at year end, it is recommended that a formulaic approach is taken to allocate funding to strategic reserves. 50% of in-year surpluses are recommended to be allocated to the Operating Contingency Reserve as a contingency against future in-year deficits. As mentioned earlier, this contribution would continue until the reserve has reached its maximum of 2% of the operating budget. Once the maximum is attained, these funds would be redirected to other remaining reserves on a pro rata basis according to the formula or to any new strategic reserves that may be recommended in the future.

Another 40% is recommended to be allocated to the IT Strategic Systems Reserve. This once again gives recognition to the fact that the Board is going to face some severe funding challenges over the next 3-7 years as major enterprise systems are expected to be replaced or upgraded.

% Allocation of In-Year Surpluses to Strategic Reserves				
Operating Contingency	50%			
Reserve				
IT Strategic Systems	40%			
Reserve				
Admin Facility Reserve	5%			
Student Equity Strategic	5%			
Reserve				
Total	100%			

A further 5% is recommended to be allocated to each of the Administrative Facility Reserve and a new Student Equity Reserve. The Administrative Facility Reserve is meant to largely help bolster the renewal activities for the Catholic Education Centre to which most EPO grants from the Province are ineligible. The Student Equity Reserve is a new strategic reserve being recommended to set aside monies that can be applied towards various equity initiatives across the Board. One-time increases to School Block Budgets in lower socio-economic areas of the Board is a good example of one such use, but other priorities, initiatives or projects may also arise in the future that could benefit from having funding set aside to fund equity related issues.

It should be noted that this formula would be applied by staff at year end, however should the Board of Trustees wish to adjust this formula in any given year, then a motion in that particular year could be passed to adjust the formula should a need arise to do so.



The reserve strategy is in its infancy and will require more work in the future

The reserve strategy recommendations described in this Volume of the 2018-19 Budget Book is only the start of the overall strategy. More work will be done over the next fiscal year to better define the strategy. For instance, more work will be done on a plan and multi-year budget for IT Strategic Systems investments as well as an IT asset replacement plan. An actual Reserve Policy is envisioned to be created and brought to the Governance and Policy Committee in 2018-19 so that policy and procedures are more well defined.

It is recommended that the above strategy be adopted for this fiscal year to ensure a philosophy of Financial Sustainability begins to emerge. As the largest publicly funded Catholic School Board, it is imperative that sustainability be of primary concern and that a degree of objectivity and transparency is also achieved in doing so.



VOLUME V - APPENDICES



Appendix 5A

List of Reserves	2016-17 Year End (\$M)
School Block Budget	2.20
Professional Development	0.16
Contract Support Workers	0.09
Trustee unspent Budgets Board Motion	0.04
Capital Planning Capacity	0.56
Playground Equipment	0.03
Catholic School Parent Council	2.06
Administrative Facilities*	1.20
IT Infrastructure*	2.18
Total Reserves	\$8.52

^{*}New consolidated strategic reserves using balances from existing reserves related to administrative facilities and IT hardware replacement



2018/19 Budget Consultation to TCDSB

As representatives and advocates for parents in the TCDSB, OAPCE Toronto is pleased to offer the following recommendations and inquiries regarding the draft TCDSB Budget for the 2018/19:

The following observations & queries were discussed during our consultation meeting TDCSB staff

- 1. **FTE Growth**, OAPCE expressed concerns regarding the pace of FTE growth of ~95 during 18/19. The budget includes hiring 2 HR professionals to accommodate the hiring of ~95 FTE. OAPCE is not supportive of hiring 2 HR FTE's to support the FTE growth, but rather leverage current HR resources to either allow slower organic compliment growth, alternatively current HR talent could be refreshed to support the hiring goals. Although we are in agreement with the hiring of retired Principals to support the process of new hiring, we do not support the amount of salary discussed for this task to be fulfilled.
- 2. **Support Staff, most importantly Child Youth Workers, Educational Assistants and Social Workers** with the increase of Special Education Teachers, and the Ministry of Education's focus on Mental Health and Well-Being, as parents we recognize the need for our children and suggest that this be revisited.

- 3. <u>A multi year budget</u> would also be helpful in understanding how the current years budget ties into the Boards multi year strategic visions.
- 4. <u>Capital plan</u> OAPCE suggested that opportunities should be explored to generate energy savings through Solar Panels, Green & Cool roofs, leveraging government grants on both capital investment and eco friendly design. The Capital plan was not shared with OAPCE for review during the budget consultation. Upon completion, OAPCE would appreciate the opportunity to review and provide feedback on the Capital Plan.
- 5. **IT Strategic Plan**, OAPCE suggests seeking infrastructure investments to update telephone system which costs the board ~\$800k per year or nearly \$300 per month per school. A VoIP system would save the board a considerable amounts. Upon completion, OAPCE would like appreciate the opportunity to review and provide feedback on IT Strategic Plan.

We discussed the need for SAP (Finance) and Student Data System upgrades that we're required. OAPCE suggested partnering with Ontario Universities or Colleges to support the Requests for proposals for each of these significant core system upgrades.

Other General Queries

- 1. How has the actual spending in the current year aligned to the 2017/18 budget
- 2. Has sufficient amounts been invested to enhance curriculum, specifically for Math as it seems to be an area that can be improved.
- 3. How does feedback from Parents / Stakeholders get incorporated into the budget? What about Audit, how are issues raised by these groups incorporated into the budget and does a linkage exist.

- 4. What are the major changes from the prior year?
- 5. Any Risk's in the budget?
- 6. Do we have all the numbers on one page with a comparative from prior year? (Simpler version of the appendix)
- 7. Is there is a plan in order to increase the school's block budget as they were cut 35% when the board went into deficit 3 years ago.

The following Questions were discussed on the Appendix

- 1. Pg 47. What are Religious Resources of \$1.5m? What are the initiatives being worked on in this area? What and how should parents / students / teachers etc. see these come through? These costs were explained to be part of the fully alive program, however the increase from 2017 to 2018 to 2019 was being reviewed and may potentially reduced.
- 2. Pg 48. What are School Nutritional Programs of \$100k? How does this impact the students? These cost were explain as being part of cost for administering nutritional programs where schools obtain grants.
- 3. Pg. 49 School Telephones Why so high? Seems like \$300 per month per school (200 schools) what's the nature of the expense and can't this be reduced? *See comments earlier*.
- 4. Pg. 59. Technology Seems to be increasing, what specifically are we doing to invest in technology? Long-term strategy is unclear.... should paper based resources be decreasing as these cost increase? If not why? 1. Licenses / Software 2. WAN / Internet 3. IT Investment *See comments earlier*.

We thank you for involving us in the consultation regarding the draft budget and always look forward to working with the TCDSB to ensure that the parent voice is present.

OAPCE Toronto Executive Team

	Annual C	Calendar of SEAC Busir	ness for 2018	
Month	Annual Activities/Topics	Board Events/Deadlines	Items to be Addressed from the Pending List	Status of Pending Items
January	- 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	- Grade 9 EQAO Testing takes place in Secondary Schools - Long Term Accommodation Program Plan (ongoing)	SEAC requested that the Board to seek a representation of indigenous persons from various organizations at SEAC. (November 2016) SEAC recommends to the Board of Trustees that the community assessment consultation be distributed immediately to Trustees and parents. (December 2017)	Completed Jan 2017 Completed Dec 2017
	staffing 2017	SEAC recommends to the Board of Trustees that Student Trustees membership in SEAC be considered. (December 2017)	Reviewed in Jan 2017	
			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)	Communicated Jan 2018
			SEAC recommend to the Board of Trustees that the Accessibility Working Group Committee also include parent representation. "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)	Communicated to pertinent staff for consideration Dec 2017
			SEAC recommends that Special Education Programs (S.P.01) policy be renamed to Special Education Programs and Services. Also that the term Special Education Programs and Services throughout the policy. SEAC recommends that	Communicated to pertinent staff for inclusion in the

			an example of blind/low vision be included as an example. (December 2017)	policy Dec. 2017
February	-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	-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	SEAC recommends to the Board of Trustees that Student Trustees membership in SEAC be considered. (December 2017) Investigate SEAC setting up a working subcommittee to propose items related to the suggestions from the Transportation Steering Committee for discussion at the SEAC January 2018 meeting. (December 2017)	Update since January 2018 February 2018
March	-Special Education Parent Fair -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	- Review of SEAC Calendar - Financial Report as at January, 2016 2017-18 Budget Consultation - GSN — - March 31 st special ed student count - Update to Special Education Programs for 2018-19 - Verbal update on Medical Conditions Forms	ONSIS report on identified students Autism Awareness Month	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. (Completed April 2018)
May	-Review of SEAC Calendar - SO update - Draft Protocol on Prevalent Medical Conditions - Report on PAST expansion to secondary schools - Student Grants 2018-19	Budget Consultation continues EQAO Assessment	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) SEAC recommend to the Board of Trustees that they refer the Anaphylaxis Policy to be updated	Completed May 2018 Updated May 2018

	- Pro Grants Application Update Cancelled on May 16, 2018 due to lack of Quorum Reset for May 22, 2018 Cancelled due to lack of Quorum		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)
June	 Review of SEAC Calendar Monthly Update from the Superintendent of Special Services Special Education Plan Budget approval update Status of PRO Grant application 	EQAO Grade 3 and 6 Testing	
July		School Board Submits balanced Budget for the following year to the Ministry	
August		Year End for School Board Financial Statements	

September	 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 	Special Education Report Checklist submitted to the Ministry of Education	
October	- 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	-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	-Review EQAO results including deferrals, exemptions, participation rates, and accommodations provided for Special Ed. Students and Achievement levels -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	-Engagement and Governance Supports Discussion Guide ONSIS report on identified students	
December	-SEAC Elections -SEAC Mass and Social	Independent review of assessment and reporting	

-Policy review of Special Education Programs		
(S.P.01)		
-Multi-year Accessibility Plan		



Special Education Superintendent Update May 2018

CPIC & OAPCE Parent Summit



On Saturday, May 5th, 2018, Rachelina Macchia, the Chief of IPRC, presented to parents at the CPIC and OAPCE Parent Summit.

Additionally, parents were able to participate in a learning session on 'Read and Write', led by Juliana Ozorio and Dennis Tuohy where they learned about the incredible features that provide universal access of students to access curriculum.





SPEECH AND LANGUAGE...DEAF/HARD OF HEARING

May is Speech, Language and Hearing Awareness Month

CELEBRATE WITH US!

In celebration, the Speech and Language Department is proud to present this interactive calendar for parents and educators. Throughout this month, click on each day's link to watch a video, read about a helpful tip, or download an activity sheet with fun songs and games designed to promote speech, language and hearing skills.

MAY IS SETELLANGUAGE A HEARING SKILLS CALENDAR OF ACTIVITIES TO SUPPORT SPEECH, LANGUAGE & HEARING SKILLS						
Sunday	Monday	Tuesday 1 Watch the Welcome to SLP Department Video	Wednesday Play games to promote listening skills	Thursday 3 Watch the Difference Between Speech & Language Video	Friday 4 Try some FREE Speech & Language apps	Saturday 5 Visit the pet store & talk about your favourite animal
Have a laughing day and take turns telling jokes	7 Watch the <u>Language</u> <u>Impairment Video</u>	Sing songs together when travelling about	Watch the Understanding My Language Impairment Video	Read a story using the <u>Read Me a</u> <u>Story</u> Resource	Watch the Reading at Home Video	Plan a menu and have a picnic inside or outside
Play Charades and act out different emotions	Watch the Welcome to D/HH Video	Always face you listener and reduce ambient noise	16 Watch the D/HH Identification Video	Wear hearing device every day, all day	Watch the Keep Language Simple Video	Using a mirror look at your faces and describe similarities
Look at photo albums & describe the people in the pictures	Watch the Storytelling App Video	Watch the Kindergarten Language Program Video	Play games together when out and about	Watch the Learning New Words Video	Ask Google or Siri to define some new & interesting words	Use a recipe to bake your favourite dessert
Collect different stones & describe the various ways you can sort them	28 Watch the Speech Impairment <u>Video</u>	Watch the Asking Questions Video	Watch the Using Drama to Promote Language Video	Talk about the character & plot of your favourite movie or TV show		



Over 50 D/HH students enjoyed a day of crafts, games, conversation, learning and fun at Boys' Club at St. Bruno/St. Raymond on April 25 and Girls' Talk at Sts Cosmas & Damian on April 26.

Celebrating Speech, Language & Hearing Awareness Month

TCDSB D/HH Dept











Join us! May 25th @ OLMC, 10am -2pm TCDSB Annual Deaf/Hard of Hearing Family Picnic #family #friends

#food #fun



Special Education Superintendent Update June 2018

Secondary School Student Special Olympics

On May 29, 2018, the Special Education Department in cooperation with three secondary schools, St. Mary Secondary Academy, Loretto College and Francis Libermann hosted the 21st annual Special Olympics for Secondary School Students in our intensive support programs. The Event was well attended with almost 800 students and staff.









Student and adult volunteers provided the much needed behind the scene organization and support that made the event exceptional.





REGULAR BOARD

PROTOCOL ON PREVALENT MEDICAL CONDITIONS

Great crowds came to him, bringing with them the lame, the maimed, the blind, the mute, and many others. They put them at his feet, and he cured them. – Matthew 15:30

1. Created, Draft	2. First Tabling	3. Review		
May 14, 2018	June 14, 2018	Click here to enter a date.		
Cristina Fernandes, Superintendent of Special Services Rachelina Macchia, Chief of IPRC				
RECOMMENDATION 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

T.B.D. Associate Director of Planning and Facilities

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

A. EXECUTIVE SUMMARY

This report replaces the Anaphylaxis S.M.15 and expands on the content to include four prevalent medical conditions: Anaphylaxis, Asthma, Diabetes and Seizures as per Policy and Program Memorandum 161-Supporting Children and Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and Epilepsy) in Schools.

Each medical condition has its own set of circumstances and is outlined in the revised policy with its own section.

The cumulative staff time required to prepare this report was 125 hours

B. PURPOSE

- 1. This report serves three purposes:
 - a. Arising from a **trustee motion** on November 2, 2017 was a request that the report from the Governance and Policy Committee on the updated Anaphylaxis policy be brought with the response to the delegation of September 7, 2017, and a copy of the presentation at the same time (Appendix A).
 - b. Coinciding with the trustee request was also the need to **update the Anaphylaxis Policy and Protocol**, which was last updated in 2013.
 - c. Legislative requirements arising from the Ministry of Education, through *PPM 161- Supporting Children and Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and Epilepsy) in Schools* (Appendix C) have led to the development of a protocol for prevalent medical conditions beginning on September 1st, 2018.

C. BACKGROUND

1. On September 7, 2018 a parent and her child delegated with respect to a need to review procedures with respect to Anaphylaxis (Appendix A). Staff

responded to the delegate's information by offering existing procedures and board requested a review of the Anaphylaxis Policy, Protocols and Guideline.

- 2. On November, 2nd, 2018, a report was brought to the Student Achievement and Well Being Committee with recommendations to revise the Anaphylaxis Policy.
- 3. Since staff were already going to be engaged in reviewing the policy, special services staff began to investigate the need for a broader meta-policy and an implementation protocol.
- 4. In February 2018, the Ministry of Education released the updated *PPM 161-Supporting Children and Students with Prevalent Medical Conditions* (*Anaphylaxis*, *Asthma*, *Diabetes*, *and Epilepsy*) in *Schools* (Appendix C) with new revisions, mandating boards to have prescribed protocols for September 2018.
- 5. PPM 161 (February 2018) requires boards to develop a meta-policy to address four prevalent medical conditions: Anaphylaxis, Asthma, Diabetes and Epilepsy/Seizures and requires the development of protocols to address each of these very different conditions.
- 6. Included in the accompanying protocol is the **TCDSB Prevalent Medical Conditions Protocol** (Appendix B). The protocol outlines procedures to address each of the four medical conditions as well as a general outline to assist staff in preparing for students who have these conditions.
- 7. For students with medical conditions other than the four listed in PPM 161, the protocol provides a generic Student Plan of Care to address medical conditions, which are not mentioned in PPM 161, but require attention at the school level.

D. EVIDENCE/RESEARCH/ANALYSIS

1. Based on a need to review the existing Anaphylaxis Policy, Protocol and Guidelines, the **TCDSB Prevalent Medical Conditions Protocol** was created to support the implementation of *PPM 161- Supporting Children and*

Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and Epilepsy) in Schools in TCDSB schools.

- 2. The protocol as defined in PPM 161 mandates and reflects best practices as suggested in the resources included for each medical condition.
- 3. Resources are outlined in each section of the protocol for each of the four medical conditions. These resources will also be used by the principal/vice-principal to train staff to work with students with medical conditions.
- 4. Each student's medical condition is unique to the individual student. As a result, each student with a prevalent medical condition will require the development of Student Plan of Care.
- 5. Each Student Plan of Care outlines the following areas:
 - a. Student Information
 - b. Emergency Contacts
 - c. Supports for the Medical Condition
 - d. Triggers (where appropriate)
 - e. Daily Routine and Management
 - f. Basic First Aid
 - g. Emergency Procedures
 - h. Parent notification
 - i. Impact on Excursion Protocols
 - j. Health Care Provider Information
 - k. Authorization and Plan review
- 6. Student Plans of Care will vary according to a specific medical condition and the individual student need.
- 7. The appendices of the protocol provide schools with various supports that assist schools in creating and managing Student Plans of Care.

E. METRICS AND ACCOUNTABILITY

1. The board will develop a new policy for medical conditions in September 2018 to support the implementation of the TCDSB Prevalent Medical Conditions Protocol.

- 2. Implementation of the TCDSB Prevalent Medical Conditions will need to be monitored during the first year of implementation both from a school implementation perspective and from a stakeholder perspective in order to accommodate emergent needs.
- 3. Staff will use the student information system to track reported incidence of prevalent medical conditions across the board.

F. IMPLEMENTATION, STRATEGIC COMMUNICATIONS AND STAKEHOLDER ENGAGEMENT PLAN

- 1. In response to the board motion on November 2, 2017, the delegate that attended the September 7, 2017 Student Achievement and Well Being Committee meeting was consulted on the new protocol and offered input that was considered and applied where appropriate.
- 2. The new protocol includes the transfer of information between elementary and secondary schools as well as appropriate communication with staff and students.
- 3. Additionally, any new students with medical conditions would be captured through school registrations processes and through SOAR (Student Online Admissions & Registration).
- 4. Consistent with PPM161, consultation has taken place with parents of students with medical conditions, students through ECSLIT (elementary student leaders) and CSLIT (secondary school student leaders), delegates to the Student Achievement and Well Being Committee and/or SEAC (Special Education Advisory Committee), federations, administrators of schools, and senior staff. All feedback was considered and incorporated, where feasible or appropriate, into the protocol. We are in the process of having the protocol reviewed by staff from public health.
- 5. Additionally, the protocol has also been reviewed by the TCDSB legal department.

- 6. The special education department will begin the process of communicating this information and implementation for a September 1st implementation as outlined below.
 - a. Administrators and senior leaders will receive communication of the changes in June 2017. Special education staff who support schools in the development of Student Plans of Care will be inserviced through department meetings.
 - b. Principals will be inserviced through presentations at principal meetings in September 2017.
 - c. Vice-Principals will be inserviced through training at the vice-principal meetings.
 - d. Additionally, new administrators will be offered a special services/medical conditions training in the fall of 2017.
 - e. The document will be posted on the TCDSB public site to support parents that may have students with medical conditions.
 - f. Editable documents will be made available to school and board staff for use with students beginning September 1st, 2018.
- 7. The Anaphylaxis Policy S.M.15 (2013) and Asthma policy S.M. 16 will need to go to the Governance and Policy Committee to rescind the existing policies and to replace them with an updated meta-policy on prevalent medical condition(s) as per PPM 161.

G. STAFF RECOMMENDATION

- 1. Staff recommends that the Anaphylaxis Policy S.M. 15 and Asthma Policy S.M. 16 be rescinded and replaced with a new Meta-Policy on Prevalent Medical Conditions, replacing existing policies as early as possible in the 2018-19 school year.
- **2.** Staff recommends the implementation of the Protocol on Prevalent Medical Conditions (Draft) and the Student Plans of Care for September 1, 2018.
- **3.** Staff recommends an interim consultation midway through the implementation year to assess if any adjustments are required.

Appendix A

Good evening,

First, we would like to thank you for the opportunity to speak here tonight.

My name is Kimberley Evans and my daughter is with me and her name is Hannah Grace Evans. My daughter has a life threatening peanut allergy and she was diagnosed when she was 18 months old and she has been living with this allergy for 14 years. She has completed grade nine. A couple of months ago on June 7, 2017 there was a pranking incident at Senator Oconnor, a student placed peanut butter on door handles of the school. On Feb 22 a student was eating peanuts two rows over from Hannah Grace. We were told at that time from the acting principal that the judgement of what students are allowed to eat in the classroom was at the discretion of the teacher. There seemed to be no clear rule or process regarding what was allowed. We all know that cross contamination is fatal for students with allergies. I spoke to many students and parents from the school community and the most popular response was "I don't think there is a policy about bringing life threatening food in the school, our teachers lets us bring what we want." My husband and I felt that the communication and education of the staff and students needed to be revisited. We were very sad on the day of the pranking incident. The reality that Hannah Grace could have been a victim of a prank and the possibility that we could have lost her was heartfelt. Every student with life threatening allergies deserves to feel as safe as they can in their learning environment. I feel that this topic is important and it aligns itself with our Catholic mission, inclusive learning community uniting home, parish and school and rooted in the love of Christ.

Hannah Grace

I started my grade 9 academic year at Senator Oconnor. I learned really quickly that I had to self advocate for myself especially regarding my allergy because there was no communication that was given to me from the staff at Senator Oconnor. I submitted my medical form and that was the really only written acknowledgement of my allergy. There was no discussion about when I am in a portable or a place that is not close to the office or with friends how I access help. There was no emergency plan about how they would help me if I was in trouble. I soon realized that having an allergy in High school was very different then elementary school. As a student I can only protect myself based on the information that is provided by the school. I feel there were a lot of details that were overlooked in my first year and I want to make the system better.

I want to invite students with allergies from different Catholic high schools to participate in a panel discussion on how we can create a better understanding of how allergies affect students in high school. Our mental health is affected when we have a life threatening allergy. We need to find coping mechanisms to help us. We need the opportunity to talk about how things are done regarding allergies and to ensure that we are knowledgeable about our school environment. It would be my hope that we could collaborate together to create a video or a communication of some sort that would become part of the enrollment package for all new students entering Catholic High School.

Thank you for taking the time to listen.



Protocols for Prevalent Medical Conditions

DRAFT June 2018



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- p. Appendix P *Draft* Exchange of Information for Student Transfers
- q. Appendix Q Medical Conditions Staff Training Log
- r. Appendix R- Emergency Evacuation Form



Meta Policy Place Holder



Cross References Place holder:



Overview

Protocol for Students with Medical Conditions

This protocol was created to:

- support students with prevalent medical conditions to fully access school in a safe, accepting, and healthy learning environment that supports well-being
- empower students, as confident and capable learners, to reach their full potential for selfmanagement of their medical condition(s), according to their individually developed Student Plan of Care

The protocol specifically addresses the needs of students with any of the four prevalent medical conditions, outlining procedures for each of the different medical conditions which include:

- a. Anaphylaxis
- b. Asthma
- c. Diabetes
- d. Epilepsy and Seizure Disorders

Students come to school with a variety of needs and medical conditions not outlined in this protocol. As such, this protocol includes a generic template that may be used to support the development of a Student Plan of Care for other unspecified medical conditions not addressed in this protocol.

To address students with concussions, please refer to TCDSB S. 26 Concussion Policy and the Concussion Protocols and Forms found at www.tcdsb.org/Board/Policies/Pages/Concussion-Protocol-Forms.aspx

Outline of Regulations:

- 1. Roles and Responsibilities
- a) Parent/Guardian of Children with Prevalent Medical Condition(s)

As the primary caregivers of their child, parents/guardians are expected to be active participants in supporting the management of their child's medical condition(s) while the child is in school. At a minimum, parents should:

- educate their child about their medical condition(s) with support from their child's health care professional, as needed;
- guide and encourage their child to reach their full potential for self-management and self-advocacy;
- inform the school of their child's medical condition(s) and co-create the Student Plan of Care for their child with the principal or the principal's designate;
- communicate changes to the Student Plan of Care, such as changes to the status of their child's medical condition(s) or changes to their child's ability to manage the medical condition(s), to the principal or the principal's designate;

- confirm annually to the principal or the principal's designate that their child's medical status is unchanged;
- initiate and participate in meetings to review their child's Student Plan of Care;
- supply their child and/or the school with sufficient quantities of medication and supplies
 in their original, clearly labelled containers, as directed by a health care professional and
 as outlined in the Student Plan of Care, and track the expiration dates of all medications
 and supplies provided;
- seek medical advice from a medical doctor, nurse practitioner, or pharmacist, where appropriate;
- complete Consent to Disclose Personal Health Information, Pursuant to the Personal Health Information Protection Act, 2004 (PHIPA) form and/or Request and Consent for the Administration of Oral Medication form, if needed.

b) Student

Depending on their cognitive, emotional, social, and physical stage of development, and their capacity for self-management, students are expected to actively support the development and implementation of their Student Plan of Care. Students should:

- take responsibility for advocating for their personal safety and well-being that is consistent
 with their cognitive, emotional, social, and physical stage of development and their capacity
 for self-management;
- participate in the development of their Student Plan of Care, if appropriate;
- participate in meetings to review their Student Plan of Care, if appropriate;
- carry out daily or routine self-management of their medical condition to their full potential, as described in their Student Plan of Care (e.g., carry their medication and medical supplies; follow school board policies on disposal of medication and medical supplies); set goals on an ongoing basis for self-management of their medical condition, in conjunction with their parent(s) and health care professional(s);
- communicate with their parent(s) and school staff if they are facing challenges related to their medical condition(s) at school;
- wear medical alert identification that they and/or their parent/guardian deem appropriate;
- if possible, inform school staff and/or their peers if a medical incident or a medical emergency occurs.

c) School Staff

School staff should follow TCDSB's policies and the provisions in their collective agreements related to supporting students with prevalent medical conditions in schools. School staff should, for example:

- review the contents of the Student Plan of Care for any student with whom they have direct contact;
- participate in training, during the instructional day, on prevalent medical conditions, at a minimum bi-annually, as required by the school board;

- share information on a student's signs and symptoms with other students, as outlined in the Student Plan of Care and authorized by the parent and/or by the student if the student is 18 years of age or older
- follow school board strategies that reduce the risk of student exposure to triggers or causative agents in classrooms, common school areas, and extracurricular activities, in accordance with the student's Student Plan of Care;
- support a student's daily or routine management, and respond to medical incidents and 911 medical emergencies that occur during school, as outlined in board policies and procedures
- support inclusion by allowing students with prevalent medical conditions to perform daily or routine management activities in a school location (e.g., classroom), as outlined in their Student Plan of Care, while being aware of confidentiality and the dignity of the student;
- enable students with prevalent medical conditions to participate in school to their full potential, as outlined in their Student Plan of Care.

d) Principal

In addition to the responsibilities outlined above under "School Staff", the principal should:

- clearly communicate to parents and appropriate staff the process for parents to notify the school of their child's medical condition(s), as well as the expectation for parents to cocreate, review, and update a Student Plan of Care with the principal or the principal's designate.
- This process should be communicated to parents, at a minimum:
 - during the time of registration
 - each year during the first week of school
 - o when a child is diagnosed and/or returns to school following a diagnosis;
- co-create, review, or update the Student Plan of Care for a student with a prevalent medical condition with the parent(s), in consultation with school staff (as appropriate) and with the student (as appropriate);
- maintain a file with the Student Plan of Care and supporting documentation for each student with a prevalent medical condition;
- provide relevant information from the student's Student Plan of Care to school staff and
 others who are identified in the Student Plan of Care (e.g., food service providers,
 transportation providers, volunteers, occasional staff who will be in direct contact with the
 student), including any revisions that are made to the plan;
- communicate with parent(s) in medical emergencies, as outlined in the Student Plan of Care;
- encourage the identification of staff who can support the daily or routine management needs of students in the school with prevalent medical conditions, while honouring the provisions within their collective agreements;
- ensure that all required forms are completed and signed by the appropriate persons;
- ensure that all Student Plans of Care are posted in a non-public area of the school (e.g., school office and/or staff room) and that a copy is kept in the teacher's day book (or alternative) and/or in supply binders for both teacher and other staff working with the student.

e) Toronto Catholic District School Board

School Boards are expected to communicate, on an annual basis, their policies on supporting students with prevalent medical conditions to parents, school board staff, and others in the school community who are in direct contact with students (e.g., food service providers, transportation providers, volunteers).

TCDSB will make the Medical Conditions Policy and the Student Plan of Care templates available on its public website.

The TCDSB will:

- provide training and resources on prevalent medical conditions on an annual basis;
- develop strategies that reduce the risk of student exposure to triggers or causative agents in classrooms and common school areas;
- develop expectations for schools to support the safe storage and disposal of medication and medical supplies;
- communicate expectations with respect to storage and disposal of medication and medical supplies to schools and support schools in the implementation of the expectations;
- communicate to staff the expectation that students are allowed to carry their medication and supplies to support the management of their medical condition, as outlined in their Student Plan of Care;
- consider relevant board policies as they relate to prevalent medical conditions when entering into contracts with transportation, food service, and other providers.

2. Student Plans of Care

A Student Plan of Care form contains individualized information on a student with a prevalent medical condition(s). TCDSB Student Plans of Care are accessible on the Special Services Forms Site for staff to create a plan. The Student Plan of Care templates for each prevalent medical condition will also be available on the public website for community access.

The Student Plan of Care includes the following elements:

- preventative strategies to be undertaken by the school to reduce the risk of medical incidents and exposure to triggers or causative agents in classrooms and common school areas
- identification of school staff who will have access to the Student Plan of Care
- identification of routine or daily management activities that will be performed by the student, parent/guardian, or staff volunteer(s), as outlined in the TCDSB policy, or by an individual authorized by the parent/guardian
- a copy of notes and instructions from the student's health care professional, where applicable
- information on daily or routine management accommodation needs of the student (e.g., space, access to food) (where possible, a student should not be excluded from the classroom during daily or routine management activities, unless the student or the parent(s) indicate they prefer exclusion)

- information on how to support or accommodate the student to enable participation to their full potential in all school and school board activities (e.g., field trips, overnight excursions, board-sponsored sporting events)
- identification of symptoms (emergency and other) and response
- · emergency contact information for the student
- clear information on the school board's emergency policy and procedures
- details related to storage and disposal of the student's prescribed medication(s) and medical supplies, such as:
 - parental permission for the student to carry medication and/or medical supplies
 - location of spare medication and supplies stored in the school, where applicable
 - information on the safe disposal of medication and medical supplies
- requirements for communication between the parent/guardian and the principal or the principal's designate and/or school staff, as appropriate, including format and frequency
- parental consent to share information on signs and symptoms with other students (or student consent when 16 years of age or older, where appropriate)

The Student Plan of Care for a student with a prevalent medical condition should be co-created, reviewed, and/or updated by the parent(s) in consultation with the principal or the principal's designate, designated staff (as appropriate) and the student (as appropriate), during the **first 30 school days of every school year** and, as appropriate, during the school year (e.g., when a student has been diagnosed with a prevalent medical condition).

For secondary schools that have semesters/quads, the Student Plan of Care should be reviewed/updated within **30 days of the start of the term**, as appropriate.

Parent/Guardian have the authority to designate who is provided access to the Student Plan of Care. With authorization from the parents/(student consent if 16 years of age or older), the principal or the principal's designate should share the Student Plan of Care with school staff who are in direct contact with the student with prevalent medical conditions and, as appropriate, others who are in direct contact with students with prevalent medical conditions (e.g., food service providers, transportation providers, volunteers).

3. Facilitating and Supporting Daily or Routine Management

TCDSB encourages supporting the inclusion of students with prevalent medical conditions within classrooms, as appropriate, and the opportunity to manage their daily medical routines in a school location as outlined in their Student Plan of Care.

4. Emergency Response

The Student Plan of Care will include the emergency response pertinent to the student's prevalent medical condition(s) that school staff will follow.

Schools will review and implement the medical emergency procedures that are in line with evidence-based materials that have been developed by health professionals and education partners.

