



January 10, 2025

The Supported Child Development Program (SCD), part of Island Health's Child Youth and Family Rehabilitation Services at Queen Alexandra Centre for Children's Health is pleased to announce that applications are now open for the **Spring and Summer Inclusion Grant (SSIG)** for school age day camp and child care providers.

The SCD provides inclusion support services for children with a developmental delay or disability in physical, cognitive, communicative, or social/emotional/behavioural areas who may need extra support to participate in child care.

### **What is the SSIG funding for?**

- To provide inclusive and accessible care for children with support needs in kindergarten to age 12 during spring and summer breaks.
- For the provision of enhanced ratio staffing for front-line, direct and indirect support to children with support needs, under the care, direction and control of the applicant program.
  - Enhanced ratio staff will be employed by the child care or day camp program with funds obtained through the grant and will be in addition to any adult-to-child ratios specified by BC Child Care Licensing Regulations.
- Enhanced ratio staffing will provide direct assistance to one or more children in attendance and provide immediate and continuous modifications and/or adaptations to these inclusive programs and environments with all staff working together as a team.
- An inclusive child care or day camp setting, welcomes all children, including those with support needs and will develop and implement protocols and adaptations for a fully inclusive program (e.g. toileting, physical access, appropriate activities/alternatives)
- Qualified programs will be both licensed and unlicensed, with safe and sufficient adult to child ratios, and who will enroll children living in Greater Victoria – including Sooke and Port Renfrew, the Saanich Peninsula, and the Southern Gulf Islands.
- ❖ SCD program consultants will support successful applicant programs with training and universal consultation during contract funding periods.
- ❖ Free trainings will be offered to child care providers prior to spring and summer breaks.

If you wish to apply, please complete and return the SSIG application, including two letters of reference, by **February 28, 2025**.

Letters of reference should come from external sources such as other community providers or parents/guardians recently involved with the program and answer the following questions:

1. Please describe your relationship with the applicant (Centre/Program) being referenced?
2. What has been your experience with this program's ability to include all children?
3. What are the organizations strengths in delivering childcare through their spring and summer programs?

## **Family Friends Fitness Function Fun Future**

Supported Child Development Program – Child, Youth and Family Rehabilitation Services  
2400 Arbutus Road, Victoria, B.C. V8N 1V7 Phone: 250-519-5390 Fax: 250-519-6963



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Please note:

- Programs whose contracts expire March 31, 2025 will need to submit a new application for Summer 2025 and Spring Break 2026.
- Programs who do not currently have any SSIG contract can apply for Spring Break 2025 as well as Summer 2025 - Spring 2026.
  - If you are requesting Spring Break 2025 funding, please submit your request by **February 14, 2025**.

Successful applicants for Spring Break 2025 will be notified by **March 3, 2025**. Applicants for Summer 2025 – Spring 2026 will be notified by early April. Grant amounts will be based on size of program, demonstration of and commitment to inclusive practice and available budget. Late applications may not be considered.

If you have any questions regarding the application process or the Spring and Summer Inclusion Grant, please contact Jenni Funk, SCD Coordinator at 250-519-6760 or [jennifer.funk@islandhealth.ca](mailto:jennifer.funk@islandhealth.ca).

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# Supported Child Development Spring & Summer Inclusion Grant Application 2025

<b>CHILD CARE PROGRAM OR CAMP NAME:</b>	
<b>ADDRESS:</b>	
<b>CONTACT NAME:</b>	
<b>PHONE NUMBER:</b>	
<b>EMAIL:</b>	
<b>WORKSAFE NUMBER:</b>	

### Camp Description

What are typical camp activities?	
Number of summer break camp weeks:	
Total spaces per week (summer):	
Program cost/week (summer):	
Number of spring break camp weeks:	
Total spaces per week (spring):	
Camper to Leader ratio:	
Program cost/week (spring):	
Hours of camp:	
Pre/Post camp care:	
Closure dates:	
Expected wage rate of enhanced ratio staff (please include benefits/% in lieu/MERCs) (You can use the attached wage grid if appropriate):	
We carry a minimum \$2,000,000 comprehensive general liability insurance. ( a Certificate of Insurance will be required)	



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### **Inclusion Philosophy**

Please describe your inclusion philosophy and practices and ways you support all children to be included (e.g inclusion/exclusion policies – if formalized please provide a copy.)

