



**Rialtas na hÉireann**  
Government of Ireland



## AIM Level 1 – Inclusion Co-ordinator Increased ECCE Capitation Frequently Asked Questions

<p><b>What is the purpose of the funding?</b></p>	<p>The increased ECCE capitation is funded by the Department of Children and Youth Affairs (DCYA) in recognition of the leadership and mentoring role that will be delivered by the Inclusion Co-ordinator in the ECCE pre-school rooms in pre-school settings.</p>
<p><b>How is the increased capitation applied?</b></p>	<p>The increased rate is applied on a pro-rata basis to approved ECCE registrations and to other approved DCYA childcare registrations where the child is eligible for the ECCE Programme and is participating in the ECCE pre-school room.</p> <p><b><i>The increased capitation will start and cease as per the Start and End Date on the approved registration and as per the employment dates of the Inclusion Co-ordinator.</i></b></p> <p>A Notification of Change Form (<b>Figure 3 below</b>), must be completed and returned to the Pobal AIM Team when an Inclusion Co-ordinator ceases employment or is absent from work for four or more consecutive ECCE weeks within the ECCE programme year.</p> <p>Where an Inclusion Co-ordinator ceases employment or is absent from work for four or more consecutive ECCE weeks, before the end of the ECCE programme year, the ECCE setting's entitlement to the increased ECCE capitation will cease after four weeks.</p>
<p><b>How much is the increased capitation?</b></p>	<p>A pro-rata increase of €2 per week per approved ECCE registration over 38 weeks OR a pro-rata increase of €1.85 per week per approved ECCE registration where the ECCE setting is approved 41 weeks. Where an ECCE registered child increases or decreases their level of attendance, the capitation will adjust to reflect this.</p>

	<p>Examples:</p> <ol style="list-style-type: none"> <li>1. ECCE registration approved for 5 days per week for 38 weeks will receive an increased capitation of €2 per week over the 38 weeks = total €76.</li> <li>2. ECCE registration approved for 3 days per week for 23 weeks will receive an increased capitation of €1.20 per week over the 23 weeks = total €27.60.</li> <li>3. ECCE registration approved for 4 days per week for 41 weeks will receive an increased capitation of €1.85 per week over the 41 weeks = total €76.</li> </ol>
<p><b>Who can apply?</b></p>	<p>An ECCE provider, who is <b>or</b> employs a graduate from the Leadership for Inclusion (LINC) in Early Years Programme, who has agreed to take on the role and responsibilities of an Inclusion Co-ordinator in the ECCE rooms of their ECCE setting.</p>
<p><b>When to apply?</b></p>	<p>To avail of the increased ECCE capitation, eligible ECCE providers must apply annually, prior to the start of each ECCE programme year and when a new Inclusion Co-ordinator commences in their ECCE setting. <b>Entitlement to the increased capitation will not roll across the ECCE programme years.</b></p> <p>If an Inclusion Coordinator is on extended leave i.e. maternity, sick leave at the beginning of a pre-school year, an application should only be submitted once the Inclusion Coordinator returns to the pre-school setting.</p>
<p><b>How to apply?</b></p>	<p>All applications (<b>Figure 1 below</b>) must be made electronically via the Programmes Implementation Platform (<a href="#">PIP</a>), be completed in full and include the following;</p> <ul style="list-style-type: none"> <li>• Unique Graduate ID issued by Mary Immaculate College upon graduation.</li> <li>• A signed Inclusion Co-ordinator Declaration and Consent Form (<b>Figure 2 below</b>) available from the AIM website at (<a href="#">aim.gov.ie</a>) or from PIP Resources.</li> </ul> <p><b>Postal or email applications will not be accepted.</b></p>
<p><b>What are the eligibility criteria?</b></p>	<ul style="list-style-type: none"> <li>• The Inclusion Co-ordinator has a LINC Graduate ID that verifies they are qualified having completed the one year LINC Programme through Mary Immaculate College.</li> <li>• <b><u>The Inclusion Co-ordinator is working solely in the ECCE setting to which the increased capitation relates.</u></b></li> <li>• The ECCE provider is a registered ECCE setting under active DCYA contract to deliver the ECCE programme.</li> <li>• The child(ren) to whom the increased capitation relates <b>must be in the ECCE room</b> and be registered on the ECCE programme <b>or</b> be eligible for ECCE and registered on another DCYA childcare programme.</li> <li>• The ECCE provider has approved ECCE registrations for children qualifying for the relevant ECCE programme year.</li> <li>• The ECCE provider must be tax compliant with a Tax Clearance Access Number</li> </ul>