Please refer to FACT Sheets in the appendices for more information:

Appendix K – Anaphylaxis Fact Sheet

Appendix L – Asthma Fact Sheet

Appendix M – Diabetes Fact Sheet

Appendix N – Epilepsy and Seizure Disorders Fact Sheet

5. Raising Awareness of Board Policy and Resources

Awareness of Prevalent Medical Conditions are raised at system, school and classroom level through a variety of strategies.

At a system level, development of the awareness of medical conditions may include but is not limited to:

- Providing information of prevalent medical conditions on the TCDSB web portal
- Bi-annual communication with administrators or as needed
- Training for all staff
- Sharing of legislation (e.g. Sabrina's law for Anaphylaxis; Ryan's law for Asthma; PPM 161 Prevalent Medical Conditions)

School level awareness can include but is not limited to:

- Communication through newsletters
- Staff meetings
- Student assemblies
- Catholic School Parent Council (CSPC) meetings
- Partnerships with Toronto Public Health or other organizations, as appropriate

Classroom awareness can be developed through the following:

- Classroom presentations
- Accessing evidence-based resources
- Poster Campaigns, Bulletin Boards
- Awareness Day (e.g., Epilepsy- Purple Day)

The TCDSB ensures awareness of the policies on prevalent medical conditions through a variety of communication methods. This protocol will assist to inform school staff on evidence-based resources that provide information on various aspects of prevalent medical conditions, including triggers or causative agents, signs and symptoms characteristic of medical incidents and of medical emergencies, and TCDSB emergency procedures. Many of the resources included in this document have been developed by health and education partners, and are available through the Ministry of Education in Ontario's Prevalent Medical Conditions web portal.

http://www.edu.gov.on.ca/eng/healthyschools/medicalconditions.html http://www.edugains.ca/newsite/SafeHealthySchools/medical-conditions/Prevalent-Medical-Conditions.html

Schools, also raise awareness of prevalent medical conditions that affect students. They can do so, for example, through curriculum content in classroom instruction, other related learning experiences, and classroom leadership opportunities.

Awareness is especially important at times of transition (e.g., the move to a new school, the move from elementary to secondary school), when students have to face social, physiological, and environmental changes. The TCDSB makes appropriate resources available to occasional staff and service providers, such as food service and transportation providers.

6. Training Sessions

The TCDSB policy includes strategies for providing training related to prevalent medical conditions, at a **minimum** bi-annually, for school staff who have direct contact with students with medical condition(s). Particular consideration is given at the school level to the training needs of occasional staff. **Training should take place within the student's first 30 days of school**, where possible, to ensure the safety and well-being of the student, and should be reviewed as appropriate.

The scope of training should include the following:

- strategies for preventing risk of student exposure to triggers and causative agents
- strategies for supporting inclusion and participation in school
- recognition of symptoms of a medical incident and a medical emergency
- information on school staff supports, in accordance with board policy
- medical incident response and medical emergency response
- documentation procedures

TCDSB, in consultation with teachers' federations, principals' associations, and education workers' unions, will determine the scope of training required to support implementation of their policies, as well as the mode of delivery of the training and any privacy implications that may arise. The scope of training should be consistent with expected duties of school board staff, as outlined in school board policy.

To support school board training needs, evidence-based materials are available online through the ministry's Prevalent Medical Conditions web portal.

http://www.edu.gov.on.ca/eng/healthyschools/medicalconditions.html

7. Safety Considerations

TCDSB Schools will allow the student to carry their medication(s) (including controlled substances) and supplies, as outlined in their Student Plan of Care.

Schools will support the storage (according to the item's recommended storage conditions) and safe disposal of medication and medical supplies in an appropriate place in the school. Schools will develop a response protocol that considers the needs of students with prevalent medical conditions in the event of a school emergency (e.g., bomb threat, evacuation, fire, "hold and secure", lockdown).

Additionally, schools will ensure that appropriate procedures are in place and recorded in the Student's Plan of Care for activities that take place off school property (e.g., field trip, sporting

event). These procedures will be shared with any staff that will be supervising the student outside of school property regardless if they are permanent or occasional staff.

Safe storage includes the recommended storage condition(s) for medication and medical supplies. Part of the purpose of safe storage is to enable students to have ready access to their medication and medical supplies when they are not carrying the medication and supplies with them. Safe storage should also include storage considerations when the student is attending board-sponsored activities and travelling to and from such activities. Schools may be required to obtain appropriate supplies to support safe disposal of medication and medical supplies as appropriate when required.

In accordance with the requirement of the Child and Family Services Act, 1990, where board employees have reason to believe that a child may be in need of protection, board employees must call the Catholic Children's Aid Society and file a formal report.

8. Privacy and Confidentiality

The TCDSB follows the regulations for collection of personal medical information as outlined in the Personal Health Information Protection Act (PHIPA), 2004 and Municipal Freedom of Information and Protection of Privacy Act.

TCDSB obtains parental consent in the Student Plan of Care prior to sharing student health information with school staff or other students. *Parents and school staff should be informed of the measures to protect the confidentiality of students' medical records and information.*

9. Reporting

Subject to relevant privacy legislation, school boards should develop a process to collect data regularly, including, but not limited to, data on the number of students with prevalent medical conditions at their schools, and should monitor the number of occurrences of medical incidents and medical emergencies, as well as the circumstances surrounding these events. School boards should use this data as part of their cyclical policy reviews.

Under the authority of paragraph 27.1 of subsection 8(1) of the Education Act, school boards will be required to report to the Minister of Education upon implementation and, upon request thereafter, on their activities to achieve the expectations outlined in this memorandum.

10. Liability

In 2001, the Ontario government passed the Good Samaritan Act to protect individuals from liability with respect to voluntary emergency medical or first-aid services. Subsections 2(1) and (2) of this act state the following with regard to individuals:

2. (1) Despite the rules of common law, a person described in subsection (2) who voluntarily and without reasonable expectation of compensation or reward provides the services described in that subsection is not liable for damages that result from the person's negligence in acting or failing to act while providing the services, unless it is established that the damages were caused by the gross negligence of the person.

- (2) Subsection (1) applies to,
- ... (b) an individual ... who provides emergency first aid assistance to a person who is ill, injured or unconscious as a result of an accident or other emergency, if the individual provides the assistance at the immediate scene of the accident or emergency.

As well, Sabrina's Law and Ryan's Law each include provisions limiting the liability of individuals who respond to an emergency relating to anaphylaxis or asthma, respectively, as cited below.

Subsection 3(4) of Sabrina's Law states:

No action for damages shall be instituted respecting any act done in good faith or for any neglect or default in good faith in response to an anaphylactic reaction in accordance with this Act, unless the damages are the result of an employee's gross negligence.

Subsection 4(4) of Ryan's Law states:

No action or other proceeding for damages shall be commenced against an employee for an act or omission done or omitted by the employee in good faith in the execution or intended execution of any duty or power under this Act.

Definitions

A **Medical incident** is a circumstance that requires an immediate response and monitoring, since the incident may progress to an emergency requiring contact with Emergency Medical Services.

Health Care professional refers to a member of a College under the Regulated Health Professions Act, 1991 (e.g., medical doctor, nurse practitioner, registered nurse, pharmacist).

School staff refers to all school staff, including occasional staff.

"Self-management" of medical conditions can be understood to exist along a continuum where students' cognitive, emotional, social, and physical capacity and stage of development are determinants of their ability to confidently and independently manage their medical condition(s). The students' journey to reach their full potential along the self-management continuum is not linear and can require varying levels of support over time. A student's capacity for self-management may be compromised during certain medical incidents, and additional support will be required. As a student's needs change, the Student Plan of Care would need to be adjusted accordingly.

A **Student Plan of Care** is a form that contains individualized information on a student with a prevalent medical condition.

Safe storage includes the recommended storage condition(s) for medication and medical supplies. Part of the purpose of safe storage is to enable students to have ready access to their medication and medical supplies when they are not carrying the medication and supplies with them. Safe storage should also include storage considerations when the student is attending board-sponsored activities and travelling to and from such activities.

A **controlled substance** is a drug or narcotic, as set out under the federal Controlled Drugs and Substances A.

ANAPHYLAXIS

As per Sabrina's Law, if an employee has reason to believe that a pupil is experiencing an anaphylactic reaction, the employee may administer an epinephrine auto-injector or other medication prescribed to the pupil for the treatment of an anaphylactic reaction. The parent/guardian will be informed by the school of such an emergency treatment as soon as possible after the treatment is administered and steps taken within the Student's Plan of Care for Anaphylaxis.

TCDSB and all its employees play an important role in providing a safe environment for anaphylactic students. It is essential that all members of the school community are aware of issues facing students with anaphylaxis and develop strategies to minimize the risk of an allergic reaction, and are equipped to respond appropriately in the event of an emergency in all our schools.

These procedures need to be flexible enough to respond to the age and cognitive ability of the student (e.g. significant differences in issues faced by elementary and secondary schools), the nature and prevalence of the allergen, and the organizational and physical properties of the school itself.

While the school community recognizes the right of the parent/guardian to feed their child whatever they choose, it must assert that the right to life and safety is greater, and provide for the safety of anaphylactic children accordingly.

"Anaphylaxis" is a severe, life-threatening allergic reaction. It can be triggered by certain types of food (e.g. peanuts and shellfish), insect stings, latex, medicine, exercise and sometimes, unknown causes. It requires appropriate avoidance strategies and immediate response in the event of an emergency.

Anaphylaxis can occur within minutes or hours after initial contact. It is systemic in nature (involving one or more body systems, i.e., the skin – hives and swelling, respiratory – hoarseness, wheezing, difficulty breathing, rapid drop in blood pressure, leading to unconsciousness); it is life threatening and if left untreated or under treated, can result in death.

Possible Symptoms of Anaphylaxis

One or more of these symptoms may occur within minutes or several hours after exposure to an allergy trigger:

BODY SYSTEM	SYMPTOMS
SKIN	hives (red itchy welts or swelling on skin), itching, warmth, redness
EYES	swollen, itchy, running, or bloodshot, or with mucous
NOSE	nasal congestion or hay fever-like symptoms, running, itchy, stuffy, sneezing
THROAT	sore, swollen
STOMACH/DIGESTIVE SYSTEM	vomiting, cramps, bloating, nausea, diarrhea
URINARY SYSTEM	incontinence
RESPIRATORY SYSTEM	difficulty breathing, severe asthmatic reaction, coughing, wheezing, shortness of breath, chest pain or tightness, throat tightness, trouble swallowing, hoarse
CIRCULATORY SYSTEM	drop in blood pressure, unconsciousness, dizziness/lightheadedness, pale/blue colour, weak pulse, fainting, shock, loss of consciousness
NEUROLOGICAL	anxiety, headache
OTHER	disorientation, sense of foreboding, fear or apprehension, sense of doom; uterine cramps

1. Procedures for Staff

The following procedure is to be followed for students with anaphylaxis:

- a) As part of the online application for registration (SOAR) to a TCDSB school, the parent/guardian will be asked to identify allergies or medical conditions.
- b) The principal (or designate) will ask that upon registration at the school for the parent/guardian to inform the school of their child's allergies and clarify if any of these are life threatening.
- c) The principal will then ensure that the parent/guardian is asked to supply information on life- threatening allergies on the **Request and Consent for the Administration of Injection of Medication in an Emergency** form.
- d) The principal, in consultation with the parent/guardian will develop a **Student Plan of Care for Anaphylaxis** form.

- e) The principal will ensure parent/guardian is provided the contact information for Transportation Services to ensure that pertinent school information is shared if/when the student is transported.
- f) The principal will require that students with anaphylaxis, for whom epinephrine autoinjectors are prescribed, carry them on their person at all times, and will inform parent/guardian and student of this requirement.
- g) The principal will obtain a back-up epinephrine auto-injector for emergency use in the school that is in a readily accessible location that is unlocked, and is shared with staff.
- h) The emergency administration of epinephrine by way of auto-injector is permitted, in the absence of completion of required consent if the principal or another employee has reasonable grounds to believe that the student is experiencing an anaphylactic reaction and is at an immediate risk of harm.
- i) The principal will review the procedure on safety of students with Anaphylaxis with entire staff a **minimum** of two times each year (at the beginning of each term or at the beginning of each semester in semestered secondary schools) and, throughout the school year as required.
- j) The principal will ensure that staff responsible for the welfare of the students (i.e., teachers, custodians, administrative assistants, educational assistants, long term occasional staff, etc.) are aware of anaphylactic students in their care and have received appropriate training in prevention, symptom recognition, and the use of epinephrine.
- k) All staff will be expected to participate in annual training. This can occur as part of a staff meeting or individually. The principal will maintain a record of training sessions in a binder in the school labelled *Medical Conditions*, which all staff will be expected to sign annually, once they have completed training for that year. [In secondary schools, department heads may assist with ensuring training records are completed for their department and submitted to the principal.]
- I) Training on anaphylaxis for all staff is available in an e-learning format on the Ministry of Education website at the following link:
 - http://www.eworkshop.on.ca/edu/anaphylaxis/sc00.cfm?L=1
- m) Further information can obtained from the Toronto Public Health.
- n) The principal will ensure that all occasional teachers and support staff are aware of the **Student Plan of Care for Anaphylaxis** including the listed emergency medical procedures for any students with anaphylaxis in their assigned classroom and that they are asked to review these prior to student arrival.
- o) The principal will ensure that each **Student Plan of Care for Anaphylaxis**, is posted in a non-public area of the school (i.e. staff room and/or school office, etc.) and that a copy is kept in the teacher's day book and/or in supply binders for any staff (teacher or

- support staff) working directly with the student in all school settings.
- p) The principal will ensure that staff are made aware of any students that may have a need for emergency medical intervention. (i.e.: Students who have a **Student Plan of Care for Anaphylaxis** posted in a non-public place).
- q) The principal will maintain a file for each student with anaphylaxis including all pertinent forms in the main office.
- r) In the case of an anaphylaxis occurrence, an Incident of anaphylactic reaction is documented and reported on the Ontario School Boards Insurance Exchange (OSBIE) Incident Report Form available on the OSBIE website (Appendix C). http://osbie.on.ca/english/index.cfm.
- s) Excursions: Please refer to the Board's Excursion Handbook for specific recommendations regarding students with anaphylaxis while on excursions (pages 53-55 Section 7.13 and 7.14 "Anaphylaxis-The Life-Threatening Allergic Reaction and Emergency Procedures for Students without a Medical Diagnosis of Anaphylaxis and Prescribed Medication). It is advisable to have a parent or other adult relative of an anaphylactic student accompany all class trips where possible. Parents shall be informed of excursions as early as possible in order to research excursion sights for allergic risks.

A minimum of two (2) EpiPens®/Allerjects® must accompany the student on all excursions.

2. Student Plan of Care for Anaphylaxis

The **Student Plan of Care for Anaphylaxis form** shall contain the following:

- 1) Details regarding the type of allergy, monitoring and avoidance strategies, symptom recognition and appropriate treatment, which will be provided to the school for staff who are in direct contact with the student on a regular basis.
- 2) Emergency contact information, and a copy of the prescription and/or instructions from the student's physician and consent for the administration of epinephrine should it be required as outlined in the Request and Consent for the Administration of Injection of Medication in an Emergency form.
- 3) Information about storage of epinephrine auto-injectors, for which the parents/guardians will be responsible for supplying and ensuring that they remain in good working condition and within any expiration dates (Parents are encouraged to provide two single dose epinephrine auto-injectors or one dual-dose epinephrine auto-injector).

3. Risk management strategies for students with anaphylaxis

a) Schools are required to develop strategies to promote an allergen aware environment that reduce the risk of exposure to anaphylactic causative agents in a manner which preserves normal peer interactions for the student who is subject to anaphylactic

reaction. At the same time, such strategies must strive to avoid placing unreasonable restrictions on the normal activities of other children in the school.

- b) As an example, the proactive strategies to support developing an awareness of allergens among students may include but is not limited to the following:
 - 1. **Opening School Assembly** when speaking with students about Safety such as fire drills etc. include reminders about medical safety such as food allergies;
 - School Agenda ensure that a section on food allergies is included. Include description of reaction and how to help prevent incidents among peers;
 - 3. **Healthy and Active Living** addressed as part of the Health and Physical Education (HPE) curriculum;
 - 4. **Poster Campaign**: Put up posters around the school reminding the students of food allergies;
 - 5. Bulletin Board Awareness of Medical Conditions;
 - 6. **Toronto Public Health Nurse** schools may invite the TPH nurse to present on Food Allergies;
 - 7. Communication about Food Allergies/Keeping Our Students Safe should be sent home as part of a **newsletter**;
 - 8. **School Website** reminders can be posted.
- c) A communication plan must be put into place to share information on life-threatening allergies with parents, students and the staff. Parents should be encouraged to support the student who is subject to an anaphylactic reaction by not sending foods to school which could cause an anaphylactic reaction.
- d) Superintendent of Special Services to send a semi-annual email to administrators in schools as a reminder.
- e) Some useful references include:
 - 1) www.cdnsba.org "Anaphylaxis: A Handbook for School Boards";
 - 2) https://thefoodallergychronicles.wordpress.com/2013/11/11/allerject-educational-materials-for-all-ontario-school-and-public-health-units/
 - 3) <u>www.allergyfoundation.ca</u> brochures—"Anaphylaxis in Schools"; (see links in Appendix B)
 - 4) Sample newsletter items and parent letters can be found in the "Anaphylaxis in Schools & Other Settings" resource kit that was distributed to all schools by the Ministry of Education in 2006, revised August 2014, 3rd Edition. This kit also contains auto-injector training devices, awareness/instructional posters, videos and presentations.
 - 5) Anaphylaxis Resource Kit Website: www.eworkshop.on.ca/allergies
 - 6) For relevant videos, Visit the Allergy Food Canada site at: http://www.youtube.com/anaphylaxiscanada

- 7) 10 tips for Managing food allergy in schools https://www.youtube.com/watch?v=FzxUd-Ey8Xo
- 8) Food Allergy Canada has an education resource at www.allergyaware.ca that offers a course that may be accessed annually.
- Information on how to use an EpiPen and practice units are available at www.epipen.ca
- 10) Anaphylaxis in Schools and Other Settings 3rd Edition. http://foodallergycanada.ca/anaphylaxis-in-schools-and-other-settings/english/mobile/index.html

4. Parent Responsibilities

- a. Parents of students who have been diagnosed with Anaphylaxis must:
 - Ensure that the student with anaphylaxis is provided with two epinephrine auto-injectors or one dual dose epinephrine auto-injector in good working condition and within any expiration dates. It is the parent's/guardian's responsibility to ensure that epinephrine auto-injectors are always within expiration dates. Certain school excursions may require the parent to provide more than one injector for the trip.
 - Exchange information yearly with the principal about the student's medical condition including medical forms outlined in this manual. This will enable the principal to communicate and plan effectively with the school staff in providing for the safety and welfare of the student.
 - Provide proprietary medication as prescribed by a physician. This means that the
 medication can only be used for the student named in the prescription. Failure to
 provide this medication can result in the removal of the student from the school
 until the medication is available at the school.

5. Anaphylaxis in the workplace

Employees must also have strategies to stay safe and are encouraged to:

- a) Inform their principal or supervisor about their allergies and where to find their epinephrine auto-injectors. As they may require assistance during an emergency, they are advised to teach other colleagues how to recognize symptoms of anaphylaxis and proper use of an auto-injector.
- b) Contact the Human Resources Sick Leave and Disability department with the Medical Information when they require an accommodation for allergies. The principal or supervisor will participate in the development of the employee's accommodation and safety plan.
- 6. Forms used to document student needs with respect to Anaphylaxis are the following:
 - a) Request and Consent forms for the Administration of Injection of Medication in an Emergency form (Appendix C)
 - b) Student Plan of Care for Anaphylaxis form (Appendix F)

c) Emergency Allergy form- EpiPen Only (Appendix B)

Definitions related to Anaphylaxis:

Anaphylaxis is a serious allergic reaction that is rapid in onset and may cause death. Anaphylaxis, the medical term for "allergic shock" or "generalized reaction", can be rapid and deadly. It can develop within seconds of exposure, beginning with itching, hives or swelling of the lips, tongue and face. Within minutes, the throat may begin to close, choking off breathing and leading to death.

Allergens are any substance or condition that can bring on an allergic reaction leading to a severe, life- threatening, allergic reaction know as anaphylaxis.

Anaphylactic reaction can develop within seconds to minutes of exposure or may be delayed for several hours. Delayed reactions can be extremely dangerous because the initial symptoms could be mild, but serious symptoms can occur several hours later.

Epinephrine is the drug form of a hormone (adrenaline) that the body produces naturally and is the treatment or drug of choice to treat anaphylaxis. This treatment is life-saving.

ASTHMA

In accordance with *Ryan's Law – Ensuring Asthma Friendly Schools – 2015*, TCDSB has established a procedure for students diagnosed with asthma. The safety of students with a medical condition such as asthma is a shared responsibility of the board, school, family, health care provider and community partners.

TCDSB employees play an important role in providing a safe environment for students with asthma. It is essential that all members of the school community are aware of the issues facing students with asthma and develop strategies that reduce the risk of exposure to asthma triggers in classrooms and common school areas, and are equipped to respond appropriately in the event of an emergency.

1. Procedures for Staff:

The following steps are followed when supporting students with asthma:

- a) As part of the online application for registration (SOAR) to a TCDSB school, the parent/guardian will be asked to identify allergies or medical conditions, including asthma.
- b) The principal (or designate) will ask that upon registration at the school the parent/guardian will inform the school if their child has any medical conditions including asthma.
- c) The principal will then ensure that the parent/guardian is asked to supply information on any medical conditions on the Request and Consent for the Administration of Oral Medication form.
- d) The principal, in consultation with the parent/guardian will develop a **Student Plan of Care for Asthma** form.
- e) The parent/guardian will ensure that the student with asthma is provided with necessary medication (reliever inhalers) that are in good working condition and within any expiration dates. Certain school excursions may require the parent to provide more than one reliever inhaler. Please refer to the **Board's Excursion Handbook** for specific recommendations regarding students with asthma.
- f) The principal will ensure that all students have easy access to their prescribed reliever inhaler medication.

- g) The principal will ensure that asthma reliever inhalers are kept in a readily accessible place that is **not** locked. The **Student Plan of Care for Asthma** will include signed permission, if the student is under 16 years old, on whether he/she has permission from the parent/guardian to carry his or her asthma medication.
- h) The principal will ensure parent/guardian is provided the contact(s) information for Transportation Services to ensure that pertinent school information is shared if/when the student is transported.
- i) The emergency administration of reliever medication is permitted with the consent of the parent/guardian for students under 16 or if completion of required consent is not yet available and the principal or another <u>employee has reason to believe that</u> the student is experiencing an asthma attack and is at an immediate risk of harm.
- j) The principal will review the procedure on safety of students with asthma with the entire staff each year in September and throughout the school year when required. The principal will complete the Record of Training Sessions form and keep a record of this training in a binder labelled Medical Conditions.
- k) The principal will ensure that staff responsible for the welfare of the students (teachers, long term occasional staff, custodians, administrative, educational assistants, lunch room monitors, child and youth workers, secretary etc.) are aware of students with asthma in their care and have received appropriate training in prevention, symptom recognition, and the use of an asthma reliever inhaler.
 - 1) Training on asthma for all staff is available in an e-learning format on the Ministry of Education website at the following link:
 - http://www.edu.gov.on.ca/eng/healthyschools/anaphylaxis.html
 - 2) Reference the Ophea guide "Creating Asthma Friendly Schools" www.asthmainschools.com
 - 3) Obtain support from Toronto Public Health.
- The principal will ensure that all occasional teachers and support staff review as appropriate, each Student Plan of Care for Asthma form for any students they will be supporting that have asthma.
- m) The principal will ensure **Student Plan of Care for Asthma** form is posted in a non-public area of the school (i.e. staff room and/or school office) and a copy is kept in the Teacher's Day Book (or alternate) and/or in supply binders for all staff working with the student.

- n) The principal will maintain a file for each student with asthma including all pertinent forms.
- o) The **Student Plan of Care for Asthma** shall contain the following:
 - Details regarding the asthma condition, monitoring and avoidance strategies, symptom recognition and appropriate treatment, which will be provided to school and transportation personnel who are in direct contact with the student on a regular basis;
 - 2) An emergency contact information;
 - 3) A copy of the prescription and instructions from the student's physician;
 - 4) Information about storage of asthma reliever inhaler medications, for which the parents/guardians will be responsible for supplying and ensuring that they remain in good working condition and within any expiration dates (Parents are encouraged to provide additional reliever inhalers);
 - 5) Confirmation of the plan to involve emergency services by calling 911 should an asthma attack be deemed an emergency.
- p) Excursions: Please refer to the Board's Excursion Handbook. It is advisable to have a parent or other adult relative of a student with asthma accompany all class trips where possible. Parents shall be informed of excursions as early as possible in order to research excursion sights for allergic risks.
- 2. Risk Management Strategies for Students with Asthma
 - a. Schools are required to develop strategies that reduce the risk of exposure to asthma triggers in the classrooms and common school areas.
 - b. As an example, encourage frequent hand washing to prevent the spread of viral infections, use non-toxic cleaning products, schedule building repairs and cleaning when students and staff are least likely to be exposed and uphold the Smoke-Free Ontario Act by making sure that students, staff and visitors do not smoke on school property.
 - c. A Student Plan of Care must be put into place and information on life-threatening asthma conditions is to be shared with parent/guardian, student and the staff.
 - 1) Asthma resources for schools and educators are available at www.ophea.net.
 - 2) A copy of the OPHEA guide "Creating Asthma Friendly Schools" is available electronically to schoolsl as a resource.
 - 3) Free asthma resources are available to order from the Ontario Lung Association at www.on.lung.ca and from Ophea at www.asthmainschools.com.

3. Asthma in the Workplace

Employees must also have strategies to stay safe and are encouraged to:

- a. Tell their principal or supervisor about their asthma and where to find their reliever inhaler medication. As they may require assistance during an emergency, they are advised to teach other colleagues how to recognize symptoms of asthma and use a reliever inhaler properly.
- b. Contact the Human Resources Sick Leave and Disability department with the appropriate medical information when an accommodation is required for asthma.
- c. The principal or supervisor will participate in the development of the employee's accommodation and safety plan.

4. Forms for Asthma

Forms used to document student needs with respect to Asthma are the following:

- a. Request and Consent for the Administration of Oral Medication form (Appendix A)
- b. Student Plan of Care for Asthma form (Appendix G)

Definitions

What is Asthma?

According to the Ontario Lung Association, asthma is a very common chronic (long-term) lung disease that can make it hard to breathe.

People with asthma have sensitive airways that react to triggers. There are many different types of triggers for example poor air quality, mold, dust, pollen, viral infections, animals, smoke and cold air. Symptoms of asthma are variable and can include coughing, wheezing, difficulty breathing, shortness of breath and chest tightness. The symptoms can range from mild to severe and sometimes could be life threatening.

For the purposes of this document, the following words have the following definitions:

Causes/Triggers can be considered in two categories. **Common allergens** include molds, dust mites, animals and pollen. **Common irritants** include tobacco smoke, extremes in weather, strong odours (i.e., scented products, cleaning products, art supplies, paint fumes), viral infections (i.e., colds and flu, physical activity, stress, air pollution)

Emergency Medication

"Emergency Medication" refers to medication that is administered by a staff member to a student at the time of an asthma exacerbation - for example - reliever inhaler or stand-by-medication.

Medication

"Medication" refers to medications that are prescribed by a health care provider and, by necessity, may be administered to a student, or taken by the student during school hours or school related activities.

Immunity

The Act to Protect Pupils with Asthma states that "No action or other proceeding for damages shall be commenced against an employee for an act or omission done or omitted by the employee in good faith in the execution or intended execution of any duty or power under this Act."

Bill 20 Ryan's Law (Ensuring Asthma Friendly Schools), 2015 is legislation now in place to help ensure that students with asthma have a safe school environment where they can learn, play and grow. Requirements include developing an asthma procedure for school boards, developing individual student asthma management plans which principals can use for each student with asthma and provision for training sessions for teachers and other staff.

DIABETES

The ultimate responsibility for diabetes management rests with the family and the child. However, managing diabetes is a full-time job for the family and student with diabetes. It is important that the people who care for children with diabetes understand their unique needs.

School-age students with diabetes most often have Type 1 diabetes and require insulin by injection or by an insulin pump. Type 1 diabetes mellitus is a condition in which the pancreas is unable to make insulin. Without insulin, the body cannot transform glucose (sugar) into energy for its various functions. To compensate for the lack of natural insulin, children require must take insulin to every time they eat. Children with diabetes have to constantly manage their blood sugar by balance food, exercise and insulin to achieve their ideal safe and health target range. This consent balancing act can cause the blood sugars to go high or very low.

School-age students with diabetes spend 30-35 hours per week in the school setting. This represents more than half of their waking weekday hours. It is therefore vital that school personnel, parent/guardian and students are clear and confident in their roles and responsibilities during school time.

Diabetes is an unstable medical condition and care is unique for each individual student. It is important that the needs of each student with diabetes be recognized and accommodated through careful planning with all parties. Completion and regular updating of the Student Plan of Care for Diabetes form is essential to provide school staff with accurate information about how to manage diabetes for individual students and how to respond to incidences that may occur due to diabetes, which can place the student's health and safety at risk.

The goal for all students with diabetes is to become as independent as possible depending on their cognitive, emotional, social and physical stage of development. The students should carry out their daily self-management to their full potential as outlined in their Student Plan of Care.

In an emergency situation the student will always require adult supervision and assistance.

The role of the school is to provide support for the student as he/she moves from dependence to independence of care and to encourage the development of a supportive environment for making such a transition. As part of that role, it is imperative for staff to recognize that even students who are independent in their daily diabetes management may need help sometimes, especially when experiencing low or high blood sugar.

Additionally staff should be aware that any time a student's blood sugar is outside the target range (low or high) the student's mood, behaviour, learning and participation may be affected; therefore students who experience low or high blood sugar during a test/exam may require accommodations.

1. Procedures for staff

The following steps are followed when supporting students with diabetes:

- a) As part of the online application for registration (SOAR) to a TCDSB school, the parent/guardian will be asked to identify allergies or medical conditions, including diabetes.
- b) The principal (or designate) will ask that upon registration at the school the parent/guardian will inform the school if their child has any medical conditions including diabetes.
- c) The principal will then ensure that the parent/guardian is asked to supply information on any medical conditions on the Request and Consent for the Administration of Oral Medication Form.
- d) The principal will ensure that upon registration, parent/guardian is asked to supply information on the support required for diabetes. In such circumstances parent/guardian will be given Request and Consent for the Administration of Oral Medication form or the Request and Consent for the Administration of Injection of Medication in an Emergency form, contingent of student's type of Diabetes.
- e) The principal, in consultation with the parent/guardian, will develop an individual Student Plan of Care for Diabetes outlining the medical and emergency plan for the student to assist in managing their diabetes while at school.
- f) The principal will ensure that blood glucose monitoring kits and supplies are kept in an easily accessible location, where the student will be able to within sufficient time, test their blood/or be tested as required. The principal and school community will support inclusion by allowing students with prevalent medical conditions to perform daily or routine management activities in school locations (e.g., classroom, gymnasium, library, on a school bus, at a field trip location) as outlined in their Student Plan of Care.
- g) The principal will designate staff to be responsible for the administration of medication and/or medical procedures, and routine health management associated with the student's diabetic management plan.
- h) The principal or designate will request additional support as required from a Public Health Nurse or other agencies supporting the school community.
- i) The principal will review the procedure on safety of students with diabetes with entire staff each year in September and throughout the school year as required at **minimum** twice a year.