What are some examples of inclusion at your centre?

Are there any potential barriers to inclusion in your programs and what mitigation strategies do you have in place? (e.g. behaviour/discipline guidance policies/procedures, community partnerships and other resources)

How will you address challenges when continued participation is at risk?



**Accessibility**

Please describe your physical space:	
Please describe your transportation options:	
Do you have an accessible bus or other transportation option if needed?	

Some children require help/prompting with self-care (toileting, dressing, mealtime supports, menses support, medications, personal hygiene (e.g. handwashing). Can your program support children with these needs?

**Program Planning and Communication**

How will you register, identify and gather information about children who may need inclusion support?

How will you plan for enhanced ratio staff to be used effectively?

What staff training do you have in place?



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How many children do you expect to support in your program?

How will you be advertising and promoting that you have inclusion support funding from the Supported Child Development Program?

If you are a year round out of school care, do you anticipate being able to include children during spring and summer who do not usually attend your program? If no, please explain.

How will you communicate with families about successes and challenges with their child’s inclusion?

Allocation of inclusion funding is based on program capacity to include children and available budget resources. How many inclusion support positions are you requesting?

Signed:	
Signing Authority Name:	
Date:	

Please submit completed application to: [scd\\_programsupport@islandhealth.ca](mailto:scd_programsupport@islandhealth.ca) by clicking the "Submit Form" button below and attaching two letters of reference by **February 28, 2025**. Late applications may not be considered.

For Office Use:

Date received:

# Supported Child Development Wage Grid Template

## School Years – Unlicensed Camp Programs

**Child Care Program:**

**Date:**

Years of Experience 	< 1 year	1 – 4 yrs	5 – 8 yrs	10 +	Other incentives (e.g. Class 4 license supplement)
Job Title/Classification	Base Wage	Step 1	Step 2	Step 3	
Program Leader I					
Program Leader II					
Responsible Adult					
Responsible Adult with related education*					

\*examples: CYC, Community Support Worker diploma...

Employer Costs:

CPP: \_\_\_\_\_% EI: \_\_\_\_\_% Worksafe: \_\_\_\_\_% Vacation: \_\_\_\_\_% Sick: \_\_\_\_\_%

Other (e.g. pension/rsp contributions, extended health):

Job titles/classification names can be changed to fit with your program’s structure, collective agreements, etc.

The “years of experience” fields can be adjusted as necessary to fit with your staffing policies/collective agreements.

Please add additional rows if necessary.

Please provide a job description including qualifications and education for each job title/classification.


The SCD funds enhanced ratio support to lower the child to adult ratio so that all staff can provide inclusion support as necessary.

# Supported Child Development Wage Grid Template

## School Years – Licensed OSC

**Child Care Programs:**

**Date:**

Years of Experience 	< 1 year	1 – 4 yrs	5 – 8 yrs	10 +	Other incentives (e.g. Class 4 license supplement)
Job Title/Classification	Base Wage	Step 1	Step 2	Step 3	
Program Leader					
Program Assistant					
Responsible Adult					
Responsible Adult with related education*					

\*examples: CYC, Community Support Worker diploma...

Employer Costs:

CPP: \_\_\_\_\_% EI: \_\_\_\_\_% Worksafe: \_\_\_\_\_% Vacation: \_\_\_\_\_% Sick: \_\_\_\_\_%

Other (e.g. pension/rsp contributions, extended health):

Job titles/classification names can be changed to fit with your program’s structure, collective agreements, etc.

The “years of experience” fields can be adjusted as necessary to fit with your staffing policies/collective agreements.

Please add additional rows if necessary.

Please provide a job description including qualifications and education for each job title/classification.

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