- j) The principal will ensure that staff responsible for the welfare of the students (i.e., teachers, custodians, administrative assistants, educational assistants, long term occasional staff, support staff etc.) are aware of students with diabetes in their care and have been briefed in prevention, symptom recognition, and the provision of emergency medical interventions.
- k) The principal will arrange for training of all staff in general diabetes management when there is a student in the school with diabetes, ensuring that staff including occasional staff have a comprehensive understanding of the Student Plan of Care. Annual awareness training for all staff regarding diabetes early in the school year is a good practice to establish even if students are not identified.
- I) For staff supporting an individual student with their management plan for their diabetes as outlined on Student Plan of Care for Diabetes, specific training for individual needs will need to be arranged through the Public Health Nurse. The principal will arrange training for new staff to the school or if there have been significant changes to the student's diabetic management plan.
- m) The principal will ensure that Student Plan of Care for Diabetes form is posted in a non-public area of the school (i.e. staff room and/or school office) and a copy is kept in the teacher's day book (or alternate) and/or in supply binders for all staff working with the student.
- The principal will ensure that medical information has been communicated to occasional teachers, supply educational assistants, and supply office support staff.
- o) In non-emergency situations, including routine care, students with diabetes or their parents or a third party health care professional that the parent has identified (e.g. diabetic care nurse) will administer insulin injections. The administration of injections to students with diabetes is outside the scope of the duties of education staff. Therefore, injections are not to be administered by staff as outlined in Policy/Program Memorandum No. 81.
- p) In an emergency, follow the Student Plan of Care for Diabetes, or follow 911 emergency procedures as appropriate. Staff are to remain with the student and place them in a side lying position. Do not restrain movements or put anything in his/her mouth. Have a glucagon kit on site for use by Emergency Measures Services (EMS) personnel.
- q) It is within the scope of duties for designated staff to assist with insulin pump management; where necessary and as clearly defined within the Student Plan of Care for Diabetes.
- r) Where routine administration of medication for diabetes management occurs at school, parents will complete;
 - 1) the Request and Consent for the Administration of Injections of Medication in an Emergency (Appendix C)
 - 2) the Student Plan of Care for Diabetes (Appendix G).

- 3) The school will log the administration of medication in the School Record of Medical Services (Appendix D).
- s) In emergency, life-threatening situations, where a student is unresponsive, unconscious, or unable to self-administer the appropriate treatment, the school response shall be a 911 call to Emergency Medical Services (EMS).
- t) Excursions: Please refer to the Board's Excursion Handbook. It is advisable to have a parent or other adult relative of a student with diabetes accompany all class trips where possible. Parents shall be informed of excursions as early as possible in order to research excursion sights for allergic risks.

5. <u>Medical/Emergency Medical Plan for Students with Diabetes</u>

The **Student Plan of Care for Diabetes** shall contain the following:

- a) Details regarding the type of diabetes that the student has, management and monitoring requirements for tracking blood glucose levels and avoidance strategies for low or high levels outside the target range. Hyperglycemic and hypoglycemic symptom recognition and appropriate treatment interventions (e.g. orange juice or glucose tablets kept in accessible location known to student and staff).
- b) Location of the Student Plan of Care for Diabetes, including emergency contact information, and a copy of the prescription and/or instructions from the student's physician (Request and Consent for the Administration of Injections of Medication in an Emergency form) for any medication required to be administered at school. Parents will be responsible for ensuring that any medications are within expiration dates.
- c) Information about storage of insulin if being kept at school for student self-administration or assistance from a health care professional.
- d) Information about glucometer, lancets, test strips and disposal containers for sharps, for which the parents/guardians will be responsible for supplying and ensuring that supplies are within any expiration dates.
- e) Information from parents/guardians or student will need to be included if any required changes from the usual regime during periods of physical activity, sports, or extracurricular activities and provide clear instructions to the school. For example, any changes to insulin doses should be specified.
- f) The plan will need to include clear instructions regarding when physical activity should be restricted based on blood sugar levels being too low. (Note: physical activity is encouraged when it is too high)
- g) Provisions for extra snacks (carbohydrates) will need to be clearly outlined whether this is a daily requirement or for times when blood sugar levels are too low or when student is going to be involved in extra activity.
- h) Confirmation of the plan to involve emergency services through a call to 911 should an emergency arise related to the student's diabetes.

6. Risk Management Strategies for Students with Diabetes

- a) Schools will work to develop strategies that support the daily routine management for a student with diabetes, which includes daily blood glucose monitoring and a schedule of food, insulin and activities. While at school, each student with diabetes must be allowed to:
 - 1) Perform blood glucose (sugar) checks whenever and wherever needed (e.g., classroom, gymnasium, etc). The ages at which students are able to perform self-care tasks are individual and varied. A student's capabilities and willingness to provide self-care should be respected;
 - 2) Treat hypoglycemia with fast-acting sugar;
 - Self-inject insulin when necessary;
 - 4) Eat snacks when necessary;
 - 5) Eat lunch at an appropriate time and have enough time to finish the meal;
 - Have free and unrestricted access to water and the bathroom;
 - 7) Participate fully in physical education (gym class) and other extracurricular activities including field trips
 - 8) Carry blood sugar monitoring supplies and source of fast-acting sugar at all times (including on school bus, field trips, and extracurricular activities), unless otherwise specified by the parent/guardian in the student's Student Plan of Care
- b) Establish a formal communication system with all school staff who come into contact with the student with diabetes. This will include appointing at least one staff member to be a point of contact for the student and parent/guardian. Plan for communicating with parents and the student's medical providers, agree on emergency procedures and list phone numbers required. School staff to notify parent/guardian in advance of any upcoming changes in school routine that may impact the student's daily diabetes management e.g. special events involving food or physical activity, changes to school snack/lunch schedule, etc.
- c) Board procedures for administering medications and handling equipment such as meters and pumps must be followed. (e.g. Board employees are not currently authorized to perform injections of insulin).
- d) Display posters symptoms of hypoglycemia/hyperglycemia in key locations throughout the school (e.g. gymnasium, auditorium, staff room, main office, student's classroom).
- e) The school needs to have a readily available supply of fast-acting glucose (provided by the parent/guardian) for treatment of low blood sugar, stored in multiple locations throughout the school (e.g. student's classroom, gymnasium, main office) Location of supplies of fast-acting glucose should be listed in student's Plan of Care. Notify parent/guardian when supplies running low.
- f) A Student Plan of Care must be put in place for students with type1 and type 2 diabetes. Resources for schools are available at www.diabetesatschool.ca, including

- printable display posters and short animated training videos. Additional information on diabetes is also available from Diabetes Canada at https://www.diabetes.ca/.
- g) Health care providers can be a source for posters that identify symptoms of hypoglycemia/hyperglycemia. They can act as a resource to provide or arrange diabetes education and training. They can assist and be a partner in the development of the Student Plan of Care for Diabetes.
- h) Accommodation of diabetes management technology in the schools including and not limited to continuous glucose monitors, Flash Glucose Monitoring System. These devices may include personal devices such as cell phones etc to display blood glucose information those must be accommodate in school including during academic testing
- i) Accommodation during tests high and low blood sugars.

7. <u>Diabetes in the Workplace</u>

Employees must also have strategies to stay safe and are encouraged to:

- i) Tell their principal or supervisor about their diabetes, Type 1 or Type 2 and where to find their glucose tablets or such, as they may require assistance during an emergency. They are advised to teach other colleagues how to recognize symptoms of hypoglycemia/hyperglycemia and recognize when they might need assistance.
- ii) Contact the Human Resources Sick Leave and Disability department with the medical information if there is a need that requires accommodation for their diabetes.
- iii) The principal or supervisor will participate in the development of the employee's accommodation and safety plan.

8. Forms for Diabetes

Forms used to document student needs with respect to Diabetes are the following:

- a) Request and Consent for the Administration of Oral Medication form (Appendix A)
- b) Request for the Administration of Injection of Medication in an Emergency Form (Appendix C)
- c) Student Plan of Care for Diabetes form (Appendix H)
- d) Emergency Evacuation Form (Appendix R)

Definitions:

Blood glucose is the amount of glucose (sugar) in the blood at a given time.

Blood glucose control is the proper balance of food and insulin in the body in addition to the effects of physical activity or lack thereof on the body. The balance will be impacted by missing a meal/snack, eating more/less than planned and being more/less physically active than planned. The rapid fluctuation in blood glucose control could be a serious problem as it can easily result in very low blood glucose (hypoglycemia) and requires immediate treatment.

Blood glucose monitoring is a regular part of the process for a person with diabetes to assist in achieving their target blood glucose level. Levels will change depending on food consumption, physical activity, stress, illness, problems with insulin delivery system and many other factors. One way to test blood glucose, an individual pricks his or her finger with a lancing device and places a drop of blood on a blood glucose strip, which is inserted into a blood glucose meter to obtain a reading. Individuals may also use Continuous Glucose Monitor or Flash Glucose Monitor systems.

Continuous Glucose Monitoring (CGM) is a means of measuring blood glucose levels continuously in order to gain insight into patterns and trends in glucose levels throughout the day and night. A CGM System sensor is worn separately to the pump, inserted under the skin, and measures the level of glucose in the interstitial fluid (fluid in the tissue). The sensor is disposable and changed according to manufacturer recommendations.

Carbohydrate is one of the main sources of energy (calories). All forms of carbohydrates are broken down into glucose during digestion and increase blood glucose. Carbohydrates are found in fruits, vegetables, milk and grains/starches such as rice, potatoes, corn, and legumes and refined sugars.

Diabetic ketoacidosis (DKA) is an acute and severe complication of diabetes that is the result of high levels of blood glucose and ketones. It is often associated with poor control of diabetes or occurs as a complication of other illnesses. It can be life threatening and requires emergency treatment. Signs and symptoms include fruity odour on the breath, shortness of breath, confusion, nausea, vomitingand weight loss.

Fast-acting carbohydrate is a carbohydrate that a person eats or drinks for treatment of mild to moderate hypoglycemia (e.g. orange juice, glucose tablets)

Flash Glucose Monitoring is a means of measuring blood glucose levels. Individuals have a sensor inserted on their upper arm and a separate touchscreen reader device. When the reader device is swiped close to the sensor, the sensor transmits both an instantaneous

glucose level and eight-hour trend graph to the reader.

Glucagon is a hormone that raises blood glucose. An injectable form of glucagon is used to treat severe hypoglycemia.

Glucometer is a medical device used to measure the concentration of sugar in the blood.

Glucose is a hormone that the body needs to produce energy. Glucose (sugar) comes from carbohydrates such as breads, cereals, fruit and milk.

Hyperglycemia or high blood glucose is a situation that occurs when the amount of blood glucose (sugar) is higher than an individual's target range. **Symptoms** can include frequent urination, increased thirst, blurred vision, fatigue, headache, fruity-smelling breath, nausea and vomiting, shortness of breath, dry mouth, weakness, confusion, abdominal pain.

Hypoglycemia or low blood glucose occurs when the amount of blood glucose (sugar) is lower than 4.0 mmol/L. Hypoglycemia can be mild, moderate or severe. It can happen within minutes of a person appearing healthy and normal and therefore must be taken care of right away as it may become an emergency situation. **Symptoms** can include irritability, hostility and poor behavior, difficulty concentrating, cold clammy or sweaty skin, pallor, shakiness, lack of coordination, staggering gate, fatigue, nervousness, excessive hunger, headache, blurred vision and dizziness, abdominal pain or nausea, fainting and unconsciousness.

Severe Hypoglycemia typically occurs when the amount of blood glucose (sugar) is lower than 2.8 mmol/L. Severe hypoglycemia requires the assistance of another person as unconsciousness may occur. Parents/Caregivers should call emergency services immediately. Symptoms of severe hypoglycemia include fainting, a seizure and difficulty speaking.

Insulin is a hormone that facilitates the conversion of glucose to energy and is normally produced by the pancreas. People with type 1 diabetes cannot produce their own insulin, and glucose builds up in the blood instead of being used for energy. Therefore children with diabetes administer insulin by syringe, insulin pens, or insulin pumps.

Insulin pump management is a type of pump often used for children with type 1 diabetes to manage their blood glucose. It allows for more flexibility and eliminates the need for multiple daily insulin injections by delivering a continuous infusion of insulin. A small glucose pump is attached to the child directly and provides insulin to the pancreas.

Sharps are used syringes, insulin pen needles and lancets. These items must be carefully disposed of in appropriate sharp containers.

Target blood glucose range is acceptable blood glucose levels based on the Canadian Diabetes Association's *Clinical Practice Guidelines* and is personalized for the student by the parent/caregiver and other health services professionals (their diabetes care team).

Type 1 diabetes is an autoimmune disease that occurs when the pancreas no longer produces any insulin or produces very little insulin. Type 1 diabetes usually develops in childhood or adolescence and affects approximately 10% of people with diabetes. There is no cure. It is usually treated with lifelong insulin injections and careful attention to diet and physical activity.

Type 2 diabetes is a disease that occurs when the pancreas still produces insulin but does not produce enough to meet the body's needs and/or the body is unable to respond properly to the actions of insulin (insulin resistance). Type 2 diabetes usually occurs later in life (although it can occur in children) and affects approximately 90% of people with diabetes. There is no cure. It is treated with careful attention to diet and exercise and usually requires medication (oral antihyperglycemic agents) and/or insulin.

EPILEPSY AND SEIZURE DISORDERS

TCDSB and all its employees play an important role in providing a safe environment that accommodates for the careful monitoring of students that experience epilepsy or other seizure disorders. It is important that all members of the school community are aware of issues facing students with epilepsy and seizure disorders and develop strategies to minimize the risk for students experiencing seizures. Staff need to be prepared to respond appropriately in the event of an emergency in schools.

More than 300 000 Canadians live with epilepsy, 1% of the total population. 44% of people with epilepsy are diagnosed before age 5, 55% by age 10 and 75-80 % by age 18. About 50% of students diagnosed tend to outgrow their epilepsy.

These procedures need to be flexible enough to respond to the age and cognitive ability of the student, the nature and prevalence of the seizures that tend to be experienced by the student, and the organizational and physical properties of the school.

1. Procedure for Staff

The following procedure is to be followed for students with epilepsy and seizure disorders:

- a) As part of the online application for registration (SOAR) to a TCDSB school, the parent/guardian will be asked to identify allergies or medical conditions, including Epilepsy and Seizure Disorders.
- b) The principal (or designate) will ask that upon registration at the school, the parent/guardian will inform the school if their child has any medical conditions including Epilepsy and Seizure Disorders.
- c) The principal will then ensure that the parent/guardian is asked to supply information on any medical conditions on the Request and Consent for the Administration of Oral Medication form (Appendix A).
- d) The principal, in consultation with the parent/guardian will develop a Student Plan of Care for Epilepsy and Seizure Disorders form.
- e) The principal will ensure parent/guardian is provided the contact information for Transportation Services to ensure that pertinent school information is shared if/when the student is transported.
- f) There may be times with students experiencing seizures as with any emergency medical situation the school staff will determine that this is a medical emergency requiring emergency medical personnel. Staff will call 911 in case of an emergency.
- g) The principal will review the procedures on safety of students with epilepsy or seizure

disorders with entire staff twice each year and throughout the school year as required.

- h) The principal will ensure that staff responsible for the welfare of the students (i.e., teachers, custodians, administrative assistants, educational assistants, long term occasional staff, support staff, etc.) are aware of students in their care that have epilepsy or seizure disorders and that they have received appropriate training symptom recognition, and treatment response should a student experience a seizure.
- i) The principal will ensure that all occasional teachers and support staff are aware the Student Plan of Care for Epilepsy and Seizure Disorders for students in their assigned classroom and that they are asked to review these prior to student arrival.
- j) The principal will ensure that the Student Plan of Care for Epilepsy and Seizure Disorders be posted in a non-public area of the school (i.e. staff room and/or school office, etc.) and that a copy is kept in the teacher's day book (or alternative) and in supply binders for both teachers and all staff working with the student.
- k) The principal will ensure that staff are made aware of any students that may have a need for emergency medical intervention (i.e. Students who have a Student Plan of Care for Epilepsy or Seizure disorders posted in a non-public place).
- I) The principal will maintain a file for each student with Epilepsy and Seizure Disorders including all pertinent forms in the main office.
- m) Excursions: Please refer to the Board's Excursion Handbook. It is advisable to have a parent or other adult relative of a student with epilepsy/seizure disorders accompany all class trips where possible. Parents shall be informed of excursions as early as possible in order to research excursion sights for allergic risks.

2. <u>Medical/emergency medical plan for students with Epilepsy/Seizure Disorders</u>

The Student Plan of Care for Epilepsy and Seizure Disorder shall contain the following:

- a) Emergency contact(s) information;
- b) Details regarding the type of seizures that the student typically has encountered and actions required;
- Regimen for any medications required during school hours. A copy of the Request and Consent for the Administration of Oral Medication form will be available for completing any directions regarding medications required;
- d) Any known triggers;
- e) Warning signals that indicated seizure may be about to occur;
- Symptom recognition and appropriate treatment/response if seizure occurs, which will be provided to the school for staff who are in direct contact with the student on a regular basis;

- g) Information from parents/guardians or student will need to be included if any required changes from the usual daily routines (e.g. any restrictions on physical activity, sports, or extracurricular activities). Clear instructions for the school will need to be included in the Student Plan of Care.
- h) Confirmation of the plan to involve emergency services by calling 9-1-1 should an emergency occur related to the student's Epilepsy and Seizure Disorders. Specific information about alternate transportation if there is a need for one.

3. Risk Managements Strategies for Students with Epilepsy and Seizure Disorders

- Schools are required to develop strategies that allow for monitoring students for signs of seizures, which preserves normal peer interactions for the student who is subject to seizures.
- b) Useful references include: http://epilepsyontario.org and http://www.epilepsy.ca
- c) A communication plan must be put into place to share information on epilepsy and seizures with parents, students and the staff. All parties should be encouraged to support the student who is subject to seizures.

4. Epilepsy and Seizure Disorders in the Workplace

Employees must also have strategies to stay safe and are encouraged to:

- a) Tell their principal or supervisor about their epilepsy or seizure disorder and what type of seizure symptoms to watch for and usual treatment plan when they experience one. As they may require assistance during an emergency, they are advised to teach other colleagues how to recognize symptoms of seizures and how to respond should they need assistance.
- b) Contact the Human Resources Sick Leave and Disability department with the Medical Information that requires an accommodation for epilepsy or seizure disorders.
 Accommodation requirements will be managed by the Human Resources.
- c) The principal or supervisor will participate in the development of the employee's accommodation and safety plan.

5. Forms for Epilepsy and Seizure Disorders

Forms used to document student needs with respect to Epilepsy and Seizure Disorders are the following:

- e) Request and Consent for the Administration of Oral Medication form (Appendix A)
- f) Student Plan of Care for Epilepsy and Seizure Disorders Form form (Appendix I)

Definitions

AEDs are antiepileptic drugs that are used to control and prevent seizures. Includes anticonvulsant drugs.

Aura is a sensation that happens before a seizure – a strange taste or striking smell, a sound or lightheadedness. It may act as a warning sign but is not always followed by a full-scale seizure.

Causes of seizures

- brain injury (caused by tumour, stroke or trauma)
- epilepsy
- birth trauma
- poisoning from substance abuse or environmental contaminants, e.g. lead poisoning
- aftermath of infection, e.g. meningitis
- alteration in blood sugar, e.g. hypoglycemia.

Computerized tomography (CT scan) is a computerized test that shows the relationships of different parts of the brain in order to detect the cause of epilepsy.

Electroencephalograph (EEG) is a test that records and indirectly measures the brain's electrical activity (brain waves) on the skin's surface. An important tool for the detection and diagnosis of epilepsy.

Electrode is a small instrument that is usually attached to the scalp in order to record the brain's electrical activity

Epileptologist is a neurologist who specializes in epilepsy

Epilepsy is a disorder of the central nervous system, characterized by spontaneous, repeated seizures, caused by sudden, brief malfunctions of the brain

Magnetic resonance imaging (MRI) is a scanning test that uses a powerful magnet to look inside the body. The images show abnormalities in the brain and other areas of the body.

Neurology is the specific study of the nervous system, brain and spine.

Positron emission tomography (PET) is a scanning test that uses low-energy radiation to create computer images of the brain's metabolic activity.

Seizures are periods of sustained hyperactivity in the brain. During, a seizure, the nerve cells leave their normal activities, in synchronized bursts. Seizures may include muscle spasms, mental confusion, distortion of senses, dizziness, loss of consciousness, uncontrolled or aimless body movement (e.g. walking, mumbling), incontinence, and vomiting. Generally behaviours experienced during a seizure cannot be recalled afterwards.

Single photon emission computed tomography (SPECT) is a scanning test that uses low-level radioactivity to measure the blood flow through the brain.

Types of Seizures

- 1. **Generalized Seizures** involve the entire brain. A secondarily generalized seizure begins in one part, and then spreads throughout the brain.
 - a) **Generalized Tonic Clonic** previously called Grand Mals are convulsions in which the body stiffens, student may cry out, fall down, become rigid and lose consciousness. There arms and legs may jerk, breathing become shallow. The student may lose bladder or bowel control, drool or bite their tongue. This seizure lasts anywhere from 30 seconds to a few minutes. Afterwards the student may feel confused or drowsy, need to sleep or have a headache.
 - b) Absence previously called petit mal seizures resembles daydreaming. It happens so fast that it often goes unnoticed. The student looks like they are not paying attention. When this happens at school, the student may miss information or instructions. Typical Absence seizures are non-convulsive and muscle tone is usually preserved. The seizure event usually lasts for less than 10 seconds. Atypical Absence seizures are longer in duration and may or may not involve a loss of muscle tone and often tonic/clonic like movements are observed.
 - c) **Myoclonic** is a sudden startle movement that may cause the student to drop objects. There is no loss of consciousness during this type of seizure. It is often associated with single or repetitive jerking motions of the muscles (myoclonus). Myoclonic seizures are primarily in young children and infants, rarer in adults.
 - d) **Tonic** usually lasts less than one minute. The student may lose consciousness. Their muscles stiffen but there is no jerking of arms or legs. If the student is standing they may fall to the ground.
 - e) Atonic (also known as akinetic) are often called drop attacks/seizures. These seizures are often characterized by sudden loss of muscle control, resulting in an inability to stand and they fall.
 - **Astatic** seizures involve this loss of muscle tone resulting in the inability to stand. This seizure lasts a very short time. While the actual seizures cause little injury to the student, most resulting harmful injuries after the event are usually related to the student falling or injuring themselves from the fall. To help prevent more serious injuries, some parents choose to have the student wear a protective helmet as well as restrict their involvement in certain activities. Atonic seizures are not always astatic in nature.
- 2. **Partial seizures** start in one specific part of focal point of the brain.
 - a) **Simple Partial Seizures** are limited to one area of the brain. Consciousness is not lost, though the child may experience unusual sensations or movements while fully conscious, such as:

- Uncontrolled stiffening or jerking of the arms and legs.
- An odd taste, smell or pins and needles
- Feeling like you want to throw up
- Intense emotions like fear, sadness or anger
- A 'rising' feeling in your tummy
- b) Complex Partial Seizure, also called temporal lobe or psychomotor epilepsy are often preceded by an "aura". They are often identified by the manifestation of complicated motor and sensory action. The student may appear dazed or confused random walking, mumbling, head turning, or pulling at clothing may be observed. These repeated idiosyncratic motions are often called automatisms and are usually not recalled by the student. There may be some change in consciousness or memory. In children, do not confuse this with absence seizures. CPS often originates in the temporal or frontal lobes of the brain.
- 3. **Photosensitive Seizures** are rare, even for students with epilepsy (less than 5%). These are not a distinct type of seizure; rather they result of a light related stimulus that may induce the triggering of a seizure. They usually occur around the ages of 8-20 with a higher frequency of cases during puberty. They may be triggered by both natural and artificial light oscillating or moving patterns.
- 4. **Postictal States** commonly follow both tonic-clonic and complex partial seizures. As a student regains consciousness after the seizure, they experience fatigue, confusion and disorientation lasting from 5 minutes, up to hours or even days and rarely, as long as one to two weeks. The student may fall asleep or gradually become less confused until full consciousness is regained.
- 5. **Status Epilepticus**, continuous seizure activity is a life-threatening medical emergency. Seizures occur one after another, lasting 5 minutes or more without recovery of consciousness between seizures. **Immediate medical care is required.**

OTHER MEDICAL CONDITIONS

There may be situations where medical conditions beyond those listed in PPM 161 may require a school response. For convenience, this protocol includes a Generic Student Plan of Care (Appendix J) to support schools who are working with a student who requires support for an alternate medical condition. It is important to ensure that the appropriate medical practitioners are consulted for medical conditions beyond the scope of this protocol.



REQUEST AND CONSENT FOR THE ADMINISTRATION OF ORAL MEDICATION

	ADMINISTRATION	OF ORAL M	EDICATION
Student Name		Stud	dent No
SURNAME	FIRSTNAME		
BirthdateYYYY/MM/DD	Grade/Placement	School	
SCHOOL ADDRESS			
,			
WE, THE PARENT(S)/GUAF	RDIAN REQUEST AND CONSEN	IT FOR THE ADMIN	IISTRATION OF ORAL MEDICATION.
	Home Tel.		Home Tel.
/We	Bus. Tel.		Bus. Tel.
equest that the TCDSB pr	ovide for the administration of	medication for my	/ /our son/daughter.
			_
/We understand that:			
) a medical doctor must c	onsent to this request in accor	dance with Sectio	n 2 of this form.
o) only a limited supply of t	he medication may be kept at	the school as pre-	scribed by the doctor;
c) the medication must be	brought to the school in a clos	ed container and t	the label must detail the name of the stud
	cation, and the size of the dos		
			the parent(s)/guardian or doctor, and wil al circumstances, e.g. pupil refuses
e) it is the responsibility of	the school to establish fall bac	k positions for the	administration of oral medication.
/We consent to:			
a) the establishment of a seabove;	ervice at the school to adminis	ster prescribed me	dication to my/our son/daughter named
		medication discus	ssing any aspect of the service with a pub
nealth nurse where the nee	ed arises.		
Date Y-M-D	Signature of Parent/Guardi	 an	Signature of Parent/Guardian
Please have the family doctor cor	nplete Part 2 on reverse side of this fo	orm.	
	nplete Part 2 on reverse side of this fo		

00/	REQUEST AND CONSENT FOR THE ADMINISTRATION OF ORAL MEDICATION				
nt Name		_		Stud	dent No
SURNAME		FIRSTNAME			
CTOR'S APPROVAL FOR	R THE ADMI	NISTRATION	OF ORAL	MEDICATION	I IN THE SCHOOL
agnosis:					
		Time of	Administrat	tion	Amount to be Maintained at School
Medication Prescribed	Dosage	Mid - AM	Noon	Mid - PM	, uneant to be maintained at estice
Medication Prescribed		IVIIG - AIVI			
iviedication Prescribed		IVIIQ - AIVI			
ne parent(s)/guardian of r	the above na	amed pupil ha	ne school. I	he Board req	Catholic District School Board to offer a servic uires a doctor's approval before implementing s ving specific directions (if any, e.g. refrigeration
ne parent(s)/guardian of more the administration of more program. Your signature	the above na	amed pupil ha	ne school. I	he Board req	uires a doctor's approval before implementing :
ne parent(s)/guardian of more the administration of more program. Your signature	the above na edication to below will p	amed pupil ha their child in tl rovide require	ne school. I	he Board req with the follow	uires a doctor's approval before implementing :
ne parent(s)/guardian of t ir the administration of m program. Your signature actions):	the above na edication to below will p	amed pupil ha their child in tl rovide require	ne school. I	he Board req with the follow	uires a doctor's approval before implementing :
ne parent(s)/guardian of t ir the administration of m program. Your signature actions):	the above na edication to below will p	amed pupil ha their child in tl rovide require	ne school. I	he Board req with the follow	uires a doctor's approval before implementing :
he parent(s)/guardian of the administration of me program. Your signature eactions):	the above na edication to below will p	amed pupil ha their child in tl rovide require	ne school. I	he Board req with the follow	uires a doctor's approval before implementing :
the parent(s)/guardian of the administration of moreogram. Your signature factions):	the above na edication to below will p	amed pupil ha their child in tl rovide require	ne school. I	he Board req with the follow	uires a doctor's approval before implementing :
the parent(s)/guardian of the administration of moreogram. Your signature factions):	the above na edication to below will p	amed pupil ha their child in tl rovide require	ne school. I	he Board req with the follow ove for:	uires a doctor's approval before implementing :

Principal's Signature

Distribution: Original: OSR Copy: Parent(s)/Guardian, Special Program Files(s)

Personal information contained on this form is collected under the authority of Sections 8 and 11 of the Education Act, and will be used as an authorization for prescribed medication. Questions about this collection should be directed to the above doctor through the parent(s)/guardian.

Signature of Parent/Guardian

Page 2 of 2



Toronto Catholic District School Board School Based Student Support Services EMERGENCY ALLERGY FORM EPI-PEN ONLY

Name:	
Address:	
Home Phone:	
Emergency Phone	
Parent/Guardian Work Phone:	
Parent/Guardian Work Phone:	
Feacher:	
Class: Room#	
Health Card #:	
Physician	
Physician's Telephone	
containing them in any form in any amount:	•
Avoidance: The key to preventing an emergency is Absolute A	voidance of those foods at all times
Avoidance: The key to preventing an emergency is Absolute A Without An EPI-PEN This Child Must Not Be Allowed to EAT A	
, , , , , , , , , , , , , , , , , , , ,	
Nithout An EPI-PEN This Child Must Not Be Allowed to EAT A	
Nithout An EPI-PEN This Child Must Not Be Allowed to EAT A	
Nithout An EPI-PEN This Child Must Not Be Allowed to EAT A Eating Rules: (list eating rules for child, if any, in this space)	
Nithout An EPI-PEN This Child Must Not Be Allowed to EAT A Eating Rules: (list eating rules for child, if any, in this space) Possible Symptions:	nything.
Nithout An EPI-PEN This Child Must Not Be Allowed to EAT A Eating Rules: (list eating rules for child, if any, in this space) Possible Symptions: Flushed face, hives, swelling or itchy lips, tongue, eyes	tightness in throat, mouth, chest
Nithout An EPI-PEN This Child Must Not Be Allowed to EAT A Eating Rules: (list eating rules for child, if any, in this space) Possible Symptions: Flushed face, hives, swelling or itchy lips, tongue, eyes Difficulty breathing or swallowing, wheezing, coughing, choking pains	tightness in throat, mouth, chest Vomiting, nausea, diarrhea, stomach pain Loss of consciousness
Without An EPI-PEN This Child Must Not Be Allowed to EAT A Eating Rules: (list eating rules for child, if any, in this space) Possible Symptions: Flushed face, hives, swelling or itchy lips, tongue, eyes Difficulty breathing or swallowing, wheezing, coughing, choking pains Dizziness, unsteadiness, sudden fatigue, rapid heartbeat Action - Emergency At any sign of difficulty(e.g. hives, swelling, or s	tightness in throat, mouth, chest Vomiting, nausea, diarrhea, stomach pain Loss of consciousness
Without An EPI-PEN This Child Must Not Be Allowed to EAT A Eating Rules: (list eating rules for child, if any, in this space) Possible Symptions: Flushed face, hives, swelling or itchy lips, tongue, eyes Difficulty breathing or swallowing, wheezing, coughing, choking pains Dizziness, unsteadiness, sudden fatigue, rapid heartbeat Action - Emergency At any sign of difficulty(e.g. hives, swelling, or plan:	tightness in throat, mouth, chest Vomiting, nausea, diarrhea, stomach pain Loss of consciousness ifficulting breathing);
Without An EPI-PEN This Child Must Not Be Allowed to EAT A Eating Rules: (list eating rules for child, if any, in this space) Possible Symptions: Flushed face, hives, swelling or itchy lips, tongue, eyes Difficulty breathing or swallowing, wheezing, coughing, choking pains Dizziness, unsteadiness, sudden fatigue, rapid heartbeat Action - Emergency At any sign of difficulty(e.g. hives, swelling, or lan: Use EPI-PEN immediately	tightness in throat, mouth, chest Vomiting, nausea, diarrhea, stomach pain Loss of consciousness ifficulting breathing);
Without An EPI-PEN This Child Must Not Be Allowed to EAT A Eating Rules: (list eating rules for child, if any, in this space) Possible Symptions: Flushed face, hives, swelling or itchy lips, tongue, eyes Difficulty breathing or swallowing, wheezing, coughing, choking pains Dizziness, unsteadiness, sudden fatigue, rapid heartbeat Action - Emergency At any sign of difficulty(e.g. hives, swelling, or Plan: Use EPI-PEN immediately Have Someone Call An Ambulance to advise the dispatcher that the call	tightness in throat, mouth, chest Vomiting, nausea, diarrhea, stomach pain Loss of consciousness ifficulting breathing); ild is having an anaphylactic reaction. or become worse, give a second EPI-P



REQUEST AND CONSENT FOR THE ADMINISTRATION OF INJECTION OF MEDICATION IN AN EMERGENCY

Student Name	•		Stud	dent No.	
	SURNAME	FIRSTNAM	E		
Birthdate	YYYY/MM/DD	Grade/Placement	School		
		AN REQUEST AND CONS SENCY IN THE SCHOOL.	ENT FOR THE ADMINIST	TRATION OF AN INJECTION OF	
	Home Tel.		Home Tel.		
	Bus. Tel		Bus. Tel.		
I/We request to	hat the TCD	SB provide for the admir	nistration of an emergen happen:	cy injection of medication for my /our	
g					
I/We understa	and that:				
a) a medical	doctor must	consent to this request i	n accordance with Secti	ion 2 of this form.	
b) only a limit	ted supply of	f the medication may be	kept at the school as pr	escribed by the doctor;	
		e brought to the school in		the label must detail the name of the	
	ade with pare			h the parent(s)/guardian or doctor, and wi tional circumstances, e.g. pupil refuses	II
e) it is the res	sponsibility o	f the school to establish	fall back positions for th	ne administration of emergency medication	1
I/We consent	to:				
		service at the school to bove in the event of an e		cy injection of medication to my/our outlined above;	
		onsible for the administra ublic health nurse where		emergency situation discussing any aspe	ect
				Circulus of Bound Con. "	
Date Y-M-	U	Signature of Parent	/Guardian	Signature of Parent/Guardian	
		n this form is collected under t cation. Question about this col		11 of the Education Act, and will be used as an he parent(s)/guardian.	
Please have the fa	amily doctor co	mplete Part 2 on reverse side (of this form.		
Distribution: Origin	nal: OSR Copv:	Parent(s)/Guardian, Special F	Program Files(s) (if applicable))	
		1-F		Dana 1 of 2	



REQUEST AND CONSENT FOR THE ADMINISTRATION OF

tudent Name			Student No.	
	SURNAME	FIRSTNAME		
DOCTOR'S A . Diagnosis:	PPROVAL FOR THE	ADMINISTRATION OF ME	DICATION IN THE SCHOOL	
Reason for in	jection:			
When should	the injection of medic	ation be administered?		
Where should	I the injection be admi	inistered?		
Additional dire	ections			
Medication	on Prescribed	Dosage	Amount to be Maintained at School	
a)				
b)				
The parent(s	s)/guardian of the abov	ve named pubil have reques	ted the Toronto Catholic District School Board to o	tter a service for
the administ	ration of an injection o	of medication in an emergen	sted the Toronto Catholic District School Board to or cy to their child in the school. The Board requires a	doctor's
the administ approval bet	ration of an injection of ore implementing suc	of medication in an emergen h a program. Your signature	ted the Toronto Catholic District School Board to or cy to their child in the school. The Board requires a below will provide required approval with the follow	doctor's
the administ approval bet	ration of an injection o	of medication in an emergen h a program. Your signature	cy to their child in the school. The Board requires a	doctor's
the administ approval bet	ration of an injection of ore implementing suc	of medication in an emergen h a program. Your signature	cy to their child in the school. The Board requires a	doctor's
the administ approval bet directions (if	ration of an injection of fore implementing suc any, e.g. refrigeration	of medication in an emergen h a program. Your signature n, reactions):	cy to their child in the school. The Board requires a below will provide required approval with the follow	doctor's
the administ approval bet directions (if	ration of an injection of fore implementing suc any, e.g. refrigeration	of medication in an emergen h a program. Your signature n, reactions):	cy to their child in the school. The Board requires a	doctor's
the administ approval bet directions (if	ration of an injection of fore implementing suc any, e.g. refrigeration	of medication in an emergen h a program. Your signature n, reactions):	cy to their child in the school. The Board requires a below will provide required approval with the follow	doctor's
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the administ approval bet directions (if	ration of an injection of ore implementing suc- any, e.g. refrigeration the administration of a Student's Name	of medication in an emergenth a program. Your signature in reactions): an injection of medication in	cy to their child in the school. The Board requires a below will provide required approval with the follow	doctor's
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the administra approval before directions (if	ration of an injection of ore implementing suctions any, e.g. refrigeration the administration of a Student's Name Doctor's Signatur Date: Y-M-D FF APPROVAL FOR I ation of an injection of	of medication in an emergency h a program. Your signature n, reactions): an injection of medication in e MPLEMENTION medication in an emergency	cy to their child in the school. The Board requires a below will provide required approval with the follow an emergency as described above for: PLEASE USE DOCTOR'S STAMP	doctor's ving specific
the administra approval before directions (if	ration of an injection of ore implementing suctions any, e.g. refrigeration the administration of a Student's Name Doctor's Signatur Date: Y-M-D FF APPROVAL FOR I ation of an injection of	of medication in an emergency h a program. Your signature n, reactions): an injection of medication in e MPLEMENTION medication in an emergency	cy to their child in the school. The Board requires a below will provide required approval with the follow an emergency as described above for: PLEASE USE DOCTOR'S STAMP	doctor's ving specific
the administra approval before directions (if	ration of an injection of ore implementing suctions any, e.g. refrigeration the administration of a Student's Name Doctor's Signatur Date: Y-M-D FF APPROVAL FOR I ation of an injection of	of medication in an emergency h a program. Your signature n, reactions): an injection of medication in e MPLEMENTION medication in an emergency	cy to their child in the school. The Board requires a below will provide required approval with the follow an emergency as described above for: PLEASE USE DOCTOR'S STAMP	doctor's ving specific
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the administration approval before directions (if approve appr	ration of an injection of ore implementing suctions any, e.g. refrigeration the administration of a Student's Name Doctor's Signatur Date: Y-M-D FF APPROVAL FOR I ation of an injection of nel will contact emergence.	of medication in an emergency has program. Your signature in reactions): an injection of medication in an injection of medication in an emergency embulance services. Principal's Signature in an emergency embulance services.	cy to their child in the school. The Board requires a below will provide required approval with the follow an emergency as described above for: PLEASE USE DOCTOR'S STAMP y will be implemented as described above. At the second control of the	doctor's ving specific
the administration approval between directions (if I approve TCDSB STAR The administration administration administration administration approve Date	ration of an injection of ore implementing suctions any, e.g. refrigeration the administration of a Student's Name Doctor's Signatur Date: Y-M-D FF APPROVAL FOR I ation of an injection of nel will contact emergery. Y-M-D on contained on this form	of medication in an emergency has program. Your signature in reactions): an injection of medication in an injection of medication in an emergency embulance services. Principal's Signature is collected under the authority.	cy to their child in the school. The Board requires a below will provide required approval with the follow an emergency as described above for: PLEASE USE DOCTOR'S STAMP / will be implemented as described above. At the same statement of the	doctor's ving specific ame time,

2 Sépao.			
Student Name:		Student No	
Birthdate: Grade/Placen	nent: School:		
SERVICE PROVIDED	DATE Year/Month/Day	TIME	INITIALS OF PERSON PROVIDING SERVICE
		+	



TORONTO CATHOLIC DISTRICT SCHOOL BOARD

East

Consent to Disclose Personal Health Information Pursuant to the personal Health Information Protection Act, 2004 (PHIPA)

(print full name of person)	(print name of he	ealth Information custodian)
o disclose		
my personal health information	n consisting of:	
(Describe the personal health informatic	on to be disclosed.	
(Describe the personal health information	in to be discussely	
r		
the personal health informatio		
	(Name of person for whom you are the sub	stitute decision-maker")
onsisting of:		
(Describe the personal health information	on to be disclosed)	
	an to be disclosed)	
(Print name and address of per understand the purpose for dis	rson requiring the information) sclosing this personal health information to th	ne person noted above. I
(Print name and address of per understand the purpose for dis nderstand that I can refuse to s	rson requiring the information) sclosing this personal health information to the sign this consent form.	ne person noted above. I
(Print name and address of per understand the purpose for dis nderstand that I can refuse to s	rson requiring the information) sclosing this personal health information to th	ne person noted above. I
(Print name and address of per understand the purpose for dis nderstand that I can refuse to s	rson requiring the information) sclosing this personal health information to the sign this consent form.	ne person noted above. I
(Print name and address of per understand the purpose for dis	rson requiring the information) solosing this personal health information to the sign this consent form. Address:	ne person noted above. I
(Print name and address of per understand the purpose for dis nderstand that I can refuse to s ly Name: ome Tel:	rson requiring the Information) sclosing this personal health information to the sign this consent form. Address: Work Tel:	ne person noted above. I
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Student Plan of Care for ANAPHYLAXIS

School Year: 20__- 20-__

Student Name	Date of Birth	Gender	Student Photo
Address		Student #	
Exceptionality	Teacher(s)	Medic Alert I.D.	
		Yes □ No □	
Grade	Age	OEN#	

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

(HAVE ABILITY TO ADD MORE CONTACTS)

SUPPORTS FOR ANAPHYLAXIS
Name of trained individuals who will provide support with Anaphylaxis-related tasks: Designated Staff:
Local Health Integration Network (LHIN) Care Workers (if applicable):
Method of home-school communication: Any other medical condition or allergy? No Yes (Please list below) 1 2 3
DAILY/ROUTINE ANAPHYLAXIS MANAGEMENT
SYMPTOMS
 A STUDENT HAVING AN ANAPHYLACTIC REACTION MIGHT HAVE <u>ANY</u> 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,
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).

EXCURSION PROTOCOL

Please refer to the Excursion Handbook when planning for excursions and ensure that accommodations are made for the student with Anaphylaxis:

 $\frac{https://www.tcdsb.org/ProgramsServices/SchoolProgramsK12/HealthOutdoorPhysEd/ExcursionHandbook/Documents/Excursion-Handbook-updated-Nov-30-2015.pdf$

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

☐ Epi-pens (refer to Excursion Handbook for further information)

□ Emergency Contact
□ Cell phone (if parent/guardian chooses)
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 possible side effects. This medication cannot be beyond the expiration date. This information may remain on file if there are no changes to the student's medical condition.

Į.	AUTHORIZATION/PLAN RE	VIEW
INDIVIDUALS \	WITH WHOM THIS PLAN OF CA	RE IS TO BE SHARED
1	2	3
4	5	6
Other Individuals To Be Contacted I	Regarding Plan of Care:	
Before-School Program	Yes No	
After-School Program	Yes No	
School Bus Driver/Route # (If Applic	cable)	
Other:		
*********	*********	*******
This plan remains in effect for the before:		out change and will be reviewed on or
It is the parent(s)/guardian(s) resp	onsibility to notify the principal any change of medication or on that school staff are not medicated in the contract of the c	•
Parent(s)/Guardian(s):	gnature) Date:	
Student:(signature for student 16 ye	,	
Principal:	Date: _	



Student Plan of Care for ASTHMA

School Year: 20__-20__

Student Name	Date of Birth	Gender	Student Photo
Address		Student #	
Exceptionality	Teacher(s)	Medic Alert I.D. Yes □ No □	
Grade	Age	OEN#	

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

(HAVE ABILITY TO ADD MORE CONTACTS)

SUPPORTS FOR ASTHMA			
Name of trained individuals who will provide support with asthma-related tasks: Designated Staff:			
Local Health Integration Network (LHIN) Care Workers (if applicable):			
Method of home-school communication: Any other medical condition or allergy? No Yes (Please list below) 1 2 3			
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:			
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.

Reliever Inhaler use at school and during school related activities			
A reliever inhaler is a fast acting medicati	on (usually blue in colo	ur) that is used when someone is I	naving
asthma symptoms. The reliever inhaler sh	ould be used:		
		and the same of the same shows that	
□ when student is experiencing asthma sy□ other (explain):	•	reathing, cougning, wheezing).	
Use of reliever inhaler	ir	the dose of	
(Name of Med	lication)	(# of puffs)	
Spacer (valved holding chamber) provided	□ Yes □ No		
Place a check mark beside the type of reli c	ever inhaler that the st	udent uses:	
□ salbutamol □ airomir	□ ventolir	n □ bricanyl	
□ other (specify):			
Controller Medication use	e at school and during	g school related activities	
Controller medications are taken regularl	y every day to control	asthma. Usually, they are taken in	the
morning and at night, so generally not tak	en at school (unless stu	dent will be participating in an ove	ernight
activity). Place a check mark beside the ty	pe of prescribed contro		uses:
☐ flovent ☐ advair	□ qvar	□ pulmicort	
□ other (specify):	_		
Use/administer	in the dose of	at the following time(s):	
(Name of Medication)			
Use/administer	in the dose of	at the following time(s):	
(Name of Medication)		at the following time(3).	
Use/administer	in the dose of	at the following time(s):	
(Name of Medication)		at the following time(s).	

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 reliever inhaler (usually a 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

	_
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.	
\square can self-administer prescribed medications and delivery devices to manage asthma while at school an	d
during school-related activities.	
requires assistance with administering prescribed medications and delivery devices to manage asthmatical medications and delivery devices to manage asthmatical medications.	3
while at school and during school-related activities.	
Parent/Guardian Name: Date: Date:	
Parent/Guardian Name: Date: Date:	
Student Name: Signature: Date:	
Student Name: Date: Date:	-
Principal Name: Signature: Date:	_
EXCURSION PROTOCOL	
ZACOROTO TA ROTO GOZ	
Please refer to the Excursion Handbook when planning for excursions and ensure that	
accommodations are made for the student with Asthma:	
https://www.tcdsb.org/ProgramsServices/SchoolProgramsK12/HealthOutdoorPhysEd/Excursi	
onHandbook/Documents/Excursion-Handbook-updated-Nov-30-2015.pdf	
During all trips off school property, the parent/guardian will provide an excursion kit which will	
consist of:	
□ Inhalers (refer to Excursion Handbook for further information)	
□ Emergency Contact	
□ Cell phone (if parent/guardian chooses)	

HEALTHCARE PROVIDER INFORMATION (MANDATORY)

	,
To be included by healthcare professional (I.E.: Pharmac Certified Respiratory Educator, Nurse, Medical Doctor or	
Healthcare Provider's Name:	
Profession/Role:	
Signature:	_ Date:
Special Instructions/Notes/Prescription Labels/Comme	ents:
	_
If medication is prescribed, please include dosage, free which the authorization to administer applies, and post beyond the expiration date. This information may remain medical condition.	ssible side effects. This medication cannot be

AUTHORIZATION/PLAN REVIEW				
INDIVIDUA	ALS WITH WI	HOM THIS PLAN C	F CARE IS TO BE SHARED	
1.	2.		3.	
4.	5.		6.	
Other individuals to be con	tacted regar	ding Plan of Care:		
Before-School Program	□ Yes	□ No		_
After-School Program	□ Yes	□ No		-
School Bus Driver/Route #	(If applicable	e)		
Other:				
	ct for the 20) 20 scho	**************************************	
	nd to inforn		y the principal if there is a name of the principal if there is a name of medication or	
Consent to treatment: I a perform all aspects of the			e not medical professionals lities and in good faith.	and
Parent(s)/Guardian(s): _	(si	ignature)	Date:	
Student:(signature for	student 16	years of age or o	Date: lder)	
Principal:(sig				
(sig	nature)			



Student Plan of Care for DIABETES

School Year: 20__- 20__

Student Name	Date of Birth	Gender	Student Photo
Address		Student #	
Exceptionality	Teacher(s)	Medic Alert I.D.	
		Yes □ No □	
Grade	Age	OEN#	

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

(HAVE ABILITY TO ADD MORE CONTACTS)

□ student can independently check BG/read

meter

Toronto Catholic District School Board

	TYPE 1 DIABETES SUP	PORTS	
Name of trained indi	viduals who will provide support wit	h diabetes-related tasks:	
Designated Staff:			
Local Health Integrat	Local Health Integration Network (LHIN) Care Workers (if applicable):		
Method of home-sch	ool communication:		
1 2	Any other medical condition or allergy? No Yes (Please list below) 1 2 3		
	DAILY/ROUTINE TYPE 1 DIABETE	S MANAGEMENT	
Student is able to ma		ently and does not require any special	
☐ Yes If yes, go d	☐ Yes If yes, go directly to page (6): Emergency Procedures		
☐ No If no, comp	lete below		
ROUTINE	ACTION for TYPE 1 DIABETES		
Blood Glucose	Target Blood Glucose (BG) Range		
Monitoring (GM)	Times to check BG: Check and Recor	rd time below	
□ student requires trained individual to check BG/read	□ Before AM break	_	
meter	□ Before lunch	☐ Before breakfast program	
□ student needs supervision to	□ Before PM break	☐ At after-school program	
check BG/read meter	□ Before leaving school	□ Before sports or exercise	

Contact Parent(s)/Guardian(s) if BG is:______

*Students should be able to check blood glucose anytime, anyplace, respecting their preference for privacy	Parent(s) Guardian(s) Responsibilities: School Responsibilities: Student Responsibilities: Outside Agency Responsibilities:
Nutrition Breaks	Recommended times for meals/snacks:
	neconfinence times for measy snacks
student requires supervision during meal times to ensure completion	Parent(s) Guardian(s) Responsibilities
□ student can independently manage food intake	School Responsibilities:
* Reasonable accommodation must be made to	Student Responsibilities:
allow student to eat all of the provided meals and snacks on time.	Special Instructions for meal days/special events
Students should not trade or share food/snacks with other students	Outside Agency Responsibilities:

ROUTINE	ACTION		
INSULIN	Please complete either A or B:		
Always double-check the insulin dose before injecting to make sure the appropriate dose has been selected and is dialed correctly into the pen.	 Student must be able to eat according to daily schedule Student must be able to eat all required food sent by parents Supervision will be required: Yes		
 □ Student does not take insulin at school □ Student takes insulin at school by : □ Injection 	Required times for insulin: Before school: Hunch Break: Other (Specify) Required times for insulin: Afternoon Break: Required times for insulin: Afternoon Break: Required times for insulin: Afternoon Break: Required times for insulin:		
□ Pump	Parent(s) Guardian(s) Responsibilities		
☐ Insulin is given by: ☐ Student ☐ Student with supervision	School Responsibilities:		
— Damant/	Student Responsibilities:		
□ Nurse	Outside Agency Responsibilities		
*All students with Type 1 diabetes use insulin. Some students will	Additional Comments		
require insulin during the school day, typically before meal/ nutrition breaks	 B. Insulin Pump Delivery: 1. Student must be able to eat according to daily schedule 2. Supervision will be required: Yes □ No □ 3. Student must be able to eat all required food sent by parents 		
* Parent/Guardian should be notified of changes to daily snack or activity time(s)	OR 4. Student may independently adjust insulin to accommodate amount of food Yes No U Use of insulin pump before each snack/meal Yes No Carbohydrate/insulin ratio:		

	Student may unhook pump for a maximum of one hour during intense physical activity Yes No While disconnected pump will be stored: Parent(s) Guardian(s) Responsibilities
	School Responsibilities:
	Student Responsibilities:
	Outside Agency Responsibilities Additional Comments
Physical activity lowers blood glucose. BG is often checked before activity.	Please indicate what this student must do prior to physical activity to prevent low blood sugar: 1. Before activity 2. During activity
Carbohydrates may need to be eaten before/after physical activity. A source of fast-acting sugar must always be within students'	3. After activity Parent(s) Guardian(s) Responsibilities School Responsibilities:
reach.	Student Responsibilities:
	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)

ROUTINE	ACTION
*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	Kits will be available in different locations but will include: Supplies:
A Student with special considerations may require more assistance than outlined in this plan.	Comments:

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:

EMERGENCY PROCEDURES DO NOT LEAVE STUDENT UNATTENDED HYPOGLYCEMIA – LOW BLOOD GLUCOSE (4 mmol/L OR LESS)

Student will be allowed extra juice/snacks any time they feel low as per hypoglycemic plan

Causes:

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

15 skittles)

Check blood glucose, giv	re grams of fast acting carb	ohydrate (e.g. ½ cup of juice.
Steps to take for <u>Mild</u> H	lypoglycemia (student is res	sponsive)
Predicted times/activities comm	non to low blood sugar for my child:	
☐ Other:		
□ Pale	☐ Confused	☐ Hungry
☐ Reports feeling low	☐ Irritability, Poor behaviour	☐ Weak/Fatigue
\square Lack of concentration	☐ Dizziness	☐ Blurred Vision
☐ Cold/Clammy/Sweaty skin	☐ Shakiness, poor coordination	☐ Headache
Usual Symptoms of Hypoglycen	nia for my child are: (Select all that ap	oply)
1		

Agreement to provide glucagon: School staff, agree that glucagon can be given in the event of personnel must sign below to indicate pre-agree	severe hypoglycemia. Note: School
Yes, glucagon can be given □ No, glucagon	cannot be given □
If yes, please complete authorization to adm	inister glucagon:
Parent/guardian signature:	Date:
Parent/guardian name (print):	Relationship:
Student signature:	
Heath Care Professional (HCP) signature:	Date:
HCP name (print):	Role:
Principal signature:	
Principal name:	
Designated and trained staff to administer gluca	agon (minimum 2):
1	
2	
3	
2. Re-check blood glucose in 15 minutes	
 If still below 4 mmol/L, repeat steps 1 and 2 snack, for example if r 	2 until BG is above 4 mmol/L. Give a starchy next meal/snack is more than one (1) hour away
Steps for <u>Severe</u> Hypoglycemia (stud	- · · · · · · · · · · · · · · · · · · ·
 Place the student on their side in the recove Call 9-1-1. Do not give food or drink (chokin 	• •
3. Trained Staff Member to administer glucage	g hazard). Supervise student until EMS arrives. on, if authorized
4. Contact parent(s)/guardian(s) or emergency	

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) ☐ Extreme Thirst ☐ Frequent Urination ☐ Headache ☐ Abdominal Pain ☐ Blurred Vision ☐ Hungry ☐ Warm, Flushed Skin ☐ Irritability ☐ Other: For pump delivery students: correct with insulin bolus: Yes \square No \square N/A \square 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) ☐ Rapid, Shallow Breathing □ Vomiting ☐ Fruity Breath Steps 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	d self-administer Diabetes m	edication
We agree that		
(student name) □ can carry prescribed medications and delivery of school-related activities. □ can self-administer prescribed medications and and during school-related activities. □ requires assistance with administering prescribe Diabetes while at school and during school-related activities. □ It is the parent/guardian responsibility to notification.	devices to manage Diabetes whi d delivery devices to manage Dia ped medications and delivery de d activities.	abetes while at school evices to manage
care during the school year and to inform the school device. This medication cannot be beyond the ex		n or delivery
Parent/Guardian Name:	_ Signature:	_ Date:
Parent/Guardian Name:	_ Signature:	_ Date:
Student Name:	_ Signature:	Date:
Principal Name:	_ Signature:	Date:
EXCURS	ION PROTOCOL	
Please refer to the Excursion Handbook when plan made for the student with Diabetes: https://www.tcdsb.org/ProgramsServices/SchoolFocuments/Excursion-Handbook-updated-Nov-3	Programs K12/Health Outdoor Ph	
During all trips off school property, the parent/gua ☐ A kit for Low Blood Sugar, Hypoglycemia ☐ Emergency Contact ☐ Cell phone (if parent/guardian chooses)	ardian will provide an excursion	kit which will consist of:

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 medication cannot be beyond the expiration date. This information may remain on file if there are no changes to the student's medical condition.

	AUTHO	PRIZATION/PLAN F	REVIEW	
INDIVIDU	ALS WITH WH	IOM THIS PLAN OF	CARE IS TO BE SHARED	
1.	2.		3.	
4.	5.		6.	
Other individuals to be cor	ntacted regard	ding 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 schoreviewed on or before:	
It is the parent(s)/guardian(s) responsibility to notify the plan of care and to inform the school of any char	
the school year.	
the school year. Consent to treatment: I am aware that school staff a all aspects of the plan to the best of their abilities ar	•
Consent to treatment: I am aware that school staff a	nd in good faith.
Consent to treatment: I am aware that school staff a all aspects of the plan to the best of their abilities ar Parent(s)/Guardian(s):	nd in good faith. Date:

Toronto Catholic District School Board



DRAFT

Student Plan of Care for

EPILEPSY and SEIZURE DISORDER

School Year: 20__- 20__

Student Name	Date of Birth	Gender	Student Photo
Address		Student #	
Exceptionality	Teacher(s)	Medic Alert I.D.	
		Yes □ No □	
Grade	Age	OEN#	

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

(HAVE ABILITY TO ADD MORE CONTACTS)

Appendix I

EPILEPSY AND SEIZURE DISORDER SUPPORTS				
Name of trained individuals who will provide support with epilepsy and seizure disorder-related tasks:				
Designated Staff:				
Local Health Integration No	etwork (LHIN) Care Wo	orkers (if applicable):		
Method of home-school co	ommunication:			
1 2	Any other medical condition or allergy? No Yes (Please list below) 1. 2.			
Has an emergency rescue medication been prescribed? 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.				
	MAIONA/NI CEIZI	LIDE TRICCERC		
		URE TRIGGERS		
✓ CHECK ALL THOSE THAT APPLY				
	- Manataual	— Incativity		
□ Stress	□ Menstrual Cycle	□ Inactivity		
☐ Changes In Diet	□ Lack Of Sleep	☐ Electronic Stimulation (TV, Videos, Florescent Lights)		
□ Illness	□ Improper Medication Balance			
☐ Change In Weather	□ Other			

DAILY ROUTINE EPILEPSY AND SEIZURE DISORDER 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		
Note: It is possible for a student to have Record information for each seizu	To the contract of the contrac	
SEIZURE TYPE	ACTIONS TO TAKE DURING SEIZURE	
(e.g. tonic-clonic, absence, simple partial, complex partial, atonic, myoclonic, infantile spasms) Type: Description:	-	
Frequency of seizure activity:		
Typical Seizure Duration:		
BASIC FIRST AID	D: CARE AND COMFORT	
First Aid procedure(s):		
Does student need to leave classroom after a se	eizure? □ Yes □ No	
If yes, describe process for returning student to	o classroom:	
BASIC SEIZURE FIRST AID: > Stay calm and track time and duration of the company	of seizure	

- > Do not restrain or interfere with student's movements
- > Do not put anything in student's mouth
- > Stay with student until fully conscious

FOR TONIC-CLONIC SEIZURE:

- Protect student's head
- ➤ Keep airway open/watch breathing
- > Turn student on side

DRAFT

Protocol for Prevalent Medical Conditions

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

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

EXCURSION PROTOCOL

Please refer to the Excursion Handbook when planning for excursions and ensure that accommodations are made for the student with Epilepsy and Seizure Disorders:

https://www.tcdsb.org/ProgramsServices/SchoolProgramsK12/HealthOutdoorPhysEd/
ExcursionHandbook/Documents/Excursion-Handbook-updated-Nov-30-2015.pdf

□ Emergency Contact
□ Cell phone (if parent/guardian/caregiver chooses)

HEALTHCARE PROVIDER INFORMATION (MANDATORY)		
ealthcare provider may include: Physician, Nurse Practitioner, Registered Nurse, Pharmespiratory Therapist, Certified Respiratory Educator, or Certified Asthma Educator.	acist,	
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 medication cannot be beyond the expiration date.
- 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			
4.			
Other individuals to be contacted regard	ding Plan of Ca	re:	
Before-School Program			
After-School Program ☐ Yes	□ No		
School Bus Driver/Route # (If applicable			
Other:			
**************************************	20 schoo	ol year without change and will be	
It is the parent(s)/guardian(s) responsibility to notify the principal if there is a need to change the plan of care and to inform the school of any change of medication or delivery device during the school year.			
Consent to treatment: I am aware that school staff are not medical professionals and perform all aspects of the plan to the best of their abilities and in good faith.			
Parent(s)/Guardian(s):(signature)		Date:	
Student: (signature for student 16 years of a	age or older)	Date:	
Principal:(signature)		Date:	



"Olic	General Student Plan of Care for
P.	Other Medical Conditions
Ol BOD	Please Specify:
	School Year: 20 20

Student Name	Date of Birth	Gender	Student Photo
Address		Student #	
Exceptionality	Teacher(s)	Medic Alert I.D.	
		Yes □ No □	
Grade	Age	OEN#	

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

(HAVE ABILITY TO ADD MORE CONTACTS)

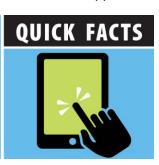
SUPPORTS				
Name of trained individuals who will provide support with	related tasks:			
Designated Staff:				
Local Health Integration Network (LHIN) Care Workers (if applicable):				
Method of home-school communication:				
Any other medical condition or allergy? □ No □ Yes (Please list below) 1				
2				
3				

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 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 medication cannot be beyond the expiration date. 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 Car	e:	
Before-School Program ☐ Y	es 🗆 No		
After-School Program	es 🗆 No		
School Bus Driver/Route # (If appl	icable)		
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 and to inform the school of any change of medication or delivery device during the school year.			
Consent to treatment: I am award all aspects of the plan to the best		e not medical professionals and perform in good faith.	
Parent(s)/Guardian(s):		Date:	
(sign	ature)		
Student:		Date:	
(signature for student 16 ye	ears of age or older)		
Principal:	 	Date:	
(signature,			

SUPPORTING

Ontario Children and Students with Medical Conditions



Supporting children and students at risk for anaphylaxis in Ontario

Promoting child and student well-being is one of the four key goals in "Achieving Excellence: A Renewed Vision for Education in Ontario." Ensuring the health and safety of children and students with medical conditions requires partnership among families, members of the school community and community partners, including health care professionals.

Anaphylaxis overview

Anaphylaxis (pronounced anna-fill-axis) is a serious and possibly life-threatening allergic reaction that requires immediate recognition and intervention. Symptoms can vary from person to person and may include:

- **Skin**: hives, swelling (face, lips and tongue), itching, warmth, redness
- **Breathing (respiratory)**: coughing, wheezing, shortness of breath, chest pain/tightness, throat tightness, hoarse voice, nasal congestion or hay fever-like symptoms (runny, itchy nose and watery eyes, sneezing), trouble swallowing
- Stomach (gastrointestinal): nausea, pain/cramps, vomiting, diarrhea
- Heart (cardiovascular): paler than normal/blue skin 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

Food allergy and anaphylaxis facts

- More than 1 million Ontarians are affected by a food allergy.
- There are about 138,000 students in Ontario with food allergies.
- There is no cure for food allergy, so avoidance is still the main way to prevent an allergic reaction.
- Food is one of the most common causes of anaphylaxis, but insect stings, medications, latex and exercise (alone or sometimes after eating a specific food) can also cause reactions.
- The recommended treatment for anaphylaxis is epinephrine (e.g., EpiPen®).





Living with allergies and the risk for anaphylaxis

Families with children who are at risk for anaphylaxis have to plan ahead and take precautionary measures. They can take preventive steps such as:

- being careful when reading food labels;
- · avoiding cross-contamination when preparing food; and
- asking questions before eating or drinking foods.

Children who are allergic to stinging insects should avoid areas near nests, particularly during warmer months. It is important that students at risk for anaphylaxis carry epinephrine (e.g., EpiPen®) when age appropriate and/or have it available at their school to be administered in case of a severe reaction. Students at risk for anaphylaxis can participate in all regular school activities. Teachers, staff and administration should be aware of students' medical conditions in case of emergency.

Creating an inclusive environment at school

All children at risk for anaphylaxis — no matter how independent they are — need the support of trusted, caring adults at school and elsewhere.

<u>Sabrina's Law</u> requires all district school boards and school authorities in Ontario to have an anaphylaxis policy in place to support students with potentially life-threatening allergies.

Anaphylaxis can cause a great deal of anxiety for students, families, teachers and other school staff. When speaking to children about anaphylaxis, it is important that they know you are comfortable talking about the issue, or they may keep questions or concerns private.

Ongoing communication between the school, the student and the family is essential, beginning when a student is diagnosed and starts school. Maintaining an open exchange of information is also important throughout the school year, especially if there are changes to the child's medical condition.

Families should work with the school to create an individualized Plan of Care for their child. The plan will include support strategies or ways to accommodate the student (e.g., regular hand washing for all children) so that they can participate to their full potential in school activities.

The Ministry of Education expects all district school boards and school authorities in Ontario to develop and maintain policies to support students with asthma, anaphylaxis, diabetes and epilepsy in schools.

Emergencies

In the case of an emergency related to anaphylaxis, school staff should refer to the child's individualized Plan of Care. In all emergency situations:

- 1. Stay calm.
- 2. Give epinephrine auto-injector (e.g., EpiPen®) at the first sign of a known or suspected anaphylactic reaction.
- 3. Dial 9-1-1.
- 4. Give a second dose of epinephrine as early as 5 minutes after the first dose if there is no improvement in symptoms.

- 5. Go to the nearest hospital right away (ideally by ambulance), even if symptoms are mild or have stopped. The reaction could get worse or come back.
- 6. Inform the emergency contact, as outlined in the student's Plan of Care.

Since anaphylaxis can be life-threatening, it must always be considered a medical emergency and treated promptly. If a child appears to be having an anaphylactic reaction, but you are not sure, it is better to err on the side of caution and use epinephrine. The drug will not cause harm if given unnecessarily to normally healthy children, and side effects are generally mild.

If a child has asthma and is also at risk for anaphylaxis, and it is unclear which emergency the child is experiencing:

- 1. first give epinephrine (e.g., EpiPen®) and dial 9-1-1 for an ambulance,
- 2. then give the reliever inhaler (usually a blue inhaler).

Where to find more information

Food Allergy Canada:

http://foodallergycanada.ca/resources/print-materials/

Allergy Aware:

<u>www.allergyaware.ca</u> (Free online courses about food allergy and anaphylaxis for school, child care and community settings)

Sabrina's Law:

https://www.ontario.ca/laws/statute/05s07

Healthy Schools, Ministry of Education:

http://www.edu.gov.on.ca/eng/healthyschools/medicalconditions.html

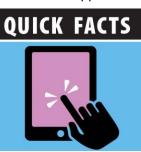


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SUPPORTING

Ontario Children and Students with Medical Conditions



Supporting children and students with asthma in Ontario

Promoting child and student well-being is one of the four key goals in "Achieving Excellence: A Renewed Vision for Education in Ontario." Ensuring the health and safety of children and students with medical conditions requires a partnership among families, members of the school community and community partners, including health care professionals.

Asthma overview

Asthma is a common chronic (long-term) lung disease that can make it hard to breathe. People with asthma have extra sensitive airways, that when triggered can tighten up, become swollen, produce extra mucus and make it hard to breathe.

Different people have different asthma symptoms, which can change over time and vary depending on the situation. Common asthma signs and symptoms include:

- shortness of breath
- wheezing (whistling sound from inside the chest)
- difficulty breathing
- · chest tightness
- coughing

Asthma facts

- · Asthma is typically managed with inhalers or "puffers."
- Asthma can be fatal. In 2013, 259 Canadians died from asthma (100 in Ontario).
- Asthma is most common during childhood and affects at least 13% of Canadian children.
- Over 2 million Ontarians have asthma, including one out of every five children.

Living with asthma

Asthma can't be cured. It is always present even when symptoms aren't. However, asthma can be managed, so that individuals can enjoy a full and active life. In consultation with a health-care professional, an asthma action plan should be developed. This plan outlines:

- What types of medications your children should take;
- Teaching your children to know when their asthma is starting to get out of control and when it is an emergency and what to do in an emergency; and
- Changes to the medications your child takes when having asthma symptoms.





Creating an inclusive environment at school

All children with asthma — no matter how independent they are — need the support of trusted, caring adults at school and elsewhere.

Ryan's Law requires all district school boards and school authorities to develop and maintain a policy to support students with asthma.

Ongoing communication between the school, the student and the family is essential, beginning when a student is diagnosed and starts school. Maintaining an open exchange of information is also important throughout the school year, especially if there are changes to their medical condition.

Families should work with the school to create an individualized Plan of Care for their child. The plan will include support strategies or ways to accommodate the students so that they can participate to their full potential in school activities.

The Ministry of Education expects all district school boards and school authorities in Ontario to develop and maintain policies to support students with asthma, anaphylaxis, diabetes and epilepsy in schools.

Emergencies

In the case of an emergency related to asthma, school staff should refer to the child's individualized Plan of Care. This plan has information about the child's emergency asthma medication, where it is kept, and when it should be used. In an emergency, the child should be taken to the hospital as soon as possible.

In all emergency situations:

- 1. Stay calm.
- 2. Immediately use reliever inhaler (usually a blue inhaler).
- 3. Dial 9-1-1.
- 4. If the symptoms continue, use the reliever inhaler every 5 15 minutes until medical help arrives.
- 5. Inform the emergency contact, as identified in the student's Plan of Care.

The <u>Lung Association Managing Asthma Attacks poster</u> has general instructions to follow when asthma symptoms increase or become severe.

If a child has asthma and is also at risk for anaphylaxis and it is unclear which emergency the child is experiencing:

- 1. first give epinephrine (e.g., EpiPen®) and dial 9-1-1 for an ambulance,
- 2. then give the reliever inhaler (usually a blue inhaler) as indicated above.

Where to find more information

Asthma Canada:

https://www.asthma.ca

The Lung Association – Ontario:

www.lungontario.ca/resources

www.ryanslaw.ca

Lung Health Information Line: 1-888-344-LUNG (5864)

Ryan's Law:

https://www.ontario.ca/laws/statute/15r03

Healthy Schools, Ministry of Education:

http://www.edu.gov.on.ca/eng/healthyschools/medicalconditions.html

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SUPPORTING

Ontario Children and Students with Medical Conditions



Supporting children and students with diabetes in Ontario

Promoting child and student well-being is one of the four key goals in "Achieving Excellence: A Renewed Vision for Education in Ontario." Ensuring the health and safety of children and students with medical conditions requires a partnership among families, members of the school community and community partners, including health care professionals.

Diabetes overview

Type 1 diabetes is a chronic condition where the pancreas stops producing insulin, a hormone that helps the body control the level of glucose (sugar) in your blood. The body produces glucose, and also gets it from foods that contain carbohydrates, such as bread, potatoes, rice, pasta, milk and fruit. Without insulin, glucose builds up in the blood instead of being used by your cells for energy. A lack of insulin can cause both short-term and long-term health problems. Symptoms of undiagnosed type 1 diabetes include:

- increased thirst
- increased urination
- a lack of energy
- weight loss

Type 1 diabetes occurs in about 1 in 300 children in Ontario. The cause of type 1 diabetes is not known. We do know that it is not caused by eating too much sugar, and it cannot be prevented. People with type 1 diabetes must receive insulin daily, either by injection or pump.

Type 2 diabetes can also affect children and youth, but it's more common in adults. With type 2 diabetes, the body does not respond well to insulin, and the pancreas cannot produce enough insulin to compensate. Type 2 diabetes can often be managed through changes to diet and lifestyle, as well as with oral medications (pills). Some children with type 2 diabetes may need insulin injections.

Living with diabetes

Blood sugar levels change throughout the day, and are affected by everyday activities like eating, walking, playing sports and writing tests. A healthy pancreas automatically releases just the right amount of insulin to keep blood sugar levels in a healthy range. It constantly adjusts, minute to minute, responding to how much food we eat, activity, stress and other factors.





Giving insulin by injection or through a pump cannot match the precision of a healthy pancreas. No matter how closely people with type 1 diabetes manage the condition, they still experience swings in blood sugar levels. This is why it is important to check blood sugar several times a day.

- If blood sugar goes too low, a fast-acting sugar (like juice or candy) must be consumed to raise blood sugar. Low blood sugar (hypoglycemia) can be dangerous if it is not treated right away.
- If blood sugar goes too high, it causes thirst and frequent urination. If high blood sugar (hyperglycemia) is left untreated, it can become dangerously high. Children should always be allowed access to water and the bathroom.

Younger children may require hands-on support to help with daily tasks such as checking their blood sugar or administering insulin.

Creating an inclusive environment at school

All children with diabetes — no matter how independent they are — need the support of trusted, caring adults at school and elsewhere.

Children with diabetes can participate in all activities, but may need some advanced planning and additional monitoring. Ongoing communication between the school, the student and the family is essential when a student is diagnosed with diabetes and starts school. Maintaining an open exchange of information remains important throughout the school year, particularly when there are significant changes in diabetes care or school routines.

Families are encouraged to work with the school to create an individualized Plan of Care for their child. The plan will include support strategies or ways to accommodate the students so they can participate to their full potential in school activities.

The Ministry of Education expects all district school boards and school authorities in Ontario to develop and maintain policies to support students with asthma, anaphylaxis, diabetes and epilepsy in schools.

Emergencies

In the case of an emergency related to diabetes, school staff should refer to the child's individualized Plan of Care. This plan has information about the child's condition and emergency contacts.

If mild low blood sugar is not treated right away, it can become severe. A child with severe low blood sugar may be confused, uncooperative (unable/unwilling to take food or drink), unresponsive, unconscious or have a seizure. This is an emergency. It is important to act immediately.

In all emergency situations:

- 1. Stay calm.
- 2. Do not leave the student alone.
- 3. Dial 9-1-1.
- 4. Inform the emergency contact, as identified in the student's Plan of Care.

Where to find more information

Diabetes at School:

http://www.diabetesatschool.ca/

Healthy Schools, Ministry of Education:

http://www.edu.gov.on.ca/eng/healthyschools/medicalconditions.html

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www.diabetesatschool.ca



Low blood sugar



What it is and what to do

When blood sugar is below 4 mmol/L, you must act IMMEDIATELY.

Do not leave a student alone if you think blood sugar is low.

Low blood sugar is also called **hypoglycemia**. It can be caused by:

- Too much insulin, and not enough food Delaying or missing a meal or a snack •
- Not enough food before an activity
 Unplanned activity, without adjusting food or insulin

Some of the most common symptoms of low blood sugar are:

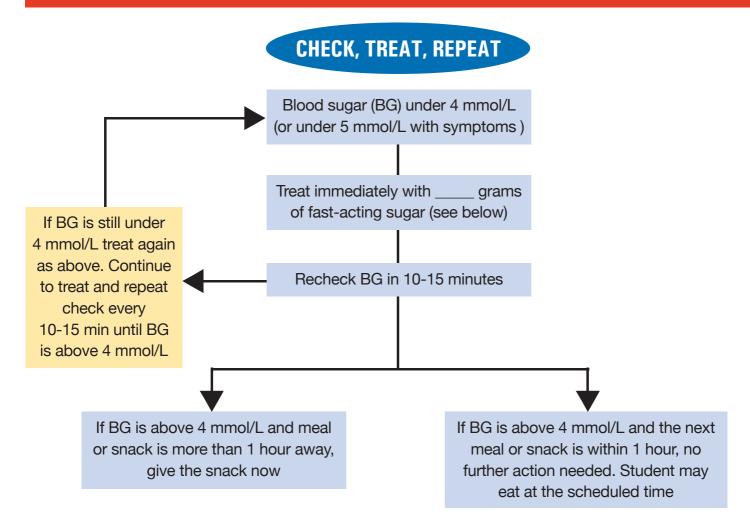


See other side for steps to take when you suspect a student has low blood sugar.

How to treat low blood sugar

Remember:

- Low blood sugar must be treated IMMEDIATELY
- 2. DO NOT leave a student alone if you suspect low blood sugar
- 3. Treat the low blood sugar **WHERE IT OCCURS**. Do not bring the student to another location. Walking may make blood sugar go even lower.
- 4. Even students who are independent may need help when their blood sugar is low



Give fast-acting sugar according to the student's care plan: either 10 g or 15 g

Amount of fast-acting sugar to give			
	10 g	15 g	
Glucose tablets	2 tablets	4 tablets	
Juice/pop	½ cup	¾ cup	
Skittles	10 pieces	15 pieces	
Rockets candy	1 pkg = 7 g	2 pkgs = 14 g	
Table sugar	2 tsp / 2 pkgs	1 Tbsp / 3 pkgs	

www.diabetesatschool.ca

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High blood sugar



What it is and what to do

High blood sugar (or hyperglycemia) occurs when a student's blood sugar is higher than the target range. It is usually caused by:

- extra food, without extra insulin
- not enough insulin
- · decreased activity

Blood sugar also rises because of illness, stress, or excitement. Usually, it is caused by a combination of factors.

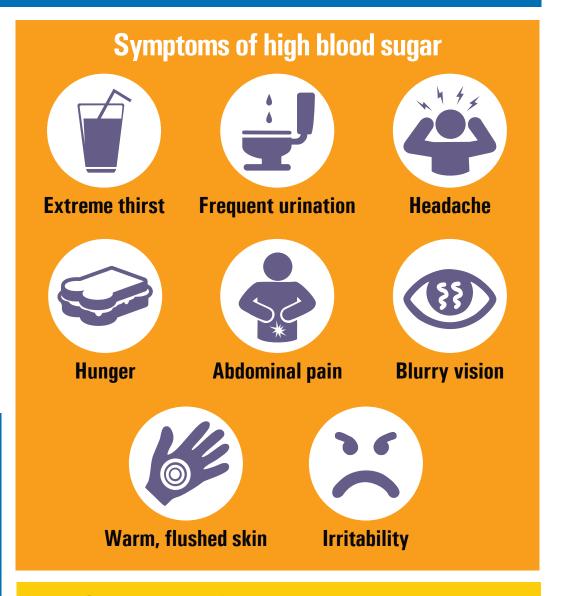
Students are not usually in immediate danger from high blood sugar unless they are vomiting, breathing heavily or lethargic. They may have difficulty concentrating in class.

What to do

Check blood sugar. Even students who are independent may need help if they are unwell.

Contact parents immediately if a student is unwell, has severe abdominal pain, nausea, vomiting or symptoms of severe high blood sugar.

If the student is well, follow instructions for high blood sugar in their care plan. Allow unlimited trips to the washroom, and encourage them to drink plenty of water.



Symptoms of VERY high blood sugar



Rapid, shallow breathing



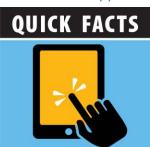
Vomiting



Fruity breath

SUPPORTING

Ontario Children and Students with Medical Conditions



Supporting children and students with epilepsy in Ontario

Promoting child and student well-being is one of the four key goals in "Achieving Excellence: A Renewed Vision for Education in Ontario." Ensuring the health and safety of children and students with medical conditions requires a partnership among families, members of the school community and community partners, including health care professionals.

Epilepsy overview

Epilepsy results from sudden bursts of hyperactivity in the brain; this causes "seizures" which vary in form, strength, and frequency, depending on where in the brain abnormal activity is found. **Epilepsy is the diagnosis and seizures are the symptom.** If a person has two or more seizures that are not related to another condition, that person will be diagnosed as having epilepsy.

Epilepsy facts

- Each year 15,500 Canadians are diagnosed as having epilepsy.
- Epilepsy affects over 300,000 Canadians and approximately 1 in 100 Canadian students.
- Seizures can range from a prolonged stare in which the student is fully aware, to a loss of awareness, physical convulsions, or the student's whole body becoming stiff. While surgery is sometimes an option, the most common way of managing epilepsy is single or multiple drug therapies.

Living with epilepsy

When managed effectively an individual with epilepsy can pursue a regular and productive life. Often times, the social anxiety and stigma around epilepsy is more detrimental to an individual's quality of life than the physical symptoms of the condition. Some triggers for epilepsy include alcohol, unmanaged stress and environmental conditions (e.g., flashing lights). When avoiding these triggers, an individual should not be prevented from participating fully in any form of activity. With effective management and accommodation, living with epilepsy should not be a barrier to success.

Creating an inclusive environment at school

All children with epilepsy — no matter how independent they are — need the support of trusted, caring adults at school and elsewhere.





Making children aware of different medical conditions is essential to creating an inclusive environment. Once a child is diagnosed with epilepsy, parents should explain to the child in simple language what the condition is and why it happens. Encouraging children and students to speak to their friends about their condition will help them to find support and understanding amongst their peers.

Ongoing communication between the school, the student and the family is essential when a student is diagnosed with epilepsy and is starting school. Maintaining an open exchange of information is also important throughout the school year, especially if there are changes to the student's medical condition.

Families should work with the school to create an individualized Plan of Care for their child. The plan will include support strategies or ways to accommodate student's so they can participate to their full potential in school activities.

The Ministry of Education expects all district school boards and school authorities in Ontario to develop and maintain policies to support students with asthma, anaphylaxis, diabetes, and epilepsy in schools.

Emergencies

In the case of an emergency related to epilepsy, school staff should refer to the child's individualized Plan of Care. When an epileptic event is happening, it is important to stay calm and support the individual having the seizure. It is not essential to call 9-1-1 when someone is having a seizure; however, if the seizure lasts more than 5 minutes, or repeats without full recovery, seek medical assistance immediately. If you witness a student having a seizure, do not restrain the child, but try to move sharp and cornered objects away in order to prevent injury, and let the seizure run its course.

In all emergency situations:

- 1. Stay calm.
- 2. Dial 9-1-1.
- 3. Inform the student's emergency contact, as outlined in their Plan of Care.

Where to find more information

Epilepsy Ontario:

http://epilepsyontario.org/

Healthy Schools, Ministry of Education:

http://www.edu.gov.on.ca/eng/healthyschools/medicalconditions.html

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Toronto Catholic District School Board - Exchange of Information for Students

Appendix P

O Elementary to Secondary

(To be completed by the grade 8 Teacher, SS Teacher in consultation with the Special Education Teacher (as applicable) and the School Principal)

THIS DOCUMENT IS INTENDED TO BE AN O.S.R INSERT AND, AS SUCH, IS SUBJECT TO THE SAME SECURITY AND PROTECTION AFFORDED ALL SUCH INFORMATION "Personal information contained on this form is collected under the authority of Section 170 of the Education Act, R.S.O 1990 and will be used to place the student in secondary school. Questions about this collection should be directed to the school principal or the parent/guardian."

Student Name:		Current School:		French in Grade 9:	
Student D.O.B:		Student O.E.N Number:		Requesting Immersion:	YES C NO C
Date of Entry to Canada if applicable: New School Applied To:		Requesting Extended: Requesting French Exempt	YES C NO C		
Special Education Current Level of Achievement:		el of Achievement:		nguage Learners	
IPRC:	YES C NO C	1=50-59% 2=60-69		English Language Learner:	YES C NO C
IEP:	YES C NO C	Mathematics Level:	1 C 2 C 3 C 4 C	ESL Support:	YES C NO C
Accommodations:	YES C NO C	Grade Level Achieved for I	EP Students:	ELD Support	YES C NO C
Modifications:	YES C NO C	Language Arts:	1 C 2 C 3 C 4 C		vel of Proficiency:
Alternative:	YES C NO C	Grade Level Achieved for I	EP Students:	Current Placement	Secondary Placement
Exceptionality:			el of Study in High School	Step 1 C	ESL/ELD AO C
		Academic C	Applied C	Step 2 C	ESL/ELD BO C
		Locally Developed C	Applicu	Step 3 C	ESL/ELD CO C
Class Placement:			Discos describe heless in secondary	Step 4 C	ESL/ELD DO C
	WEG O NO O	(Please describe below in comments)	* Step 5 and 6 take grade 9 regular app	plied or Academic English courses
Referral Pending	YES C NO C	Gr. 6 EQAO	Grade 7 CAT 4 Stanine:	MEDICAL CO	
SIP Claim		R:	Math:	Anaphylaxis C Diabetes	Asthma C
SEA Claim	YES C NO C	W:	Language:	Other C	Seizures C
Transportation	YES C NO C	M:	Reading:		
STUDENT'S STRENGTHS	STUDENT'S CHALLENGES	INTERVENTIONS TO DATE	ACCOMODATIONS and /or MODIFICATIONS	SUGGESTED FUTURE SCHOOL	SUGGESTED FUTURE CLASSROOM
	I				
C Attendance/punctuality			IN IEP	INTERVENTIONS	INTERVENTIONS
C Attendance/punctuality	C Attendance/punctuality	C Attendance Counsellor	C Tracking homework/assign	INTERVENTIONS C Attendance Counseller	INTERVENTIONS C Class seating arrangement
C Submitting assignments	C Attendance/punctuality C Submitting assignments	C Attendance Counsellor C Parent conferences			
•	•		C Tracking homework/assign	C Attendance Counseller	C Class seating arrangement
C Submitting assignments	C Submitting assignments	C Parent conferences	C Tracking homework/assign C Resource re: tests/assignments	C Attendance Counseller C Parent conferences	C Class seating arrangement C Set clear expectations
C Submitting assignments C Homework completion	C Submitting assignments C Homework completion	C Parent conferences C Remedial support	C Tracking homework/assign C Resource re: tests/assignments C Extra time for test/assignments	C Attendance Counseller C Parent conferences C Remedial support	C Class seating arrangementC Set clear expectationsC Monitor note/homework
C Submitting assignmentsC Homework completionC General learning skills	C Submitting assignmentsC Homework completionC General learning skills	C Parent conferences C Remedial support C Peer mentor/buddy	C Tracking homework/assign C Resource re: tests/assignments C Extra time for test/assignments C Peer helper in class/resource	C Attendance Counseller C Parent conferences C Remedial support C Peer mentor/buddy	C Class seating arrangementC Set clear expectationsC Monitor note/homeworkC Monitor assignment
C Submitting assignmentsC Homework completionC General learning skillsC Test performance	C Submitting assignmentsC Homework completionC General learning skillsC Test performance	C Parent conferences C Remedial support C Peer mentor/buddy C Board services support	C Tracking homework/assign C Resource re: tests/assignments C Extra time for test/assignments C Peer helper in class/resource C Audio tape texts/voice to print	C Attendance Counseller C Parent conferences C Remedial support C Peer mentor/buddy C Board services support	 C Class seating arrangement C Set clear expectations C Monitor note/homework C Monitor assignment C Daily use of agenda
C Submitting assignmentsC Homework completionC General learning skillsC Test performanceC Conduct/attitude	 C Submitting assignments C Homework completion C General learning skills C Test performance C Conduct/attitude 	C Parent conferencesC Remedial supportC Peer mentor/buddyC Board services supportC Community agency	C Tracking homework/assign C Resource re: tests/assignments C Extra time for test/assignments C Peer helper in class/resource C Audio tape texts/voice to print C Study Skills/Modify homework	C Attendance Counseller C Parent conferences C Remedial support C Peer mentor/buddy C Board services support C Community agency	 C Class seating arrangement C Set clear expectations C Monitor note/homework C Monitor assignment C Daily use of agenda C Engage in lesson
 C Submitting assignments C Homework completion C General learning skills C Test performance C Conduct/attitude C Focus and attention 	 C Submitting assignments C Homework completion C General learning skills C Test performance C Conduct/attitude C Focus and attention 	C Parent conferences C Remedial support C Peer mentor/buddy C Board services support C Community agency C Accommodations	C Tracking homework/assign C Resource re: tests/assignments C Extra time for test/assignments C Peer helper in class/resource C Audio tape texts/voice to print C Study Skills/Modify homework C Photocopied notes	C Attendance Counseller C Parent conferences C Remedial support C Peer mentor/buddy C Board services support C Community agency C Accomodations	C Class seating arrangement C Set clear expectations C Monitor note/homework C Monitor assignment C Daily use of agenda C Engage in lesson C "Chunk" assignments
 C Submitting assignments C Homework completion C General learning skills C Test performance C Conduct/attitude C Focus and attention C Co-curricular activities 	C Submitting assignments C Homework completion C General learning skills C Test performance C Conduct/attitude C Focus and attention C "At Risk" activities	C Parent conferences C Remedial support C Peer mentor/buddy C Board services support C Community agency C Accommodations C ESL/ELD Support C In-class support C Guidance	C Tracking homework/assign C Resource re: tests/assignments C Extra time for test/assignments C Peer helper in class/resource C Audio tape texts/voice to print C Study Skills/Modify homework C Photocopied notes C Reduction of content as needed	C Attendance Counseller C Parent conferences C Remedial support C Peer mentor/buddy C Board services support C Community agency C Accomodations C ESL/ELD Support	C Class seating arrangement C Set clear expectations C Monitor note/homework C Monitor assignment C Daily use of agenda C Engage in lesson C "Chunk" assignments C Variety teaching strategies
 C Submitting assignments C Homework completion C General learning skills C Test performance C Conduct/attitude C Focus and attention C Co-curricular activities C Social relationships 	C Submitting assignments C Homework completion C General learning skills C Test performance C Conduct/attitude C Focus and attention C "At Risk" activities C Social relationships	C Parent conferences C Remedial support C Peer mentor/buddy C Board services support C Community agency C Accommodations C ESL/ELD Support C In-class support	C Tracking homework/assign C Resource re: tests/assignments C Extra time for test/assignments C Peer helper in class/resource C Audio tape texts/voice to print C Study Skills/Modify homework C Photocopied notes C Reduction of content as needed C Oral assessment	C Attendance Counseller C Parent conferences C Remedial support C Peer mentor/buddy C Board services support C Community agency C Accomodations C ESL/ELD Support C Review student schedule	C Class seating arrangement C Set clear expectations C Monitor note/homework C Monitor assignment C Daily use of agenda C Engage in lesson C "Chunk" assignments C Variety teaching strategies C Restrict out of class time
C Submitting assignments C Homework completion C General learning skills C Test performance C Conduct/attitude C Focus and attention C Co-curricular activities C Social relationships C EQAO/ Report Results	C Submitting assignments C Homework completion C General learning skills C Test performance C Conduct/attitude C Focus and attention C "At Risk" activities C Social relationships C Anxiety/Stress/Health	C Parent conferences C Remedial support C Peer mentor/buddy C Board services support C Community agency C Accommodations C ESL/ELD Support C In-class support C Guidance C School Psychologist C School Social Worker	C Tracking homework/assign C Resource re: tests/assignments C Extra time for test/assignments C Peer helper in class/resource C Audio tape texts/voice to print C Study Skills/Modify homework C Photocopied notes C Reduction of content as needed C Oral assessment C Computer Assistance C E.A. assistance C Spell checker/Help with editing	C Attendance Counseller C Parent conferences C Remedial support C Peer mentor/buddy C Board services support C Community agency C Accomodations C ESL/ELD Support C Review student schedule C Alternative education	C Class seating arrangement C Set clear expectations C Monitor note/homework C Monitor assignment C Daily use of agenda C Engage in lesson C "Chunk" assignments C Variety teaching strategies C Restrict out of class time C Notify parents re: progress
C Submitting assignments C Homework completion C General learning skills C Test performance C Conduct/attitude C Focus and attention C Co-curricular activities C Social relationships C EQAO/ Report Results C Literacy skills	C Submitting assignments C Homework completion C General learning skills C Test performance C Conduct/attitude C Focus and attention C "At Risk" activities C Social relationships C Anxiety/Stress/Health C Motivation	C Parent conferences C Remedial support C Peer mentor/buddy C Board services support C Community agency C Accommodations C ESL/ELD Support C In-class support C Guidance C School Psychologist C School Social Worker	C Tracking homework/assign C Resource re: tests/assignments C Extra time for test/assignments C Peer helper in class/resource C Audio tape texts/voice to print C Study Skills/Modify homework C Photocopied notes C Reduction of content as needed C Oral assessment C Computer Assistance C E.A. assistance	C Attendance Counseller C Parent conferences C Remedial support C Peer mentor/buddy C Board services support C Community agency C Accomodations C ESL/ELD Support C Review student schedule C Alternative education C Guidance support	C Class seating arrangement C Set clear expectations C Monitor note/homework C Monitor assignment C Daily use of agenda C Engage in lesson C "Chunk" assignments C Variety teaching strategies C Restrict out of class time C Notify parents re: progress C Ongoing praise/feedback

Student Name:		Student Number:
Comments		
☐ A copy of the Behaviour/Safety Plan h	nas been shared with receiving school.	c Transition plan has been completed.
☐ Student Plan of Care has been shared	d with receiving school.	
Copies to: Student OSR C	Student Success Teacher C	Guidance Teacher C
Parent C	Special Education Teacher C	ESL Teacher
1 dione		_
Sending School Principal Signature:	Page 239 of 320	Date:
	1 456 257 01 320	



Medical Conditions Staff Training Log

Retain in binder labelled *Medical Conditions**Training must be completed at *minimum* twice a year*

Please check medical conditions that apply:				
Anaphylaxis		□ Epilepsy and Seizure Disorders		
□ Ast		□ Other		
□ Diabetes				
Date of Training: (DD-MM-YYYY)		Presenter:		
Staff Name	Signature	Staff Name	Signature	



STUDENT SCHOOL EMERGENCY EVACUATION RESPONSE PLAN

1.	1. STUDENT INFORMATION			
Na	me:	EA Name(s) (if applicable):		
Gr	ade:	CYW Name(s) (if applicable):		
Da	ily Schedule and Classroom Locations (attachr	ment if necessary):		
2.	EMERGENCY EVACUATION ASSESSMENT			
Does the student experience any of the following that could impede the ability to quickly evacuate the workplace?				
a.	Mobility limitations; interference with walking, using device (i.e. wheelchair, scooter, cane, crutches, v		□ yes	□ no
b.	Vision impairment/loss		□ yes	□ no
C.	Hearing impairment/loss		□ yes	□ no
d.	Other (please specify):		□ yes	□ no
3.	COMMUNICATION NEEDS & ACCOMMODA	TIONS		
Indicate the student's preferred method of communication in an emergency situation. List any assistive communication devices and/or accommodations required. Example: student with hearing impairment may require assistive device to receive emergency evacuation information.				

4. CONDITIONS, SENSITIVITIES, DISABILITIES & ACCOMMODATIONS SUMMARY
Indicate any temporary or long term conditions, sensitivities and/or disabilities that may affect the well-being and safety of the student during emergency response.
Emergency Assistance Required:
5. STUDENT PERSONAL EMERGENCY PREPAREDNESS KIT
Student Personal Emergency Preparedness Kit required? ☐ yes ☐ no
List Contents (i.e. emergency supply of medication, food for specific dietary needs, personal assistive equipment and batteries, emergency health & contact information, etc.):
Location of Student's Personal Emergency Preparedness Kit:

6.	EMERGENCY EVACUATION ROUTES
Indic	cate primary accessible evacuation route from workplace, noting any accessibility accommodations required. ere applicable, attach site map/fire safety plan and identify meeting location.
Indic	cate alternative evacuation route from classroom, noting any accessibility accommodations required.
Whe	ere applicable, attach site map/fire safety plan and identify meeting location.

7. EMERGENCY ASSISTANCE NETWORK

Establish staff to assist the student with a disability during emergencies. Staff should: • be physically and mentally capable of performing the task and not require assistance themselves • share the same hours in the same area as the student they will be assisting			
The student requiring a School Emergency Evacuation Response Plan should be aware of those who will be notified to assist them during an emergency. A minimum of 2 people is recommended for the Emergency Assistance Network.			
Network Leader Name:	Name:		
Classroom/Department:	Classroom/Department:		
Contact Info:	Contact Info:		
Name:	Name:		
Classroom/Department:	Classroom/Department:		
Contact Info:	Contact Info:		
8. ACKNOWLEDGEMENT & RELEASE Reason for review: new admission change in Principal's Signature	classroom location		
I acknowledge that the information contained on this form is accurate and hereby authorize Toronto Catholic District School Board to release applicable personal information contained within the Student School Emergency Response Plan to designated individuals within my son's or daughter's Emergency Assistance Network and emergency/first responders, in the event of a school emergency evacuation situation.			
Parent's Signature Date			
PLEASE ENSURE THAT THE ORIGINAL COMPLETED STUDENT SCHOOL EMERGENCY EVACUATION RESPONSE FORM (WITH ATTACHMENTS) IS ACCESSIBLE TO ALL STAFF IN THE EVENT OF AN EMERGENCY AND A COPY FILED IN THE SCHOOL OFFICE.			
All personal information collected on this form and any attachments herein will be used for Student School Emergency Evacuation Response purposes only and will remain confidential as per MFIPPA unless written consent is obtained from the student's parent(s) or quardians (completion of Section 8).			



Policy/Program Memorandum No. 161

Date of Issue: February 28, 2018 Effective: September 1, 2018

Subject: SUPPORTING CHILDREN AND STUDENTS WITH PREVALENT MEDICAL

CONDITIONS (ANAPHYLAXIS, ASTHMA, DIABETES, AND/OR EPILEPSY)

IN SCHOOLS

Application: Directors of Education

Supervisory Officers and Secretary-Treasurers of School Authorities

Principals of Elementary Schools Principals of Secondary Schools

Principals of Provincial and Demonstration Schools

INTRODUCTION

To promote the safety and well-being of students,¹ the Ministry of Education expects all school boards² in Ontario to develop and maintain a policy or policies to support students in schools³ who have asthma, diabetes, and/or epilepsy, and/or are at risk for anaphylaxis. These medical conditions, hereafter referred to as prevalent medical conditions,⁴ have the potential to result in a medical incident⁵ or a life-threatening medical emergency.

The purpose of this memorandum is to provide direction to school boards about the components that should be included in their policy or policies to support students with prevalent medical conditions in schools. This memorandum must not be implemented in a manner that violates existing provisions of collective agreements and related memoranda of understanding among parties to such agreements.

School board policies should be implemented as soon as possible, but no later than September 1, 2018.

As stipulated in Sabrina's Law, 2005, and Ryan's Law, 2015, all school boards must have policies to support students at risk for anaphylaxis and students with asthma. School boards should review their policies on anaphylaxis and asthma and ensure that their policies, at a minimum, meet the expectations outlined in this memorandum.

If school boards currently have policies to support students with diabetes or epilepsy, boards should ensure that their policies, at a minimum, meet the expectations outlined in this memorandum.

^{1.} In this memorandum, unless otherwise stated, student(s) includes children in Kindergarten and students in Grades 1 to 12.

^{2.} In this memorandum, school board(s) and board(s) refer to district school boards and school authorities.

^{3.} In this memorandum, *school* refers to all school and school-board activities, including field trips, overnight excursions, board-sponsored sporting events, and board-operated before- and after-school programs for children aged 4 to 12 years.

^{4.} In this memorandum, unless otherwise stated, *prevalent medical conditions* are limited to asthma, diabetes, epilepsy, and anaphylaxis, when diagnosed for a student by a medical doctor or a nurse practitioner.

^{5.} A *medical incident* is a circumstance that requires an immediate response and monitoring, since the incident may progress to an emergency requiring contact with Emergency Medical Services. See also "Emergency Response" on page 8.



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This memorandum complements other Ministry of Education policies and programs, including those that serve students with special education needs. Its implementation should be aligned with that of other memoranda, including Policy/Program Memoranda Nos. 81and 149.⁶

ROLES AND COLLECTIVE RESPONSIBILITIES

Supporting students with prevalent medical conditions in schools is complex. A whole-school approach is needed where education and community partners, including health care professionals, have important roles to play in promoting student health and safety and in fostering and maintaining healthy and safe environments in which students can learn.

To support school boards, the Ministry of Education is providing evidence-based resources online, on the ministry's Prevalent Medical Conditions web portal. These resources have been developed by various health and education partners (Asthma Canada, Diabetes Canada, Canadian Paediatric Society, Epilepsy Ontario, Food Allergy Canada, The Lung Association – Ontario, Ophea, and Ontario Education Services Corporation).

The ministry will continue to engage in dialogue with school boards and education partners, sharing information and best practices, to ensure successful implementation of board policies.

SCHOOL BOARD POLICIES ON PREVALENT MEDICAL CONDITIONS

In developing, revising, implementing, and maintaining their policies to support students with prevalent medical conditions, school boards must respect their obligations under all applicable legislation, policies, and collective agreements. School boards should also take into account local needs and circumstances, such as geographical considerations, demographics, and cultural considerations, as well as the availability of supports and resources, including school staff, within the school board and the community.

A culture of collaborative professionalism is grounded in a trusting environment where schools, school boards, federations, unions, and the ministry create the necessary conditions, including consideration of time and resources, that enable education stakeholders to learn with, and from, each other.

In developing or revising their policies, school boards should consult with students, parents, ⁹ principals' associations, teachers' federations, education workers' unions, school staff, volunteers working in the schools, their school councils, Joint Health and Safety Committees, and community health care

^{6.} Policy/Program Memorandum No. 81, "Provision of Health Support Services in School Settings", July 19, 1984, and Policy/Program Memorandum No. 149, "Protocol for Partnerships with External Agencies for Provision of Services by Regulated Health Professionals, Regulated Social Service Professionals, and Paraprofessionals", September 25, 2009. 7. In this memorandum, *health care professional* refers to a member of a College under the Regulated Health Professions Act, 1991 (e.g., medical doctor, nurse practitioner, registered nurse, pharmacist).

^{8.} In this memorandum, unless otherwise noted, *school staff* refers to all school staff, including occasional staff. This memorandum does not intend to prescribe, duplicate, or remove any duties already performed by these staff.

^{9.} In this memorandum, *parent(s)* refers to parent(s) and guardian(s).

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professionals. This consultation should also include Parent Involvement Committees¹⁰ and Special Education Advisory Committees.

Components of School Board Policies

All school board policies on supporting students with prevalent medical conditions are expected to contain, at a minimum, the following components.

1. Policy Statement

The school board policy statement on supporting students with prevalent medical conditions should, at a minimum, include the following goals:

- to support students with prevalent medical conditions to fully access school in a safe, accepting, and healthy learning environment that supports well-being
- to empower students, as confident and capable learners, to reach their full potential for self-management ¹¹ of their medical condition(s), according to their Plan of Care ¹²

2. Roles and Responsibilities

School board policies should clearly articulate the expected roles and responsibilities of parents and school staff in supporting students with prevalent medical conditions, as well as the roles and responsibilities of the students themselves. School board policies should also contain a requirement that schools communicate the roles and responsibilities clearly to parents, students, and school staff.

a) Parents of Children with Prevalent Medical Conditions

As primary caregivers of their child, parents are expected to be active participants in supporting the management of their child's medical condition(s) while the child is in school. At a minimum, parents should:

- educate their child about their medical condition(s) with support from their child's health care professional, as needed;
- guide and encourage their child to reach their full potential for self-management and selfadvocacy;
- inform the school of their child's medical condition(s) and co-create the Plan of Care for their child with the principal or the principal's designate;

^{10.} Parent Involvement Committees are established under O. Reg. 612/00.

^{11. &}quot;Self-management" of medical conditions can be understood to exist along a continuum where students' cognitive, emotional, social, and physical capacity and stage of development are determinants of their ability to confidently and independently manage their medical condition(s). The students' journey to reach their full potential along the self-management continuum is not linear and can require varying levels of support over time. A student's capacity for self-management may be compromised during certain medical incidents, and additional support will be required. As a student's needs change, the Plan of Care would need to be adjusted accordingly.

^{12.} A Plan of Care is a form that contains individualized information on a student with a prevalent medical condition. See section 3 for details.



- communicate changes to the Plan of Care, such as changes to the status of their child's medical condition(s) or changes to their child's ability to manage the medical condition(s), to the principal or the principal's designate;
- confirm annually to the principal or the principal's designate that their child's medical status is unchanged;
- initiate and participate in annual meetings to review their child's Plan of Care;
- supply their child and/or the school with sufficient quantities of medication and supplies in their original, clearly labelled ¹³ containers, as directed by a health care professional and as outlined in the Plan of Care, and track the expiration dates if they are supplied;
- seek medical advice from a medical doctor, nurse practitioner, or pharmacist, where appropriate.

b) Students with Prevalent Medical Conditions

Depending on their cognitive, emotional, social, and physical stage of development, and their capacity for self-management, students are expected to actively support the development and implementation of their Plan of Care. Students should:

- take responsibility for advocating for their personal safety and well-being that is consistent with their cognitive, emotional, social, and physical stage of development and their capacity for selfmanagement;
- participate in the development of their Plan of Care;
- participate in meetings to review their Plan of Care;
- carry out daily or routine self-management of their medical condition to their full potential, as described in their Plan of Care (e.g., carry their medication and medical supplies; follow school board policies on disposal of medication and medical supplies);
- set goals on an ongoing basis for self-management of their medical condition, in conjunction with their parent(s) and health care professional(s);
- communicate with their parent(s) and school staff if they are facing challenges related to their medical condition(s) at school;
- wear medical alert identification that they and/or their parent(s) deem appropriate;
- if possible, inform school staff and/or their peers if a medical incident or a medical emergency occurs.

c) School Staff

School staff should follow their school board's policies and the provisions in their collective agreements related to supporting students with prevalent medical conditions in schools. School staff should, for example:

- review the contents of the Plan of Care for any student with whom they have direct contact;
- participate in training, during the instructional day, on prevalent medical conditions, at a minimum annually, as required by the school board;

^{13.} In Ontario, the labelling requirements, i.e., identification markings on a container in which a drug is dispensed, are set out in section 156(3) of the Drug and Pharmacies Regulation Act, R.S.O. 1990, c. H.4.



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- share information on a student's signs and symptoms with other students, if the parents give consent to do so and as outlined in the Plan of Care and authorized by the principal in writing;
- follow school board strategies that reduce the risk of student exposure to triggers or causative agents in classrooms, common school areas, and extracurricular activities, in accordance with the student's Plan of Care;
- support a student's daily or routine management, and respond to medical incidents and medical
 emergencies that occur during school, as outlined in board policies and procedures (in situations
 where school board staff already provide supports to students with prevalent medical conditions,
 and are already trained appropriately, this memorandum does not intend to prescribe, duplicate, or
 remove those duties or training);
- support inclusion by allowing students with prevalent medical conditions to perform daily or routine management activities in a school location (e.g., classroom), as outlined in their Plan of Care, while being aware of confidentiality and the dignity of the student;
- enable students with prevalent medical conditions to participate in school to their full potential, as outlined in their Plan of Care.

d) Principal

In addition to the responsibilities outlined above under "School Staff", the principal should:

- clearly communicate to parents and appropriate staff the process for parents to notify the school
 of their child's medical condition(s), as well as the expectation for parents to co-create, review,
 and update a Plan of Care with the principal or the principal's designate. This process should be
 communicated to parents, at a minimum:
 - during the time of registration;
 - each year during the first week of school;
 - when a child is diagnosed and/or returns to school following a diagnosis;
- co-create, review, or update the Plan of Care for a student with a prevalent medical condition with the parent(s), in consultation with school staff (as appropriate) and with the student (as appropriate);
- maintain a file with the Plan of Care and supporting documentation for each student with a prevalent medical condition;
- provide relevant information from the student's Plan of Care to school staff and others who are identified in the Plan of Care (e.g., food service providers, transportation providers, volunteers, occasional staff who will be in direct contact with the student), including any revisions that are made to the plan;
- communicate with parent(s) in medical emergencies, as outlined in the Plan of Care;
- encourage the identification of staff who can support the daily or routine management needs of students in the school with prevalent medical conditions, while honouring the provisions within their collective agreements.





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e) School Board

School boards are expected to communicate, on an annual basis, their policies on supporting students with prevalent medical conditions to parents, school board staff, and others in the school community who are in direct contact with students (e.g., food service providers, transportation providers, volunteers). At a minimum, school boards are expected to make their policies and their Plan of Care templates available on their public website in the language of instruction.

School boards are also expected to:

- provide training and resources on prevalent medical conditions on an annual basis;
- develop strategies that reduce the risk of student exposure to triggers or causative agents in classrooms and common school areas;
- develop expectations for schools to support the safe storage ¹⁴ and disposal of medication and medical supplies, and communicate these expectations to schools and support schools in the implementation of the expectations;
- communicate expectations that students are allowed to carry their medication and supplies to support the management of their medical condition, as outlined in their Plan of Care;
- consider this memorandum and related board policies when entering into contracts with transportation, food service, and other providers.

3. Plan of Care

A Plan of Care is a form that contains individualized information on a student with a prevalent medical condition. School board policies and procedures must include a Plan of Care form. The ministry is providing school boards with a sample Plan of Care, which is available online through the ministry's Prevalent Medical Conditions web portal. This sample has been developed in consultation with health and education partners.

If they are adapting the sample Plan of Care, school boards should include, at a minimum, all of the following elements:

- preventative strategies to be undertaken by the school to reduce the risk of medical incidents and exposure to triggers or causative agents in classrooms and common school areas
- identification of school staff who will have access to the Plan of Care
- identification of routine or daily management activities that will be performed by the student, parent(s), or staff volunteer(s), as outlined in school board policy, or by an individual authorized by the parent(s)
- a copy of notes and instructions from the student's health care professional, where applicable
- information on daily or routine management accommodation needs of the student (e.g., space, access to food) (where possible, a student should not be excluded from the classroom during daily or

^{14.} Safe storage includes the recommended storage condition(s) for medication and medical supplies. Part of the purpose of safe storage is to enable students to have ready access to their medication and medical supplies when they are not carrying the medication and supplies with them. Safe storage should also include storage considerations when the student is attending board-sponsored activities and travelling to and from such activities.





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routine management activities, unless the student or the parent(s) indicate they prefer exclusion)

- information on how to support or accommodate the student to enable participation to their full potential in all school and school board activities (e.g., field trips, overnight excursions, board-sponsored sporting events)
- identification of symptoms (emergency and other) and response, should a medical incident occur
- emergency contact information for the student
- clear information on the school board's emergency policy and procedures
- details related to storage and disposal of the student's prescribed medication(s) and medical supplies, such as:
 - parental permission for the student to carry medication and/or medical supplies
 - location of spare medication and supplies stored in the school, where applicable
 - information on the safe disposal of medication and medical supplies
- requirements for communication between the parent(s) and the principal (or the principal's designate) and/or school staff, as appropriate, including format and frequency
- parental consent (at the discretion of the parents) to share information on signs and symptoms with other students

The Plan of Care for a student with a prevalent medical condition should be co-created, reviewed, and/or updated by the parent(s) in consultation with the principal or the principal's designate, designated staff (as appropriate), and the student (as appropriate), during the first thirty school days of every school year and, as appropriate, during the school year (e.g., when a student has been diagnosed with a prevalent medical condition). Health care provider information and signature(s) are optional.

Parents have the authority to designate who is provided access to the Plan of Care. With authorization from the parents, the principal or the principal's designate should share the Plan of Care with school staff who are in direct contact with students with prevalent medical conditions and, as appropriate, others who are in direct contact with students with prevalent medical conditions (e.g., food service providers, transportation providers, volunteers).

4. Facilitating and Supporting Daily or Routine Management

In their policies, school boards should outline board expectations for providing supports¹⁵ to students with prevalent medical conditions in order to facilitate their daily or routine management activities in school.

Facilitating and supporting daily or routine management involves, but is not limited to, supporting inclusion by allowing students with prevalent medical conditions to perform daily or routine management activities in a school location (e.g., within a classroom, gymnasium, library, schoolyard; on a school bus; at a field trip location), as outlined in their Plan of Care.

^{15.} In situations where school board staff already provide supports (daily or routine management or other support) to students with diabetes and/or epilepsy, and are already trained appropriately, this memorandum does not intend to prescribe, duplicate, or remove those duties or training.

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5. Emergency Response

In their policies, school boards should outline board expectations for school staff responses to medical incidents and/or medical emergencies at school that involve students with prevalent medical conditions. At a minimum, the response should align with existing school board medical emergency procedures (e.g., immediate response, including use of emergency medication, and monitoring and/or calling Emergency Medical Services). The response should also align with the Plan of Care established for the student.

School boards should review their medical emergency procedures, consulting evidence-based materials that have been developed by health and education partners. See the resources available online through the ministry's Prevalent Medical Conditions web portal, referred to on page 2 of this memorandum.

6. Raising Awareness of Board Policy and of Evidence-Based Resources

School boards should raise awareness of their policies on prevalent medical conditions. They should also raise awareness of the range of evidence-based resources that provide information on various aspects of prevalent medical conditions, including triggers or causative agents, signs and symptoms characteristic of medical incidents and of medical emergencies, and school board emergency procedures. As stated above, such resources have been developed by health and education partners, and are available through the ministry's Prevalent Medical Conditions web portal.

Schools, also, should raise awareness of prevalent medical conditions that affect students. They can do so, for example, through curriculum content in classroom instruction, other related learning experiences, and classroom leadership opportunities. Awareness is especially important at times of transition (e.g., the move to a new school, the move from elementary to secondary school), when students have to face social, physiological, and environmental changes.

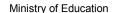
School boards should also make appropriate resources available to occasional staff and service providers, such as food service and transportation providers.

7. Training

School board policies should include strategies for providing training related to prevalent medical conditions, ¹⁶ at a minimum annually, for school staff who have direct contact with students with medical condition(s). Particular consideration should be given to the training needs of occasional staff. Training should take place within the student's first thirty days of school, where possible, to ensure the safety and well-being of the student, and should be reviewed as appropriate.

The scope of training should include the following:

- strategies for preventing risk of student exposure to triggers and causative agents
- strategies for supporting inclusion and participation in school
- recognition of symptoms of a medical incident and a medical emergency
- information on school staff supports, in accordance with board policy





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- medical incident response and medical emergency response
- documentation procedures

It is expected that school boards, in consultation with teachers' federations, principals' associations, and education workers' unions, will determine the scope of training required to support implementation of their policies, as well as the mode of delivery of the training and any privacy implications that may arise. The scope of training should be consistent with expected duties of school board staff, as outlined in school board policy.

To support school board training needs, evidence-based materials are available online through the ministry's Prevalent Medical Conditions web portal.

8. Safety Considerations

School board policies should:

- allow for students to carry their medication(s) (including controlled substances¹⁷) and supplies, as outlined in the Plan of Care;
- set expectations for schools to support the storage (according to the item's recommended storage conditions) and safe disposal of medication and medical supplies;
- include a process and appropriate resources to support students with prevalent medical conditions in the event of a school emergency (e.g., bomb threats, evacuation, fire, "hold and secure", lockdown)¹⁸ or for activities off school property (e.g., field trip, sporting event) (this process should also include considerations for occasional staff).

School boards are expected to provide schools with appropriate supplies to support safe disposal of medication and medical supplies.

In accordance with the requirement of the Child and Family Services Act, 1990, where board employees have reason to believe that a child may be in need of protection, board employees must call the Children's Aid Society and file a formal report.

9. Privacy and Confidentiality

School boards should have a policy in place regarding the confidentiality of students' medical information within the school environment, including practices for accessing, sharing, and documenting information. School boards must comply with applicable privacy legislation and obtain parental consent in the individual Plan of Care prior to sharing student health information with school staff or other students. Parents and school staff should be informed of the measures to protect the confidentiality of students' medical records and information.

^{17.} A *controlled substance* is a drug or narcotic, as set out under the federal Controlled Drugs and Substances Act.
18. The process should be aligned with the requirements set out in "Appendix B: Provincial Policy for Developing and Maintaining Lockdown Procedures for Elementary and Secondary Schools in Ontario" of the ministry document *Provincial Model for a Local Police/School Board Protocol*, revised 2015.



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10. Reporting

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Subject to relevant privacy legislation, school boards should develop a process to collect data regularly, including, but not limited to, data on the number of students with prevalent medical conditions at their schools, and should monitor the number of occurrences of medical incidents and medical emergencies, as well as the circumstances surrounding these events. School boards should use these data as part of their cyclical policy reviews.

Under the authority of paragraph 27.1 of subsection 8(1) of the Education Act, school boards will be required to report to the Minister of Education upon implementation and, upon request thereafter, on their activities to achieve the expectations outlined in this memorandum.

11. Liability

In 2001, the Ontario government passed the Good Samaritan Act to protect individuals from liability with respect to voluntary emergency medical or first-aid services. Subsections 2(1) and (2) of this act state the following with regard to individuals:

- 2. (1) Despite the rules of common law, a person described in subsection (2) who voluntarily and without reasonable expectation of compensation or reward provides the services described in that subsection is not liable for damages that result from the person's negligence in acting or failing to act while providing the services, unless it is established that the damages were caused by the gross negligence of the person.
- (2) Subsection (1) applies to,
- ... (b) an individual ... who provides emergency first aid assistance to a person who is ill, injured or unconscious as a result of an accident or other emergency, if the individual provides the assistance at the immediate scene of the accident or emergency.

As well, Sabrina's Law and Ryan's Law each include provisions limiting the liability of individuals who respond to an emergency relating to anaphylaxis or asthma, respectively, as cited below. Subsection 3(4) of Sabrina's Law states:

No action for damages shall be instituted respecting any act done in good faith or for any neglect or default in good faith in response to an anaphylactic reaction in accordance with this Act, unless the damages are the result of an employee's gross negligence.

Subsection 4(4) of Ryan's Law states:

No action or other proceeding for damages shall be commenced against an employee for an act or omission done or omitted by the employee in good faith in the execution or intended execution of any duty or power under this Act.



SPECIAL EDUCATION ADVISORY COMMITTEE

RESPONSE TO INQUIRY ON PAST PROGRAM IN SECONDARY, FROM THE MAY 17, 2017 SEAC MEETING

"How good and pleasant it is when God's people live together in unity!"

Psalm 133:1 (NIV)

Created, Draft	First Tabling	Review
May 16, 2018	May 16, 2018	Click here to enter a date.

P. Stachiw, Chief of Autism

C. Fernandes, Superintendent of Special Services

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.



R. McGuckin

Director of Education

D. Koenig

Associate Director of Academic Affairs

A. Sangiorgio

Associate Director of Planning and Facilities

L. Noronha

Executive Superintendent of Business Services and Chief Financial Officer

A. EXECUTIVE SUMMARY

This report provides a response an inquiry that took place at the Special Education Advisory Meeting that took place on May 17th, 2017 with respect to the possibility of extending the Program to Assist Social Thinking (PAST) in TCDSB secondary schools.

B. PURPOSE

- 1. The Program to Assist Social Thinking currently takes place in 6 TCDSB elementary schools and has seen success in students learning how to self-regulate and engage in social situations.
- 2. SEAC requested a report as to whether or not the Program to Assist Social Thinking (PAST) could be expanded to the secondary panel. This report responds to this request.

C. BACKGROUND

- 1. The Program to Assist Social Thinking (PAST) is a cognitive-behavioural approach that provides intensive support to students with Asperger's or high functioning Autism or Autism level 1. These students do not automatically assimilate the unwritten rules of social interaction. Students must be directly taught how to have successful interactions at home, at school and in their community.
- 2. The PAST Program focuses on enhancement of the perspective taking abilities of students. Skill areas addressed within this program are: understanding emotions of self and others; communication; cooperative play; development of relationships; understanding of diagnosis and self-advocacy.
- 3. The PAST Program focuses on students in grades 3-6 who are capable of functioning at grade level and are currently experiencing difficulty with social skills and/or behaviour.
- 4. The withdrawal program takes place one day per week for 6 students. Bussing is provided. The PAST Program teacher and support staff make scheduled visits to the home school to support the classroom teacher, provide peer training and to monitor the generalization of targeted skills in the regular

classroom. Staff from the home school who work with the student are invited to visit the program.

- 5. There are currently six PAST Programs running in five schools, D'Arcy McGee; St. Brigid; St. Florence; St. Louis (2); St. Martha. Weekly checklists are provided to the parent and classroom teacher to record student's performance of targeted skills.
- 6. In keeping with the mission of the TCDSB, time is spent each class helping the student to develop a personal relationship with God.

D. EVIDENCE/RESEARCH/ANALYSIS

- 1. The PAST Program is a program designed to teach specific skills to a small group of students in a dedicated space who are supported in the home school to help with generalization.
- 2. Secondary schools operate differently than their elementary counterparts:
 - Secondary schools do not offer programs that are one day per week withdrawal.
 - Secondary schools offer General Learning Strategies (GLE, GLS) courses. These courses are for students with an Individual Education Plan (IEP) and have a smaller average class size.
 - There is a mandated curriculum by the Ministry of Education.
 - Students may earn up to four GLE credits in their secondary career.
- 3. The following are a list of approved courses that a secondary school can offer.

Learning Strategies 1: Skills for Success in Secondary School, Grade 9, Open (GLS10)

This course focuses on learning strategies to help students become better, more independent learners. Students will learn how to develop and apply literacy and numeracy skills, personal management skills, and interpersonal and teamwork skills to improve their learning and achievement in school, the workplace, and the community. The course helps students build confidence and motivation to pursue opportunities for success in secondary school and beyond.

Prerequisite: None or recommendation of principal

Learning Strategies 1: Skills for Success in Secondary School, Grade 9, Open (GLE1O)

This course focuses on learning strategies to help students become better, more independent learners. Students will learn how to develop and apply literacy and numeracy skills, personal management skills, and interpersonal and teamwork skills to improve their learning and achievement in school, the workplace, and the community. The course helps students build confidence and motivation to pursue opportunities for success in secondary school and beyond.

Prerequisite: Recommendation of principal

Career Studies, Grade 10, Open (GLC2O)

This course teaches students how to develop and achieve personal goals for future learning, work, and community involvement. Students will assess their interests, skills, and characteristics and investigate current economic and workplace trends, work opportunities, and ways to search for work. The course explores postsecondary learning and career options, prepares students for managing work and life transitions, and helps students focus on their goals through the development of a career plan.

Prerequisite: None

Learning Strategies 1: Skills for Success in Secondary School, Grade 10, Open (GLE2O)

This course focuses on learning strategies to help students become better, more independent learners. Students will learn how to develop and apply literacy and numeracy skills, personal management skills, and interpersonal and teamwork skills to improve their learning and achievement in school, the workplace, and the community. The course helps students build confidence and motivation to pursue opportunities for success in secondary school and beyond.

Prerequisite: Recommendation of principal

Discovering the Workplace, Grade 10, Open (GLD2O)

This course provides students with opportunities to discover and develop the workplace

Essential skills and work habits required to be successfully employed. Students will develop an understanding of work through practical hands-on experiences in the school and in the community, using real workplace materials. They investigate occupations of interest through experiential learning opportunities (such as worksite visits, job shadowing, work

experience, simulations and entrepreneurial projects). This course helps students make plans for continued learning and work.

Prerequisite: None

Designing Your Future, Grade 11, Open (GWL30)

This course prepares students to make successful transitions to postsecondary destinations as they investigate specific postsecondary options based on their skills, interests, and personal characteristics. Students will explore the realities and opportunities of the workplace and examine factors that affect success, while refining their job-search and employability skills. Students will develop their portfolios with a focus on their targeted destination and develop an action plan for future success.

Prerequisite: None

Leadership and Peer Support, Grade 11, Open (GPP3O)

This course prepares students to act in leadership and peer support roles. They will design and implement a plan for contributing to their school and/or community; develop skills in communication, interpersonal relations, teamwork, and conflict management; and apply those skills in leadership and/or peer support roles – for example, as a student council member or a peer tutor. Students will examine group dynamics and learn the value of diversity within groups and communities.

Prerequisite: None

Advanced Learning Strategies: Skills for Success After Secondary School,

Grade 11, Open (GLE3O)

This course improves students' learning and personal-management skills, preparing them to make successful transitions to work, training, and/or postsecondary education destinations. Students will assess their learning abilities and use literacy, numeracy, and research skills and personal-management techniques to maximize their learning. Students will investigate trends and resources to support their postsecondary employment, training, and/or education choices and develop a plan to help them meet their learning and career goals.

Prerequisite: Recommendation of principal

Advanced Learning Strategies: Skills for Success After Secondary School,

Grade 12, Open (GLS4O)

This course improves students' learning and personal-management skills, preparing them to make successful transitions to work, training, and/or postsecondary education destinations. Students will assess their learning abilities and use literacy, numeracy, and research skills and personal-management techniques to maximize their learning. Students will investigate trends and resources to support their postsecondary employment, training, and/or education choices and develop a plan to help them meet their learning and career goals.

Prerequisite: None

Advanced Learning Strategies: Skills for Success After Secondary School,

Grade 12, Open (GLE4O)

This course improves students' learning and personal-management skills, preparing them to make successful transitions to work, training, and/or postsecondary education destinations. Students will assess their learning abilities and use literacy, numeracy, and research skills and personal-management techniques to maximize their learning. Students will investigate trends and resources to support their postsecondary employment, training, and/or education choices and develop a plan to help them meet their learning and career goals.

Prerequisite: Recommendation of principal

Navigating the Workplace, Grade 12, Open (GLN4O)

This course provides students with opportunities to develop the workplace essential skills and work habits required for success in all types of workplaces. Students will explore occupations and careers of interest through participation in real workplace experiences. They will make plans for continued learning and work, work with others to design learning experiences, and investigate the resources and support required to make a smooth transition to their postsecondary destination.

Prerequisite: None

4. A secondary social thinking curriculum has been developed and could be embedded within the learning strategies courses that are offered. Based on the needs at the individual schools, each secondary school would have the flexibility to determine which skills need to be taught. For students going to

post-secondary, a GWL course focusing on social thinking with a look towards transitions could be considered.

5. In order to support students in this manner, a dedicated space designed around the students' needs where students could access the room throughout the day as needed and before and after school would be required.

E. STAFF RECOMMENDATION

Considering the way secondary schools are structured, it is not possible to run a one-day per week withdrawal program. Staff does not recommend that the elementary PAST program be duplicated in secondary as elementary and secondary schools operate differently.

The recommendation for secondary schools would be to embed social thinking curriculum into the courses already offered.

Compliance with Standards for School Boards' Special Education Plans (2000) reproduced in full in Special Education in Ontario Kindergarten to Grade 12 Policy and Resource Guide (2017)	Report on the provision of Special Education Programs and Services 2017-18	Amendment s to the 2018-19 Special Education Plan
Special Education Programs and Services		
Model for Special Education	\checkmark	$\overline{\checkmark}$
Identification, Placement, and Review Committee (IPRC) Process	\square	
Special Education Placements Provided by the Board	\checkmark	
Individual Education Plans (IEP)	\checkmark	
Special Education Staff	\checkmark	\checkmark
Specialized Equipment	\checkmark	
Transportation for Students with Special Education Needs	V	V
Transition Planning	\checkmark	
Provincial Information		
Roles and Responsibilities		
Categories and Definitions of Exceptionalities	$\overline{\checkmark}$	$\overline{\checkmark}$
Provincial and Demonstration Schools in Ontario	\checkmark	
Other Related Information Required for Community	•	
The Board's Consultation Process		
The Special Education Advisory Committee (SEAC)	$\overline{\checkmark}$	
Early Identification Procedures and Intervention Strategies	\checkmark	
Educational and Other Assessments	\checkmark	
Coordination of Services with Other Ministries or Agencies	$\overline{\checkmark}$	
Specialized Health Support Services in School Settings	\checkmark	
Staff Development	\checkmark	
Accessibility (AODA)	\checkmark	
Parent Guide to Special Education	\checkmark	\checkmark
Where programs and services have not been provided as o Education Plan, please provide a description		17-18 Special

Additional Information:		
Protocol for Partnerships with External Agencies Services by Regulated Health Professionals, R Service Professionals, and Paraprofessionals on school board website.	✓	
Special education is included in our ongoing se with respect to the Board Improvement Plan fo Achievement.		
Document:	Format:	Please indicate the URL of the document on your website (if applicable)
Special Education Plan	☐ Board Website ☐ Electronic file ☐ Paper copy	
Parent Guide to Special Education	☐ Board Website ☐ Electronic file	☑ ☑
Protocol for Partnerships with External Agencies for Provision of Services by Regulated Health Professionals, Regulated Social Service Professionals, and Paraprofessionals (PPM 149)	☐ Board Website ☐ Electronic file	
Name of the Director of Education		
Signature of the Director of Education	D	Date

2018-19 Education Funding:

A GUIDE TO THE SPECIAL EDUCATION GRANT





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Introduction

Special Education in Ontario

This guide provides an overview of special education and how it is funded in Ontario. The goal is to provide a clear explanation of the funding model for interested partners in the education sector.

Ontario is widely recognized as having one of the world's best elementary and secondary school systems, and works constantly to improve it. While all students need support from educators, classmates, family and friends in order to thrive and gain the full benefits of their school experience, some students may require additional supports to meet their learning needs. Support for students with special education needs may include additional programs, services and/or equipment.

The core of Ontario's education success is its focus on a consistent vision with goals that partners know and embrace. *Achieving Excellence: A Renewed Vision for Education in Ontario* outlines four key goals for the education system:

- Achieving Excellence: Children and students of all ages will achieve high levels of academic performance, acquire valuable skills and demonstrate good citizenship. Educators will be supported in learning continuously and will be recognized as among the best in the world.
- Ensuring Equity: All children and students will be inspired to reach their full
 potential, with access to rich learning experiences that begin at birth and
 continue into adulthood.
- Promoting Well-Being: All children and students will develop enhanced mental and physical health, a positive sense of self and belonging, and the skills to make positive choices.
- Enhancing Public Confidence: Ontarians will continue to have confidence in a publicly funded education system that helps develop new generations of confident, capable and caring citizens.

In support of this renewed vision, the Ministry of Education allocates funding to Ontario's 72 district school boards¹. In addition to the Pupil Foundation Grant and other Grants for Student Needs funding, the ministry allocates funding for students with special education needs through the Special Education Grant. School boards also have the ability to use other allocations of the Grants for Student Needs to support students with special education needs. The goal is to ensure equity in access to learning for all students with special education needs.

The *Education Act* mandates all school boards to provide special education programs and/or services for students with special education needs. This includes students receiving special education programs and/or services who have been identified as exceptional by an Identification, Placement and Review Committee (IPRC) and students receiving special education programs and/or services who have not been identified as exceptional by an IPRC.

All students receiving special education programs and/or services, whether identified as exceptional or not, should have an Individual Education Plan. An Individual Education Plan is a written plan describing, among other things, the special education programs and/or services required by a particular student, based on a thorough assessment of the student's strengths and needs.

There are five categories and twelve definitions of exceptionalities, as follows:

- Behaviour behaviour
- Intellectual giftedness, mild intellectual disability, developmental disability
- Communication autism, deaf and hard-of-hearing, language impairment, speech impairment, learning disability
- Physical physical disability, blind and low vision
- Multiple multiple exceptionalities

These five categories of exceptionalities are designed to address the wide range of conditions that may affect a student's ability to learn, and do not exclude any medical condition, whether diagnosed or not, that can lead to particular types of learning difficulties. All students with demonstrable learning-based needs are entitled to appropriate support in the form of special education programs and services, including classroom-based accommodations.

¹ There are also 10 School Authorities, consisting of four geographically isolated boards and six hospital-based school authorities.

Overview of Students Receiving Special Education Programs and/or Services

Data from the Ontario School Information System showed that in 2015-16, 17.3 per cent of students in Ontario's publicly funded school system were receiving special education programs and/or services. This amounted to 344,306 out of the total of 1,993,432 Junior Kindergarten to grade 12 students. Approximately 51 per cent of students with special education needs had been identified through the IPRC process. In addition, school boards reported that approximately 84 per cent were in regular classrooms for more than half the instructional day.

OVERVIEW OF STUDENTS RECEIVING SPECIAL EDUCATION PROGRAMS AND/OR SERVICES 2015-16

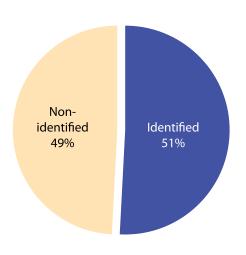
Students formally identified as "Exceptional" by an IPRC*

	Number of students	Percentage of panel	Percentage of all students
Elementary	86,673	6.4%	4.3%
Secondary	88,884	14.0%	4.5%
Total	175,557		8.8%

Students NOT formally identified as "Exceptional" by an IPRC*

	Number of students	Percentage of panel	Percentage of all students
Elementary	116,539	8.6%	5.8%
Secondary	52,210	8.2%	2.6%
Total	168,749		8.5%





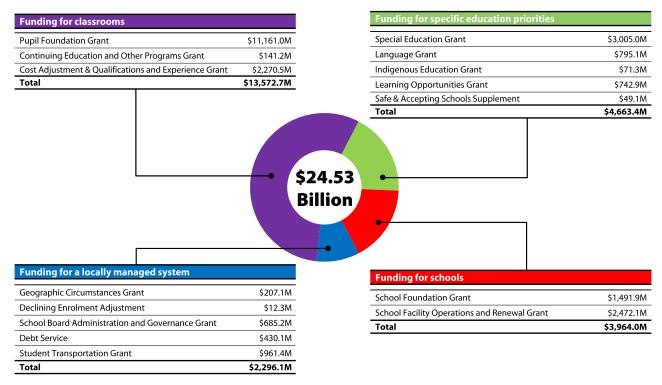
How funding is structured

Grants for Student Needs

Ontario provides its 72 district school boards with operating funding, including special education funding, through the annual Grants for Student Needs, also known as the "funding formula".

The Grants for Student Needs supports all students, including students with special education needs. The *Guide to the Grants for Student Needs*, produced by the ministry, groups funding under the following headings: funding for classrooms, funding for specific priorities, funding for schools, and funding for a locally managed system.

WHAT DOES THE GSN SUPPORT



Note: School authorities funding (\$37.2 million) are included in the total, but not in the pie chart. Figures may not add due to rounding.

- Funding for classrooms focuses on providing classroom resources. It includes the Pupil Foundation Grant, which provides funding for every student of every school board, including students with special education needs.
- Funding for specific priorities speaks mainly to the Achieving Excellence goal of closing gaps by, for example, meeting special education needs and improving language proficiency. Special education funding accounts for the largest proportion of funds in this category.
- Funding for schools provides the resources to ensure schools have the leadership they need and are clean and well-maintained facilities for learning. Funding is also positioned to encourage the most efficient use of space possible.
- Funding a locally managed system aims to ensure school board leadership
 carries out focused activities to support alignment of resources which helps
 schools and students, including students with special education needs,
 strive to achieve excellence.

The *Guide to the Grants for Student Needs* provides further background on all grants and how they are calculated. As well, more detailed information on the funding formula appears in the *Education Funding Technical Paper 2018-19* and in the annual regulation under the *Education Act*.

Special Education Grant

In addition to the Pupil Foundation Grant and other Grants for Student Needs funding for classrooms, schools and the system as a whole, the ministry provides school boards with the Special Education Grant. This grant supports positive outcomes for students with special education needs. It is for the additional costs of the programs, services and/or equipment they may require.

School boards may *only* use Special Education Grant funding for special education programs, services and/or equipment. Any unspent Special Education Grant funding in a given year must be put aside and spent on special education in the future. School boards have the authority and flexibility to use other Grants for Student Needs funding, as well as the Special Education Grant, to meet their responsibility to support students with special education needs.

Special education funding is allocated to school boards by provincial regulations. School boards in turn use their special education funding to implement their own local policies and priorities. As noted above, school boards are also able to use other funding to support students with special education needs.

School boards are given flexibility to use special education and other funding to support their special education policies and priorities because they have the greatest knowledge of their students and communities. They are best positioned to respond to local needs when setting budget priorities and determining what special education programs, services and/or equipment to provide. This means, for example, that individual school boards make such decisions as classroom placement, classroom programming and staffing.

The Special Education Grant is made up of six allocations:

- 1. Special Education Per Pupil Amount
- 2. Differentiated Special Education Needs Amount
- 3. Special Equipment Amount
- 4. Special Incidence Portion
- Care, Treatment, Custody and Correctional Amount (Formerly Facilities Amount)
- **6.** Behaviour Expertise Amount

The Special Education Grant is projected to be approximately \$3.01 billion in 2018–19.

The following pages outline each of the six allocations of the Special Education Grant.

1. Special Education Per Pupil Amount

The Special Education Per Pupil Amount provides funding to every school board to assist with the costs of providing additional support to students with special education needs. It is allocated to school boards on the basis of total enrolment of all students, not just students with special education needs.

This allocation provides all school boards with a foundational amount of funding for special education.

The Special Education Per Pupil Amount allocation is projected to be approximately \$1.52 billion in 2018–19.

2. Differentiated Special Education Needs Amount

This allocation addresses the variation among school boards with respect to their population of students with special education needs and school boards' ability to support these needs.

The Differentiated Special Education Needs Amount allocation includes four components:

- Special Education Statistical Prediction Model
- Measures of Variability
- Base Amount for Collaboration and Integration
- Multi-Disciplinary Supports Amount

The Differentiated Special Education Needs Amount allocation is projected to be approximately \$1.13 billion in 2018–19.

Special Education Statistical Prediction Model

The Special Education Statistical Prediction Model estimates the likelihood of students in a school board needing special education programs and/or services. The model does this by taking into account neighbourhood profiles for all students across Ontario and in each school board. This generates predicted percentages for the population likely to have special education needs in each school board, which are used to allocate Special Education Statistical Prediction Model funding.

These neighbourhood profiles, which are anonymous, use data from the federal government's long-form census and other similar sources. This includes long-form census factors such as parent level of education, family income, unemployment, and recent immigration to Canada.

Measures of Variability

The Measures of Variability uses six categories of information that reflect differences in each school board's population of students with special education needs and in the school board's ability to respond to these needs.

Three of the categories use data to develop a school board profile of special education needs. This is done by looking at different data sets and comparing a school board to the provincial average. These three categories are: students reported as receiving special education programs and services; participation

and achievement in Education Quality and Accountability Office (EQAO) assessments by students with special education needs; and credit accumulation and participation in locally developed and alternative non-credit courses (K-Courses) by students with special education needs.

This comparison is used to determine the amount of funding that each school board should receive. For example under the "credit accumulation and participation in locally developed and alternative non-credit courses" category, a component of this allocation generates more funding for school boards that report having more students with special education needs whose accumulation of curriculum credits is below the provincial average.

The remaining three categories address each school board's ability to respond to its population of students with special education needs. This is done by recognizing external factors that affect the school board's ability to meet these needs. These three categories include: Remote and Rural Adjustment, Indigenous Education Grant Adjustment, and French-language School Board Adjustment. For example, under the Remote and Rural Adjustment, a component of this allocation generates more funding for school boards whose schools are further apart.

For more detailed information on the six categories and how they are calculated, please refer to the 2018-19 Special Education Funding Memo.

Base Amount for Collaboration and Integration

The Base Amount for Collaboration and Integration, provides each school board with base funding of approximately \$456,017. Its purpose is to explore collaborative and integrated approaches to serving students with special education needs.

Multi-Disciplinary Supports Amount

The Multi-Disciplinary Supports Amount provides funding to each school board for a multi-disciplinary team of up to four new additional staff. This team will help to build board capacity and help teachers, education assistants, and other staff better understand and adapt to the unique needs of their students. The Multi-Disciplinary Supports Amount also includes funding for other staffing resources to support students with special education needs in a way that reflects their local needs.

For more detailed explanations of these four components please refer to the 2018-19 Special Education Funding Memo.

3. Special Equipment Amount

This funding supports the purchase of equipment that may be required by students with special education needs. There are two components to this allocation:

- A per-pupil amount that allows the school board to purchase computers, software, robotics, computing-related devices and required supporting furniture, as well as all Special Equipment Amount training and technician costs, maintenance and repairs. This allocation consists of a base amount for each school board plus a per-pupil amount reflecting the school board's average daily enrolment of all students.
- A claims-based process that supports the purchase by the school board of other, non-computer-based equipment required by students with special education needs. This may include hearing and/or vision support equipment, personal care support equipment and/or physical assists support equipment.

Eligibility requirements for both the per-pupil amount and claims-based amount are outlined in the Special Education Funding Guidelines: *Special Equipment Amount (SEA), 2018-19*.

The Special Equipment Amount allocation is projected to be approximately \$106.6 million in 2018–19.

4. Special Incidence Portion

The Special Incidence Portion supports students with extraordinarily high needs who require more than two full-time staff to address their health and/or safety needs, and those of others at their school. Funding is based on claims submitted by school boards. The ministry provides guidance on eligibility in the Special Education Funding Guidelines: *Special Incidence Portion (SIP)*, 2018-19.

The Special Incidence Portion allocation is projected to be approximately \$133.3 million in 2018–19.

5. Care, Treatment, Custody and Correctional Amount (Formerly Facilities Amount)

This funding supports school boards' provision of education programs to school-aged children and youth in care and/or treatment centres, and in custody and correctional facilities. Eligible facilities include hospitals, children's mental health centres, psychiatric institutions, detention and correctional facilities, community group homes, and social services agencies. A school board provides these services under a written agreement between the school board and the facility.

The funding, which must be approved by the ministry based on established guidelines, goes toward recognized costs that include teachers, educational assistants and classroom supplies. Further details can be found in the *Guidelines* for Approval and Provision of Care, Treatment, Custody and Correctional (CTCC) Programs 2018-19.

The Care, Treatment, Custody and Correctional Amount allocation is projected to be approximately \$103.9 million in 2018–19.

6. Behaviour Expertise Amount

The Behaviour Expertise Amount allocation provides funding for school boards to hire professional staff at the board level who have expertise in Applied Behaviour Analysis, and starting in 2018–19 it will also include a new Applied Behaviour Analysis (ABA) Training Amount. This new component was previously provided to school boards through the Autism Supports and Training funding allocation in Education Programs – Other.

In 2018–19 the Behaviour Expertise Amount Allocation will have two components:

- ABA Expertise Professionals Amount; and
- ABA Training Amount.

ABA Expertise Professionals Amount

The ABA Expertise Professionals Amount provides funding to hire professional staff at the school board level who have expertise in applied behaviour analysis. Applied behaviour analysis is an instructional approach that has been shown to be helpful for many children with *autism spectrum disorder*, as well as students with other special education needs.

The main roles of the board-level professional are to:

- Support principals, teachers, educators and other school staff through applied behaviour analysis coaching, training and resources;
- Strengthen and facilitate collaborative working relationships among schools, parents, community members and agencies; and
- Support transitions, collaboration and information sharing between community-based autism service providers, school staff and families.

The funding is made up of a fixed amount for each school board plus a per-pupil amount that reflects the school board's average daily enrolment of all students.

ABA Training Amount

The ABA Training Amount provides funding for training opportunities to build school board capacity in ABA.

The Behaviour Expertise Amount allocation is projected to be approximately \$15.2 million in 2018–19.

Education Programs – Other (EPO) Funding

Each year the ministry provides school boards with Education Programs – Other funding, which is additional funding outside the Grants for Student Needs. It is targeted to support the core goals and priorities of *Achieving Excellence*. Some of this funding is allocated to school boards to support students with special education needs. Details on the *Education Programs – Other* funding can be found on the Ministry of Education website.

Accountability for Special Education Funding

The province, through the Ministry of Education, is accountable for the public education system as a whole and the policy decisions that determine funding for school boards. Given the key role of school boards in providing services at the local level, they have important accountabilities to students, parents and others with a stake in outcomes, as well as to the ministry.

School boards have a responsibility to ensure the effective stewardship of resources. Thoughtful, transparent budgeting, aligned with a focused strategy, is vital and integral to this goal.

A robust accountability framework for the Grants for Student Needs has been developed between school boards and the province. It recognizes that accountability to the ministry must be balanced with the need for school board flexibility to address local conditions.

As noted earlier, to support accountability and the mandated role of school boards, special education funding is enveloped for special education expenditures only. If a school board does not spend all of this funding in the year, it must hold the unspent amount in a reserve account to be spent on special education in future years. School boards are required to report to the ministry on their special education expenditures three times a year.

School boards are also able to use other Grants for Student Needs funding to support students with special education needs.

Additional information

This guide focuses mainly on the approaches and calculations underlying special education funding. More details on the policy process and on the allocation of other education grants are available from:

2018-19 Education Funding: A Guide to the Grants for Student Needs

School Board Memo: Grants for Student Needs Funding for 2018-19

Education Funding Technical Paper 2018-19

For more information on special education policy, programs and/or services generally, please consult:

Ministry of Education website

For more information on a school board's specific special education policies and approaches, please contact the school board superintendent responsible for special education. Alternatively, you may contact a member of the school board's Special Education Advisory Committee for more information on the overall delivery of special education programs and/or services within a school board.

Useful terms to know

Special education services: Facilities and resources, including support personnel and equipment, necessary for developing and implementing a special education program.

Special education program: An educational program that is based on and modified by the results of continuous assessment and evaluation, and that includes a plan containing specific objectives and an outline of educational services that meet the needs of the student.

Identification, Placement and Review Committee (IPRC): School boards are required to establish an Identification, Placement and Review Committee (IPRC). The IPRC is made up of at least three people, one of whom must be a principal or supervisory officer of the school board. The IPRC is responsible for deciding whether a student should be identified as exceptional. It identifies the exceptionality according to the categories and definitions set out by the ministry, decides the placement and reviews the identification and placement generally once in a school year.

Individual Education Plan (IEP): A written plan describing the special education programs and/or services required by a particular student, based on a thorough assessment of the student's strengths and needs. It documents the accommodations, modifications and/or alternative expectations needed to help the student achieve. It outlines the specific knowledge and skills to be assessed and evaluated for the purpose of reporting student achievement.

Accommodations: Special teaching and assessment strategies, human supports, and/or individualized equipment required to enable a student to learn and demonstrate learning. The provincial curriculum expectations for the grade are not altered for a student receiving accommodations.

Modifications: Expectations that differ in some way from the regular grade-level expectations for a subject or course in order to meet a student's learning needs. For students with an Individual Education Plan, these changes could include: expectations from a different grade level; significant changes (increase or decrease) in the number and/or complexity of the learning expectations; and measurable and observable performance tasks. At the secondary level, a credit may or may not be granted for a course, depending on the extent to which the expectations in the course have been modified.

Alternative Learning Expectations: Alternative learning expectations are developed to help students acquire knowledge and skills that are not represented in the Ontario curriculum expectations. Because they are not part of a subject or course outlined in the provincial curriculum documents, alternative expectations are considered to constitute alternative programs or alternative courses (secondary school courses).

2018-19 Education Funding

A GUIDE TO THE GRANTS FOR STUDENT NEEDS



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Introduction

Ontario is widely recognized as having one of the world's best elementary and secondary school systems, and is continuously working to improve it. This guide is intended to support the important conversations among partners in the education sector by providing a clear explanation of how education is funded in Ontario through the Grants for Student Needs, or GSN. It also sets out the accountabilities of school boards and the Ministry of Education for the use of education dollars and discusses efforts to continuously improve the formulas used to fund education in Ontario.

The GSN supports funding for the classroom, school leadership and operations, specific student-related priorities and local management by school boards. The GSN's purpose is to help the system achieve key goals, especially those of *Achieving Excellence*, Ontario's renewed vision for education.

Achieving Excellence consolidates the many gains made by the education system to date and sets out a commitment to take it to the next level. It was developed by the ministry through extensive consultations with its partners in the education system.

The renewed vision emphasizes the focus on classroom education, which is the foundation of the system. At the same time, it broadens the system's aims to look at more than academic achievement, particularly by supporting student well-being in a range of areas. It also recognizes the system's need to close the gaps, so that all students benefit from a strong educational system attuned to individual needs.

The Ministry of Education, school boards and other stakeholders in publicly funded education are working together to align funding for school boards with the aims of *Achieving Excellence*.

What GSN funding supports

- Classrooms (\$13.57B)
- Schools (\$3.96B)
- Specific priorities (\$4.66B)
- Local management (\$2.30B)

The goals GSN funding helps achieve

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

How funding is structured

The Ministry of Education provides the majority of operating funding to Ontario's 72 district school boards¹ through the annual GSN, also known as "the funding formula." The GSN is actually a collection of grants described in detail in a regulation under the *Education Act* each year.

Many grants are made up of two or more components, which are called "allocations." This guide sets out the funding provided by each grant and gives an explanation, including a high-level description of the calculation, of the major allocations within it.

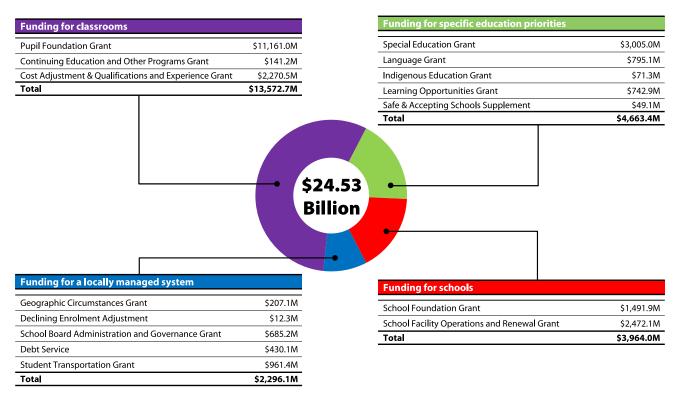
Because the ministry and its partners focus on aligning resources with the key goals of the education system, this guide has been structured to reflect those goals by grouping grants under the following headings:

- Funding for classrooms focuses on providing classroom resources.
- Funding for schools provides the resources to ensure schools have the leadership they need and are clean and well-maintained facilities for learning. Funding is also positioned to encourage the most efficient use of space possible.
- Funding a locally managed system aims to ensure board leadership carries
 out focused activities to support alignment of resources which help schools
 and students strive to achieve excellence.
- Funding for specific priorities speaks mainly to the Achieving Excellence goal of closing gaps by, for example, meeting special education needs and improving language proficiency.

The ministry recognizes that conditions vary widely across Ontario and the funding formula cannot take every situation into account. This is why local school boards have flexibility in how they use funding, within the overall accountability framework discussed in the next section.

¹ There are also 10 School Authorities, consisting of four geographically isolated boards and six hospital-based school authorities.

WHAT DOES THE GSN SUPPORT?



Note: School authorities funding (\$37.2 million) are included in the total, but not in the pie chart. Figures may not add due to rounding.

For the school board sector as a whole, GSN funding represents the overwhelming majority of revenues, more than 90%.

School boards also receive funding from the ministry for special, often time-limited programs, and from other ministries for specific purposes related to their mandates.

School boards may also raise funds on their own. Examples include renting out excess school space or charging fees for enhanced programming. These funds, however, should not be used to replace public funding for education or to support items funded through provincial grants. A *Guideline for School Fundraising* and a *Fees for Learning Materials and Activities Guideline* may be found on the Ministry of Education *website* (www.edu.gov.on.ca).

Accountability for education funding

A central aim of *Achieving Excellence* – and one that extends beyond the classroom or even the school – is enhancing public confidence in our education system.

The province invests about \$24 billion a year in education. A major part of enhancing confidence is ensuring accountability for the use of these resources.

The province, through the Ministry of Education, is accountable for the public education system as a whole and the policy decisions that determine funding for school boards. Given their key role in providing services at the local level, school boards have important accountabilities to students, parents and others with a stake in outcomes, as well as to the ministry.

A cornerstone of Ontario's education system is the principle that school boards have a responsibility to ensure the effective stewardship of resources. Thoughtful, transparent budgeting, aligned with a focused strategy, is vital and integral to this goal.

With respect to the GSN, a robust financial accountability framework has been developed between school boards and the Province. This framework recognizes that accountability to the ministry must be balanced against the need for school board flexibility to address local conditions. It includes:

- Legislative requirements, such as the provision that school boards balance their budgets;
- Requirements around budgeting and financial reporting, as well as monitoring, audit, review and, in some cases, supervisory activities by the Province:

- Enveloping, which means requiring that certain grants be used only for the purpose intended; and
- Program/grant specific reporting requirements overseen by various branches of the ministry.

Another important activity that supports accountability is collaboration. Ontario has a proud tradition of open and frank conversations about education funding. Through these conversations, the funding formula benefits from a stronger understanding of the perspectives of others in the system.

The ministry engages with many partners, including:

- School board representatives,
- Trustees' associations,
- Indigenous partners,
- Principals and vice-principals,
- Teachers' federations and education worker unions,
- Parent groups and
- Student groups.

The annual engagement and other collaborations are invaluable in holding all parties, including the government, accountable for the ways education is funded. Annual adjustments are made to grants, informed by the ministry's ongoing contact with the sector, including the annual GSN funding discussions and collaborative working groups that make technical recommendations on how to improve the GSN.

Funding for classrooms

Pupil Foundation Grant

This grant, which accounts for about half of the GSN, supports the elements of a classroom education that are generally common to all students. The largest single element of the GSN, it provides funding for the salaries of classroom teachers, early childhood educators for full-day kindergarten, educational assistants, and other teaching staff such as teacher librarians and guidance counsellors. It also funds textbooks, classroom supplies and classroom computers.

In 2018-19, additional funding is being provided through this grant for more teachers to help grade 7 and 8 students make successful academic transitions and engage in career and pathways planning.

The grant is calculated on a per-pupil basis. There are four different per-pupil amounts at the elementary level, depending on the grade in which a student is enrolled – kindergarten, primary (grades 1 to 3), junior (grades 4 to 6), intermediate (grades 7 to 8) – and one per-pupil amount for secondary students. For classroom teachers, the per-pupil amounts reflect benchmark salaries and benefits, class size requirements and the need for preparation time. (A separate allocation, discussed below, recognizes teachers' relative qualifications and experience.) For other staff, the per-pupil amount is based on salaries and benefits and staffing levels.

For 2018-19, funding through the Pupil Foundation Grant is projected to be \$11.16 billion.

Qualifications and Experience Grant

This grant provides additional support for classroom staff who have qualifications and experience above those provided for through the Pupil Foundation Grant. It is projected to total \$2.27 billion in 2018-19:

Allocation	2018-19 Amount
Teacher qualifications and experience	\$1.80 billion
Early childhood educator qualifications and experience	\$150.7 million
Benefits trusts	\$252.4 million
Other	\$64.0 million
Total	\$2.27 billion

- The teacher qualifications and experience allocation provides funding to boards with teachers who, because of their qualifications and experience, have average salaries different from the benchmark level used in the Pupil Foundation Grant.
- The early childhood educators qualifications and experience allocation is provided for boards with early childhood educators who, because of their qualifications and experience have average salaries different from the benchmark.
- The benefits trusts allocation provides the incremental funding required to support the transition of benefit plans for staff to the Employee Life and Health Trusts.
- The **other** allocations under this grant include historical adjustments to the funding of non-teaching salary costs and funding for programs to mentor and train new teachers, as well as additional support for professional development for teachers and education workers. Additional details can be found in the technical paper available on the ministry website.

Continuing education and other programs

This grant supports a range of programs aimed at adult learners and day school students, including secondary students who have completed more than 34 credits and wish to continue their studies. The grant is projected to total \$141.2 million in 2018-19:

Allocation		2018-19 Amount
Adult day school		\$16.2 million
High-credit day school		\$6.0 million
Summer school		\$33.7 million
Continuing education		\$55.6 million
Other		\$29.8 million
	Total	\$141.2 million

- The adult day school allocation supports day school programming for students who are at least 21 years of age as of December 31 of the current school year.
- The high-credit day school allocation is for day school programming for secondary students who have completed more than 34 credits and wish to continue their studies.
- The summer school allocation supports programming offered during the summer for day school pupils.
- The continuing education allocation supports a variety of programs delivered inside and outside the classroom (for example, through correspondence, self-study or e-learning), including credit courses for the purpose of earning a secondary school graduation diploma.
- The **other** allocations of this grant support the teaching of international and indigenous languages at the elementary level and assessments of mature students' prior learning. More details are provided in the technical paper, available on the ministry website.

Funding for schools

School Foundation Grant

This grant provides funding for principals, vice-principals and office support staff, as well as administrative supplies. The total School Foundation Grant is projected to be \$1.49 billion in 2018-19. It is divided into an elementary school and a secondary school portion. This grant includes measures which:

- Recognize a school's size as well as its remoteness and whether it is operating
 in a minority language context; and
- Provide greater funding overall for principals in combined elementary and secondary schools (subject to minimum enrolment limits), and in elementary or secondary schools with multi-buildings (subject to minimum enrolment limits).

School Operations and Renewal Grant

This grant supports the costs of operating, maintaining and repairing school facilities. Under the formula, funding is adjusted for boards that have older schools with unique design features such as wide hallways, large shop spaces, and auditorium spaces.

The grant, consisting of two major allocations, is projected to total \$2 .47 billion in 2018-19.

Allocation		2018-19 Amount
School operations		\$2.11 billion
School renewal		\$360.7 million
	Total	\$2 .47 billion

- The school operations allocation, which addresses operating costs such as heating, lighting, maintenance and cleaning of schools, consists of several components. The largest component is based on a benchmark operating cost associated with a standard floor area for each elementary and secondary pupil.
- The school renewal allocation addresses the costs of repairing and renovating schools. Like the operations allocation, it consists of a number of components.
 The largest component is based on a benchmark renewal cost associated with a standard floor area for each elementary and secondary pupil.
 - Funding is also adjusted to reflect the renewal needs of older schools and regional variations in construction costs.

Funding a locally managed system

School Board Administration and Governance Grant

This grant provides funding for board administration and governance costs, including those related to board-based staff and board offices and facilities. In 2018-19, it is projected to total \$685.2 million.

Allocation		2018-19 Amount
Board administration		\$565.5 million
Program leadership		\$67.5 million
Other		\$52.2 million
	Total	\$685.2 million

- The board administration model, developed in consultation with school boards, provides funding for board-level leadership, staff and related supplies and services. The model recognizes ten core functions that all boards, regardless of size, must perform. At the same time, it recognizes that enrolment is an important driver of higher administrative expenses. This new model replaces a way of allocating funding that relied more heavily on the size of boards' enrolment.
- New for 2018-19, the program leadership allocation provides funding to support six lead positions that were previously funded through other allocations within the GSN as well as funding outside of the GSN.
- The other allocations of this grant include funding for trustee compensation, parent engagement, consolidation accounting, internal audit, supports to improve school boards' information management, and the transformation of learning and teaching in the physical and virtual environment. Additional details can be found in the technical paper available on the ministry's website.

Student Transportation Grant

This grant provides school boards with funding to transport students to and from school. It is projected to be \$961.4 million in 2018-19. The grant is based on the previous year's amount, with a number of possible adjustments and/or additional allocations:

- The enrolment adjustment is made available only for school boards with increasing enrolment, and is based on the percentage increase in enrolment.
- The cost update adjustment factor, which recognizes the increasing costs of providing transportation services, is 4% for 2018-19. The calculation applies the adjustment factor to each board's 2017-18 transportation grant.
- The fuel escalator and de-escalator provides for funding increases or decreases by comparing the actual price of diesel fuel for southern school boards and northern school boards to a benchmark price.
- Details on the other allocations within this grant, which cover transportation
 to provincial or demonstration schools, school bus rider safety training,
 impacts of effectiveness and efficiency reviews of transportation consortia,
 and full-day kindergarten transportation, can be found in the technical paper
 available on the ministry's website.

Declining Enrolment Adjustment

Much of a school board's revenue is determined by enrolment. When enrolment goes down, funding also declines. School boards can adjust their costs downward as well, but this may take more than one year. The declining enrolment adjustment recognizes this need for extra time. The grant, which is projected to be \$12.3 million in 2018-19, is made up of a first-year and second-year component:

Component		2018-19 Amount
First-year		\$9.6 million
Second-year		\$2.7 million
	Total	\$12.3 million

The **first year component** is based on a weighting of the difference between 2018-19 eligible revenues if enrolment had not changed from the previous year and 2018-19 revenue calculated using the current year's enrolment. It is available only if the current year's enrolment is less than the previous year's.

The **second-year component** is 25% of a school board's 2017-18 first-year component.

Geographic Circumstances Grant

This funding recognizes the higher costs related to the remoteness of rural boards and schools. It takes into account several factors, including board and school size, board distance from urban centres and dispersion of schools over a board's geographic area.

The grant, which is projected to be \$207.1 million in 2018-19, is made up of three allocations.

Allocation		2018-19 Amount
Remote and rural		\$117.9 million
Supported schools		\$69.0 million
Rural and Northern Education Fund		\$20.2 million
	Total	\$207.1 million

- The **remote and rural** allocation provides funding to boards with enrolment of less than 16,000; boards that are distant from large urban centres; and boards whose schools are far from board offices and one another.
- The supported schools allocation helps make small, remote schools more viable by providing additional funding for teachers and, in some cases, early childhood educators. A school's eligibility is based on distance to the board's closest school of the same type (that is, elementary to elementary and secondary to secondary) with funding varying based on school enrolment.
- The Rural and Northern Education Fund allocation provides funding for school boards to further improve education for students in rural and northern communities through support for additional operating expenses, enhanced student transportation options and improved programming or staff supports.

Funding for specific priorities

Learning Opportunities Grant

The Learning Opportunities Grant (LOG) provides funding to help students who are at greater risk of lower academic achievement. It is projected to total \$742.9 million in 2018-19.

Allocation		2018-19 Amount
Demographic		\$362.9 million
Local Priorities Fund		\$235.4 million
Student achievement envelope		\$134.1 million
Other		\$10.4 million
	Total	\$742.9 million

- The demographic allocation, which represents the largest share of LOG funding, is based on social and economic indicators that signal a higher risk of academic difficulty for students. The indicators are low household income, low parental education, a one-parent household, and recent arrival in Canada. This allocation is distributed to boards based on the ranking of each of their schools on these measures, and a weighting of the measures themselves. Boards can use this funding for initiatives such as breakfast programs, homework clubs, reading recovery and independent supports.
- The Local Priorities Fund addresses 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.
- The student achievement envelope comprises six discrete allocations.
 These allocations, which directly support programs introduced over the past decade to improve student achievement, are for:
 - Literacy and math outside the school day, which funds remedial courses or classes for students who are at risk of not meeting the curriculum standards for literacy or math and/or the requirements of the Grade 10 literacy test.
 - Student success, grade 7 to 12, which funds a range of resources and activities to improve student engagement in secondary schools.

- Grade 7 and 8 student success and literacy and numeracy teachers, which recognizes the need to help students in earlier grades so they are better prepared for the transition to secondary school and beyond.
- Ontario focused intervention partnership tutoring, which helps boards set up and/or expand tutoring programs for students who are not achieving the provincial standard in reading, writing, or math.
- The specialist high skills major program, which allows students to customize their secondary school experience and build on their strengths and interests by focusing on a specific economic sector.
- The **outdoor education** program, which provides elementary and secondary students with learning experiences in the outdoors.

There is flexibility in how boards may use the individual allocations, as long as the total funding is spent on the programs within the envelope. Any unspent funding must be used on the programs within the envelope in a future school year.

 The other allocations of this grant provide funding for teacher-librarians and/or library technicians and an adjustment to reflect the impacts of amalgamating school authorities. Additional details can be found in the technical paper available on the ministry's website.

Special Education Grant

This grant provides boards with funding for programs, services, and/or equipment for students with special education needs. Boards may use the grant only for special education, and must set aside any unspent funding to use for special education in a future school year. There is flexibility in how they may use some of the individual allocations within the grant, as long as the funds are spent on special education. The grant, which is projected to total about \$3.01 billion in 2018-19, is made up of six allocations:

Allocation		2018-19 Amount
Special education per pupil amount (SEPPA)		\$1.52 billion
Differentiated special education needs amount (formerly high needs amount)		\$1.13 billion
Special equipment amount		\$106.6 million
Other		\$252.3 million
	Total	\$3.01 billion

- The special education per pupil amount provides every board with foundational funding toward the cost of special education supports. It is calculated using a board's total enrolment and a per-pupil amount. There are different per-pupil amounts for kindergarten to Grade 3 pupils, Grade 4 to 8 pupils, and Grade 9 to 12 pupils. The per-pupil amounts in the earlier grades are higher to direct more funding towards early intervention.
- Recognizing the variation across boards in the share of students with special
 education needs, the nature of the needs, and boards' ability to meet them,
 the differentiated special education needs amount (DSENA) aims to
 better align the allocation with boards' needs and resources. In 2018-19, a
 new multi-disciplinary supports amount is being added as new component
 to DSENA, which will support increased special education programs and
 services.
- Under the special equipment amount, each board receives a base amount plus a per-pupil amount, which together may be used to buy computers, software and other equipment for students with special education needs in line with funding guidelines. In addition, boards may submit claims to recover the costs, less a deductible, of other equipment recommended by a qualified professional for a student with specific special education needs.
- The other allocations of the grant are the special incidence portion for students who require more than two full-time staff to address their health and safety needs and those of others at their school, the care, treatment, custody, and correctional amount (previously named the facilities amount) for providing instruction in a care, treatment, custody or correctional facility, and an amount to support board-level expertise in applied behavioural analysis. Additional details can be found in the technical paper available on the ministry's website.

Language Grant

This grant provides funding to meet school boards' costs for language instruction. It is made up of five allocations, and is projected to total \$795.1 million in the 2018-19 school year:

Allocation		2018-19 Amount
English as a second language/English literacy development (ESL/ELD)		\$304.0 million
French as a second language (FSL)	,	\$275.7 million
French as a first language (FFL)		\$85.8 million
Programme d'appui aux nouveaux arrivants (PANA)		\$7.9 million
Actualisation linguistique en français (ALF)		\$121.7 million
	Total	\$795.1 million

- English as a second language/English literacy development funding is provided to English-language school boards to support students who need extra help developing proficiency in English. It consists of a recent immigrant component and a diversity in English-language learners component (formally the pupils in Canada component). The former supports students who are eligible based on their country of birth and who have been in Canada four years or less. The latter reflects an estimate of the number of children in a board whose language spoken most often at home is neither English nor French.
- French as a Second Language funding, available only to English-language boards, supports the costs of French instruction. It provides a per-pupil amount for each student. At the elementary level the amount varies depending on whether the pupil is taking core French, extended French, or is in a French immersion program. At the secondary level, the amount reflects both the student's grade level and whether the course covers French as a subject or another subject taught in French.
- French as a First Language funding is available only to French-language boards, and recognizes the higher costs of instructional materials and support to provide French-language programs. It is made up of per-pupil amounts for boards' elementary and secondary enrolment, and a fixed amount for each new elementary school in a French-language board in the current school year.
- The **programme d'appui aux nouveaux arrivants** supports students from eligible countries who are newly arrived in Canada and do not have a Charter right to education in French, but have been admitted to French-language school boards and require extra help developing proficiency in French.

 Actualisation linguistique en français supports students in Frenchlanguage boards who have a right to education in French because it is the language of one or both of their parents, but need extra help developing proficiency in French. It is calculated using a per-pupil amount that varies using a factor based on census data, that measures a board's cultural environment. The factor reflects the share of school-age youth with at least one parent having French as their first official language spoken.

Indigenous Education Grant

The Indigenous Education Grant, supports programs designed for Indigenous learning, as outlined in the *Ontario First Nation, Métis, and Inuit Education Policy Framework*. It is made up of four allocations, and is projected to total \$71.3 million in 2018-19:

Allocation		2018-19 Amount
Indigenous languages		\$10.5 million
Indigenous studies		\$33.5 million
Per-pupil amount		\$21.4 million
Board action plans		\$5.8 million
	Total	\$71.3 million

- The Indigenous languages allocation supports elementary and secondary Indigenous Language programs. At the elementary level, funding is based on the number of pupils enrolled in the Indigenous Language program and the average daily minutes of instruction. At the secondary level, funding is provided for each Grade 9 to 12 pupil enrolled in a credit course.
- The Indigenous studies allocation supports secondary credit courses in Indigenous Studies, providing a per-pupil amount for Grade 9 to 12 students.
- The per-pupil amount allocation supports Indigenous students, and reflects
 the estimated percentage of Indigenous students in a board's schools, based
 on census data. Some of these funds may be used to support a dedicated
 Indigenous Education Lead in each school board.
- The board action plans allocation supports the implementation of programs and initiatives aligned with the 16 strategies and actions identified in the Ontario First Nation, Métis, and Inuit Framework Implementation Plan.

Safe and Accepting Schools Supplement

This funding supports the Safe Schools Strategy and provides targeted support to secondary schools in priority urban neighbourhoods. The grant, made up of two allocations, is projected to total \$49.1 million in 2018-19:

Allocation		2018-19 Amount
Safe and accepting schools		\$39.1 million
Urban and priority high schools		\$10.0 million
	Total	\$49.1 million

- The safe and accepting schools allocation includes two components. One supports non-teaching staff such as social workers, child and youth workers, psychologists, and attendance counsellors who work to prevent and mitigate risks to the school environment. The other supports programs for long-term suspended and expelled students, and prevention and intervention resources. Both components provide a per-pupil amount and also reflect a board's demographic characteristics and dispersion distance.
- The urban and priority high schools allocation helps boards respond to challenges in select secondary schools, such as a lack of access to community resources, poverty, conflict with the law, academic achievement issues or a combination of these factors.

Conclusion

Determining the best way to allocate funding to support *Achieving Excellence* and to put public resources to the most effective use in our school system is an ongoing process.

Funding arrangements will and must continue to change. For an effective education system, we must stay attuned to and gather information on the evolving needs of students, the costs that boards face, and how well our funding approaches support the outcomes we want from the system.

The ministry will continue to engage with school boards and others to ensure the collection and sharing of insights and information to support the goal of making the best possible decisions.

This guide has provided high-level summaries of grants, their purposes and their funding mechanisms.

This guide is not intended to describe the legal requirements around grant amounts or allocation methods. Readers looking for that information should consult the Grants for Student Needs – Legislative Grants for the 2018-19 School Board Fiscal Year regulation. The Technical Paper for 2018-19 provides additional information on the calculations underlying many of the grants and more information about grants not discussed in detail here.

Appendix

This guide groups grants by the outcomes they are intended to support. In contrast, the technical paper, which describes the grant calculations in more detail, uses only two broad categories: foundation grants and special purpose grants.

Foundation grants provide each board with funding based on number of students and number of schools. Special purpose grants, which provide additional funding to meet specific needs, generally use data more reflective of local conditions and students. In the technical paper these grants are set out as a list.

The technical paper is available on the ministry website at www.edu.gov.on.ca/eng/funding

APPLYING FOR A PARENTS REACHING OUT (PRO) GRANT FOR REGIONAL/PROVINCIAL PROJECTS

STEP 1: APPLICANT INFORMATION

PART 1: ABOUT YOU

Name of individual

completing this
 Cristina Fernandes/ Superintendent of Special Services

application:

Email address (if different

from the username): cristina.fernandes@tcdsb.org

Position within the

organization: Superintendent of Special Services

PART 2: ABOUT YOUR ORGANIZATION

Name of Organization: Toronto CDSB

Type of Parent Group (if

applicable):

Parents of students with special education needs

Address of Organization: Catholic Education Centre 80 Sheppard Ave E, Toronto Ontario, M2N 6E8

Mailing Address of

Organization:

80 Sheppard Avenue East

Name of Individual with

Signing Authority:

Cristina Fernandes Special Services

Position of Individual with

Signing Authority:

Superintendent

Email address of signing

authority:

cristina.fernandes@tcdsb.org

PART 3: ADDITIONAL INFORMATION ABOUT YOUR ORGANIZATION

Please upload any documents that you would like to share about your organization (e.g., proof of incorporated not-for-profit status, brief description of your organization, its history, mandate and mission/vision, letters of support, a list of Board of Directors, an organizational chart, a copy of your organization's by-laws or constitution, a recent annual report).

PART 4: LETTER OF SUPPORT FROM A DISTRICT SCHOOL BOARD

Registered non-profit organizations, parent groups, and publicly funded post-secondary institutions should provide a letter of support from a district school board to be considered for funding. It is strongly encouraged that this letter be provided by a senior level staff member of a publicly-funded district school board (e.g. director of education, supervisory officer).

This does <u>not</u> apply to Parent Involvement Committees (PICs) or Special Education Advisory Committees (SEACs) of a district school board. If you are representing a PIC or a SEAC, please select No.

I am providing a letter of support from a district school board:

No

STEP 2: PROJECT INFORMATION

PART 1: TELL US BRIEFLY ABOUT YOUR PROJECT

Project Title: Parent Series on Special Education

Does the project support a provincial priority? Please select up to three that best apply.

Click here to learn more about each priority

Student Well-Being, Equity and Inclusive Education, Special Education

Other: please specify

How are parents involved in this project?

Please indicate if parents will lead, consult in developing/implementing, and/or participate in the project.

Parents will have the opportunity to participate in a variety information session to development their understanding of special education topics.

PART 2: PROJECT DETAILS

What are the goals and objectives of your project?

This parent series would afford parents the opportunity to participate in a series of workshops that would enhance and support an increased understanding of resources available to support their child both within the school board and in the community.

What demonstrated need in support of parent engagement in your community does your project address?

This series would provide parents the opportunity to better understand special education services available through TCDSB. It would also allow parents to network and learn from each other when supporting students with special education needs.

Why is this project important? Who will benefit from this project and how?

Parents of Special Needs students are the benefactors through a deeper understanding of Special education processes as well as how different special education departments can assist. It will provide parents with the language and information that will assist them when working with the staff at their child's school.

Describe how your project will enhance parent engagement in support of improved student achievement, human rights and equity, and well-being in at least one of the following areas:

Parents as Partners

- Creating a Welcoming District School Board and School Environment for all Parents
- Skill-Building Opportunities for Parents
- Enhancing Communication between School and Parents

Through a multi session approach, parents will learn how to navigate the system. Sessions will be differentiated to their needs in supporting their child. We hope that this better understanding will lead to better communication between parents and schools.

How are you going to meet your goals and objectives?

Please describe what you will do, when you will do it, who will do it, and what results you expect.

Different Special Education Departments will provide one or two sessions that will outline a variety of topics. Examples may include the following:

IEPs and Student Needs

Navigating the IPRC process

The importance of speech and language in your child's learning

Transition Planning for post secondary

Anxiety and your Child

Supporting the transition from elementary to secondary schools

We hope to bring in where possible community service providers to connect with parents. (E.g.: DSO, community colleges, etc.)

How many participants do you anticipate your project will impact directly?

250

How many participants do you anticipate your project will impact indirectly?

500

What geographic area(s) will this project cover

The metropolitan city of Toronto

Do you have a plan in place to evaluate the success of your project? What information will be collected and how? Please include in your answer any success/performance indicators you will be monitoring.

Parent participation surveys will be collected at the end of each session (either paper or electronic depending on parent needs).

Describe your experience in successfully implementing and completing projects aimed at engaging parents to support their children's learning and well-being.

We have in the past run a parent conference that involved approximately 120-140 parents and 20-30 service providers.

Who has worked with you to identify the need for this project and write the proposal?

This project idea was developed with consultation with the multiple departments responsible for special Education services as well as with the Special Education Advisory Committee.

PART 3: ADDITIONAL INFORMATION

Please upload any preliminary documents that would help achieve the success of the project (e.g., event draft agenda).

PART 4: PARTNER INFORMATION (IF APPLICABLE)

Please provide information regarding additional partners that will assist in carrying out this project. Please note that priority will be given to parent-led projects that have been developed in partnership with district school boards.

How many organizations are you 0 partnering with?:

STEP 3: BUDGET INFORMATION **Estimated** Item Description Cost Facilitator/Speaker - travelling expenses and/or fees --- Conférencier(s) - frais de multiple presenters (minimum 1 \$5,000.00 déplacement et honoraires per topic) Refreshments --- Rafraîchissements light snacks/drinks/coffee \$2,000.00 Translation/Translator of parent resources/materials/presentations --- Traduction de Translators for parents at the \$1,200.00 ressources/matériaux pour les parents events Printing of parent resources --- Impression de ressources pour les parents Brochures, presentation handouts \$900.00 Posters; internally and externally Promotion/Advertising --- Promotion/Publicité \$800.00 with agencies Childcare during events for parents --- Garde d'enfants lors d'événements pour les Child Minders (min. 2 per event) \$800.00 parents

copies of supporting documents

(e.g.Parent Guide)

Total: \$12,700.00

STEP 4: SUBMIT THE APPLICATION

By submitting this application form, the applicant declares that the applicant has read and will comply with the <u>Project</u> Guidelines and Terms and Conditions.

Please review your application. To submit your application, please **click "Save Draft" and then "Submit".** If your application has been successfully submitted, you will receive a system-generated email that your application has been received along with a copy of your application form.

Submitted By: Cristina Fernandes

Submitted Date: 2018-05-24 09:38

Application Number: 30042213

ressource pour la participation des parents

Grant Year: 2018-2019

Applicants will be notified by email about the results of their application.

Development of a parent engagement tool or resource --- Conception d'un outil ou

\$2,000.00

Autism Ontario Questions re: Budget:

- Moving forward, could SEAC (and Trustees) receive a "budget booklet" that specifically provides financials and budget info/numbers for special education, including staffing numbers?
- ➤ I can't remember but was SEAC presented with board financials in the beginning of the year (as per Ont.Reg. 464/97)?
- ➤ The appendices show budget actuals from two budget cycles ago and just the revised estimates from last year? Could you please explain why not showing actuals from last year?

Pg.13 of 100 → what does the 34.4 FTE SET and the 33.5 elementary teacher allocation look like OTG? What are the total numbers of SETs and elementary + secondary teachers OTG with this addition?

Pg. 35, 4th bullet \rightarrow which schools teach indigenous languages and how is that made known to the community? Is it a program run during or after school?

Pg. 37, 1st bullet → please explain which 7 FTE leadership positions and where do they move from and to?

Pg. 39, Student Achievement Envelope:

→ Many parents are encouraged by staff to seek private tutor services for their struggling (special ed needs) learners, how does OFIP and/or other student achievement funded programs support the equivalent of tutor services and won't place the financial burden on families to look outside of the education system to close the gaps not addressed at school? Which schools currently have OFIP and other remedial programs?

Pg. 40: SEG \rightarrow total grant = \$124.1 million

- → what is the individual funded amount of each subcategory in this grant?
- → what and where are the gaps in each subcategory?
- → have there been any overages in any subcategories and if yes, to which subcategories have these overages been applied to fill gaps?
 - → how do gaps and overages impact programs and services OTG?
- → please explain the DSENA and how the new changes relate OTG? (provide funding breakdown please)
- → SEA Claim amount → is this automatically received on an annual basis for individual students who have an active SEA claim or does the board have to renew application each year?
 - → how many ADP applications have been made to MOHLTC and does it parallel the need?
- → when was the last time MoE reviewed or audited the TCDSB's SEA Claims and SEA PPA and what was the outcome?
- → How many students are using SEA and has there been an increase/decrease in SEA Claims this year?
- → How many students are using SIP and has there been an increase/decrease in SIP claims this year?
- → Is there an increase in FTE numbers directly related to SIP claims? Please explain what it looks like OTG.
- → When was the last time MoE reviewed or audited the TCDSB's SIP Claims and what was the outcome?
- Pg. 42, 2nd last bullet → What does "enrollment increase of \$2K" mean?
 - → what increases in FTE OTG have been made in this dept.?

- Pg. 47, item 3 \rightarrow have there been any increases in FTE to EA's?
 - → have there been any increases in FTE to ECE's?
 - → has there been an increase/decrease in FDLK enrollment?
 - → has there been an increase/decrease to IEP students in FDLK
- Item 5 → does this include the allocation which the MoE provided funding to hire a Board Certified Behaviour Analyst (BCBA) certification/qualification or equivalent qualification.
- Item $7 \rightarrow$ do accessible textbooks and curriculum/learning materials (digital format) fall into this category? If yes, how much is allocated? If no, where do those items fall under?
- Item 12→ since 2017-18 budget, how much was EPO funding decreased? According to MoE, TCDSB received over \$6 million in EPO funding, which included specific funding for autism? Please explain breakdown of this funding envelope and if it is a dedicated envelope. http://www.edu.gov.on.ca/eng/funding/1819/EPO_memo_Appendix_A_2018_19_gsn_en.pdf
- Pg. 47, 2^{nd} item \rightarrow Who is the Chief of MH? Is this a new position?
- → please explain how the MH workers in secondary will support students through "continued and expanded MH awareness"? What would it look like OTG?
 - 2nd last ¶ → please explain how this special ED teacher funding will look like OTG

Please explain, providing OTG detail, the highlighted items from pg. 42 of the budget book:

Program	FTE
Special Education Teachers	34.4
Grades 4-8 Teachers	18.5
Health and Safety Elementary Teachers	7.0
Elementary Teachers Increase due to enrollment	6.0
Multi-Disciplinary Teams (Conversion of 4 FTE	4.0
contract positions)	
Increase of Vice-Principals	4.0
Health and Safety Secondary Teachers	3.0
Full Day Kindergarten (FDK)Teachers	2.0
Chief of Mental Health - EPO Funding	1.0
Mental Health Staff - EPO Funding	2.0
Mental Health Staff (Conversion of 4 FTE	4.0
contract positions)	
Increase in Autism Services	1.0
Secondary Teacher Reductions due to Enrolment	(2.0)
Increase Principal coverage for Professional	-
Development	
Total	84.9

Pg. 51, Appendix 3B → please explain what the reductions mean OTG....in particular 19.4% reduction to staff development

Pg. 53, Arrowsmith \rightarrow please explain 61% increase from 2016-17 to 2017-18 and please advise when students that were "grandfathered" in program will graduate.

- Pg. 52, Guidance Teachers Elementary Benefits → is 70.1% increase in salaries reflective of increased FTE for this category?
- Pg. 54, VISA commission, etc. → please explain what this all is.
- Pg. 55, PD provision, both panels → please explain what PD will be increased, which staff and how this increased PD will impact students in the classroom
- Pg. 55, decrease in school office furniture, etc → please explain what this means OTG
- Pg. 56, → Board meeting staff answer to question about any increase to CYWs was there was no increase. Please explain increases to wages and salaries
 - → EAP Costing Shepell, please explain what this serves and why 33.7% increase
 - → Explain the SEF funding removal
 - → Secondary school supervisors...how many supervisors does this reflect?
- Pg. 57, → Coordinator & Resource teacher salaries and benefits increase. Does it reflect increase to FTE or just wage increase?
 - → CO-OP. Please explain large increase and drop in funding last year.
- Pg. 58 → Explain reduction to NTIP
- Pg. 59 → Although there is no increase to Literacy meeting expenses in this cycle, please explain huge increase between 2016-17 and 2017-18.
 - → Numeracy is a provincial priority, please explain reduction to PD for Occasionals
 - → Pathways, please explain varied increases and decreases in this category (including 16-17)
- Pg. 61 → Please explain and provide breakdown of increase in Autism Services funding.
- Pg. 65 → Please explain increases/decreases and what is categorized to staff/student performance in class/school vs. Board/staff higher level IT.
- Pg. 69 of 100 of addendum:
- → 12 additional retired principals, please provide number of principals to be re-instituted. Also explain if they will also continue to receive benefits, pension payouts (since they had retired) during the time that they are re-employed
- Pg. 74 of $100 \rightarrow$ will equity and human rights advisor also address parent and student issues? If yes, in what capacity?
- Pg. 88 & 89 of 100 → certain line items here seem to fall under special education...why are they not placed under the "Special Education" transportation sub-heading?

Please explain the following (pg. 135 of 165 of agenda) and how it applies to the TCDSB:

6. Behaviour Expertise Amount

The Behaviour Expertise Amount allocation provides funding for school boards to hire professional staff at the board level who have expertise in Applied Behaviour Analysis, and starting in 2018–19 it will also include a new Applied Behaviour Analysis (ABA) Training Amount. This new component was previously provided to school boards through the Autism Supports and Training funding allocation in Education Programs – Other.

In 2018–19 the Behaviour Expertise Amount Allocation will have two components:

- ABA Expertise Professionals Amount; and
- ABA Training Amount.

ABA Expertise Professionals Amount

The ABA Expertise Professionals Amount provides funding to hire professional staff at the school board level who have expertise in applied behaviour analysis. Applied behaviour analysis is an instructional approach that has been shown to be helpful for many children with *autism spectrum disorder*, as well as students with other special education needs.

(pg. 136 of 165 of agenda)

What is the TCDSB's BEA allotment and what is the breakdown of what it covers? What investments has the TCDSB made, using the BEA and what will it look like OTG? Is all of the BEA allotment used up?

Is it underfunded?

Is there a surplus for this amount and can it be used to fill other gaps in special ed funding?

The main roles of the board-level professional are to:

- Support principals, teachers, educators and other school staff through applied behaviour analysis coaching, training and resources;
- Strengthen and facilitate collaborative working relationships among schools, parents, community members and agencies; and
- Support transitions, collaboration and information sharing between community-based autism service providers, school staff and families.

The funding is made up of a fixed amount for each school board plus a per-pupil amount that reflects the school board's average daily enrolment of all students.

ABA Training Amount

The ABA Training Amount provides funding for training opportunities to build school board capacity in ABA.

The Behaviour Expertise Amount allocation is projected to be approximately \$15.2 million in 2018–19.



LDAO SEAC CIRCULAR

June 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. Pre-planning for the 2018-19 SEAC year
- Accessibility updates
- SEA Per Pupil Amount funding
- 4. Cannabis education resources
- 5. LDAO Educators Institute

List of Supplementary Materials:

- 1. Draft PAAC on SEAC Annual Calendar 2019-20
- 2. K-12 Education Standards Development Committee Key Messages
- 3. Educators' Institute flyer

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

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

1. Pre-planning for the 2018-19 SEAC year

Many SEACs begin planning their agendas for the following academic year in June. To facilitate this process, a draft PAAC on SEAC Annual Calendar is attached, with dates updated. A revised version, with any new Ministry initiatives, will be sent in September.

The PAAC on SEAC Effective Practices Handbook (2016) outlines effective practices to help SEACs develop an annual plan (see: Section 3 SEAC Roles & Responsibilities, http://www.paac-seac.ca/home/paac-on-seac-effective-practices-handbook-for-seac-members/section-3-seac-roles-and-responsibilities/3-1-annual-planning/)

2. Accessibility updates

TheTeachAbleProject is a curriculum resource on accessibility issues. <u>TheTeachAbleProject.org</u> has ready-to-use lesson plans, resources and professional development tools. It is designed to help Ontario educators and school board staff build their awareness of accessibility issues, and to equip them with the information and materials they need to educate and inspire students. The site is a joint project by Ontario school boards, funded by the Accessibility Directorate of Ontario. The content was created by Ontario educators and is available in English and French. During the 2017-18 school year, the site was upgraded and relaunched.

The Accessible Education Standard Development Committee has begun to meet to develop recommendations for a new standard. The committee is divided into two sections, one looking at K–12 education, and one at postsecondary education. There will be a joint subcommittee set up of members from the K-12 group and the postsecondary group, to look at overlapping issues.

Key Messages from the April meeting of the K-12 committee are attached.

3. SEA Per Pupil Amount Funding

There is an important change in the documentation required for SEA Per Pupil Amount Funding, as outlined in <u>Special Equipment Amount (SEA), 2018-19</u>. Supporting documentation for SEA PPA purchases is now reduced to the purchase invoice and a copy of the student's current Individual Education Plan (IEP) that provides evidence of the intended use of the equipment in the student's program. That means a professional assessment making recommendations for SEA technology is no longer required for PPA funding, although it is still required for SEA Claims-Based funding. Computer related equipment and software come under the SEA Per Pupil Amount funding.

The new SEA Guidelines also state that SEA PPA equipment may be used by more than one student, at a school board's discretion, although boards must continue to ensure that the equipment needs of students are being met.

4. Cannabis education resources

In preparation for the upcoming legalization of cannabis for recreational use, the Ministry has committed funding to develop resources and supports for the education sector, and funding to school boards to support training for administrators and educators. Currently, the Ministry has posted education resources for educators and parents, and highlighted a resource for youth developed by the Kids Help Phone line.

Cannabis Information for Educators

Cannabis: What Parents/Guardians and Caregivers Need to Know

https://kidshelpphone.ca/article/cannabis-important-things-know

5. LDAO Educators' Institute

The **Educators' Institute** is a two-day bilingual conference aimed at providing Ontario educators with relevant and practical information and strategies to support their students with learning disabilities. It will take place on August 21st & 22nd, 2018, at the Hilton Mississauga/Meadowvale.

For more information and registration: www.ldatschool.ca/annual-educators-institute/.

Please share the **attached flyer** with educators at your school board.

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

PAAC on SEAC Special Education Advisory Committee Annual Calendar of SEAC Business 2018-2019

PAAC on SEAC encourages school boards to use the PAAC on SEAC Handbook of Effective Practices for SEAC Members as part of the training. A copy of the handbook can be downloaded at www.paac-seac.ca

SEAC On-Going SEAC Activities

- Request notification of all Ministry of Education announcements related to special education and ensure SEAC Chair is registered on the SEAC E-learning site
- Provide orientation to new members and on-going professional development for all SEAC members
- Provide opportunities for SEAC members to provide presentations and updates about their association/organization
- Consider ways to enhance parent engagement and collaboration in special education in every program/initiative
- Evaluate SEAC effectiveness and identify ways to improve meetings

Glossary - A glossary for all of the terms and acronyms underlined in the calendar is in the attached appendix.

ANNUAL CALENDAR OF SEAC BUSINESS for 2018-19			
Month	Annual Activities	2018-19 Activities	
September	 Confirm Special Education Report Checklist submitted to Regional Office in July Review ODA Accessibility Plans (due Sept. 30) Develop or review SEAC annual agenda/goals 	Request information on: • BIPSA special education goals and performance indicators for 18-19 • PD Day plans for 18-19 related to special education	

ANNUAL CALENDAR OF SEAC BUSINESS for 2018-19			
Month	Annual Activities	2018-19 Activities	
October	 Develop process for review of 2018-19 Special Education Plan Request update on last EQAO results: including deferrals, exemptions, participation rates, accommodations provided for students on an IEP and achievement levels. 		
November	 October Report (OnSIS) Data: Request numbers of exceptional students, placement data, suspensions expulsions data IEP Update: Request confirmation that all first term IEP reviews are completed 	Check the EduGains website to see all of the IEP Samples (see Additional Resources below)	
December	Special Education Programs and Services receive information on any changes being considered for 2019-20 and the process for review of Special Education Plan		
January	Financial Update: Re: 2018-19 special education grants, expenditures and reserve fund amount, and 2019-20 budget process		
February	 Review proposed changes to special education programs and services in Special Education Plan Request an IEP Update 	Review parent resources to ensure they are user friendly and easy to understand	
March	 Continue discussion of special education programs and services Request an update on the BIPSA process 		
April	 Request preliminary budget for special education Request data reported to OnSIS in March 	Monitor and participate in public consultations on Special Education Plan	

ANNUAL CALENDAR OF SEAC BUSINESS for 2018-19			
Month	Annual Activities	2018-19 Activities	
May	Information update and discussion re: Special Education Plan/Report Checklist and budget	Monitor participate in public and consultations on Special Education Budget	
June	 SEAC recommendations regarding special Education Plan/Report Checklist and budget Request Special Education data (including IEP and IPRC) for September meeting Develop draft SEAC annual agenda and goals 	Make recommendations to Trustees on the 2019-20 Special Education Plan and budget Develop a plan for SEAC activities in 2019-20	

Additional SEAC Resources:

A broad overview of special education and details of many legal requirements are captured in the newly released, Special Education In Ontario Kindergarten to Grade 12, Policy and Resource Guide (2017 draft) available at:

http://edu.gov.on.ca/eng/document/policy/os/onschools 2017e.pdf

The role of SEAC is defined in Regulation 464/97 on Special Education Advisory Committee available at:

www.e-laws.gov.on.ca/html/regs/english/elaws regs 970464 e.htm

Other Ministry resources including, Standard Documents and Resource Guides are available on the Ministry of Education Website at

www.edu.gov.on.ca

For more information on SEAC and links to key documents, check the new SEAC web pages on the Ministry of Education website at:

www.edu.gov.on.ca/eng/general/elemsec/speced/seac/

For copies of all Memorandums sent from the Ministry to school boards, check the website: (Note that Memo's are sorted by date, and check the most recent months.) http://www.edu.gov.on.ca/eng/policyfunding/memos/

The Ministry of Education IEP Samples for each exceptionality are available on EduGains website at:

www.edugains.ca/newsite/SpecialEducation/transitions.html

The Ministry of Education also has a website with their annual Calendar of activities at: https://www.teachontario.ca/community/explore/calendar-of-education-events

K-12 Education Standards Development Committee Key Messages April 17-18, 2018

- "The strength of the team is each individual member. The strength of each member is the team." (Phil Jackson)
- As part of the April meeting, the K-12 Committee affirmed their shared consensus on the following group norms:
 - 1. Find choices that are win/win
 - 2. Mutual Respect for all members
 - 3. Openness and Flexibility
 - 4. Evidence-Based Approach to Committee work
 - 5. Shared Ownership of Process and Results
- The Committee appreciated hearing from the Minister of Education, the Honourable Indira Naidoo-Harris, who emphasized the importance of creating an inclusive and equitable education system for all students to have a chance to learn and reach their full potential.
- The Committee also appreciated the opportunity to incorporate the voices of youth and the We Have Something to Say Report shared by the Office of the Ontario Child Advocate, and to better understand the role of a disability justice approach and framing barriers to accessibility in terms of rights.
- The Committee continues to identify barriers facing students with disabilities, and agreed that there are a range of barriers still to be explored and discussed.
- The Committee collaborated on developing a shared vision for an accessible-student centred education system which would include a seamless model for transition planning.
- Key themes for the meeting were a focus on equity and inclusion, centering student voices, and considering the intersectionality of disability. Every student matters.
- The Committee recognized that students don't learn in isolation, but in relation to a broad community. Lived experience of educators, staff, and a broad range of student support services must be considered throughout.

- The Committee acknowledged that barriers to accessibility can be exacerbated by capacity and resource challenges, particularly for northern and rural boards as well as Francophone boards who face challenges providing French-language services.
- The Committee appreciates the Ministry of Education sharing information and insights about K-12 education in Ontario. The Committee acknowledges the role of current accessibility standards and current Education framework, as well as challenges and implementation issues.
- Looking ahead, the Committee is committed to:
 - Working towards accessibility in a way that includes all students with disabilities
 - Focusing on evidence and research-based approaches
 - Referring back to Committee guiding principles throughout their work
- "Unity is strength. When there is teamwork and collaboration, wonderful things can be achieved." (Mattie Stepanek)

Educators' Institute



August 21 & 22, 2018 Hilton Mississauga/Meadowvale, Ontario

Participate in our two-day Educators' Institute and learn about evidence-based practices, effective instructional strategies and resources for students with learning disabilities (LDs).



Panel Presentation: What You Need to Know **About DSM-5**

Hosted by Lawrence Barns



Keynote Speaker: Dr. Rhonda Martinussen



Keynote Speaker: Lesley Andrew

Workshop Topics:

Math, Anxiety, Technology, **Executive Functions. Mental Health. and more!**



Click here for more information and to register! Space is fifthited.

SEAC PENDING LIST AS AT June 13, 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. Include suspension statistics for all students with Individual Education Plan (IEP), as well as for students not identified be provided to the Special Education Advisory Committee (February 2018)
- 5. Board provide SEAC with a progress report on the recommendation listed on page 109 of the agenda, that have not yet been acted on namely:
 - Case management software for centralized tracking of specialeducation service referrals and backlogs.

(February 2018)

- 6. SEAC recommends that Singapore Math, Beast Canada and the Spirit of Math programs be added as parent resources on the Toronto Catholic District School Board's website
- 7. 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.