	<p>(TCAN) and Tax Registration Number (TRN).</p> <ul style="list-style-type: none"> <li>• Applications are fully completed with a signed Inclusion Co-ordinator Declaration and Consent Form, whereby the Inclusion Co-ordinator agrees to take on the role and responsibilities associated with the post. (<a href="http://aim.gov.ie">aim.gov.ie</a>)</li> </ul>
<p><b>Verification procedures applied?</b></p>	<ul style="list-style-type: none"> <li>• Applications will be verified against the eligibility criteria outlined.</li> <li>• Additional information, including proof of identity or employment, may be sought as part of this process.</li> <li>• <b>Changes to the Inclusion Co-ordinator’s employment must be notified immediately to Pobal AIM Team (Figure 3 below).</b></li> <li>• Compliance Visits will apply.</li> </ul>
<p><b>How are payments made?</b></p>	<ul style="list-style-type: none"> <li>• ‘Special Allocation’ made against each approved ECCE Registration. This will be viewable on the ECCE setting’s PIP Portal under the ‘Registrations’ tab.</li> <li>• The payment is linked to the ECCE registrations and the employment of the Inclusion Co-ordinator and will be paid in line with the ECCE payment schedule.</li> <li>• This increased capitation <b>will not</b> be included in the ECCE advance payment.</li> <li>• Approved ECCE settings can expect the increased capitation to be reflected in their 2<sup>nd</sup> ECCE payment onwards after registrations have been approved.</li> <li>• Please note payments in relation to children who are eligible for the ECCE programme and are in the ECCE pre-school room but are registered on another DCYA childcare programme will be made later in the pre-school year.</li> </ul>
<p><b>Contractual and Reporting Requirements?</b></p>	<ul style="list-style-type: none"> <li>• Declaration against ECCE Contract.</li> <li>• Where an Inclusion Co-ordinator ceases their employment or is absent from work for four or more consecutive ECCE weeks, this <b>must be notified immediately</b> to the Pobal AIM Team on-line via the Notification of Changes form <b>on PIP. (Figure 3 below)</b></li> <li>• The Inclusion Co-ordinator can also notify the Pobal AIM Team of changes in their employment. This will be facilitated through an off-line Notification Form that can be downloaded from the AIM website at <a href="http://aim.gov.ie">aim.gov.ie</a></li> </ul>

## Figure 1: Employment of LINC Graduate in the capacity of Inclusion Co-ordinator Increased Capitation Application Form

To avail of the increased ECCE capitation, the ECCE provider **must apply on-line via the Programmes Implementation Platform**. ([PIP](#))

A new application is required for every ECCE programme year and when a new Inclusion Co-ordinator commences employment.

The following information will be submitted as part of the application process.

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### *Provider Information (auto filled by PIP)*

- 
- ECCE Provider Name
  - ECCE Provider Address
  - DCYA Reference
  - ECCE Programme Call
- 

### *Inclusion Co-ordinator Information*

- 
- Full Name:
  - Graduate ID:
  - Personal Contact Number:
  - Personal Email:
  - Employment Start Date:
  - Number of Days per Week Employed:
  - Number of Hours per Week Employed:
  - Job Title:
  - Contract Type:
- 

*Attach Signed LINC Declaration, Confirm and Submit*

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## Figure 2: Inclusion Co-ordinator Declaration and Consent Form

As part of the application process, the ECCE provider will be required to provide the Pobal AIM Team with information relating to the Inclusion Co-ordinator in their employment. Therefore, it is a requirement of the application and verification process that the Inclusion Co-ordinator signs a Declaration and Consent Form permitting the ECCE provider as their employer to submit information about them to the Pobal AIM Team.

This Declaration and Consent Form will also be used to give the DCYA and/or the Pobal AIM Team permission to verify the qualifications of the LINC graduate employed as Inclusion Co-ordinator with Mary Immaculate College.

The following information will be submitted as part of the declaration and consent form:

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### Section 1: Employment and Location Details

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Employer Name:	
ECCE Provider Name: <i>(Location of Work)</i>	
ECCE Provider Address: <i>(Location of Work)</i>	
DCYA Reference:	(e.g. 09LH0759)

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### Section 2: Inclusion Co-ordinator Details

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First Name:	
Last Name:	
Maiden Name <i>(if applicable):</i>	
Graduate ID: <i>(as assigned by Mary I)</i>	
Personal Contact Number:	
Personal Email:	
Employment Start Date:	
Number of days per week employed in the ECCE setting:	
Number of hours per week employed in the ECCE setting:	
Position:	
Contract Type:	

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***Declaration and Consent***

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I confirm that by signing this Declaration and Consent Form I am giving the above named ECCE Provider permission to submit my details to the Pobal AIM Team via the PIP Portal in support of their application for the increased ECCE capitation rate.

By signing this Declaration and Consent Form I confirm the following:-

1. I will upon request from the DCYA and/or Pobal AIM Team, provide DCYA and/or Pobal AIM Team with proof of my identity or employment.
2. I am the Inclusion Co-ordinator as named in this Declaration and my details outlined above are accurate.
3. I am employed and working as an Inclusion Co-ordinator in the ECCE setting as named in this Declaration.
4. I am a graduate of the LINC programme.
5. On completion of this signed agreement, I will take on the role and responsibilities associated with the post of Inclusion Co-ordinator – as stated on [aim.gov.ie](http://aim.gov.ie)
6. By signing this Declaration Form I am giving the DCYA and/or the Pobal AIM Team permission to verify my qualifications with Mary Immaculate College.

Full Name: (Block Capitals)	
Signature:	
Date:	

## Figure 3: Notification of Changes

A requirement of funding is that changes in the employment of the Inclusion Co-ordinator **must be** notified immediately to the Pobal AIM Team. The types of changes that require notification are:

1. Inclusion Co-ordinator ceases employment
2. Inclusion Co-ordinator changes their employment conditions e.g. extended absence from work.  
***For this purpose, an extended absence has been defined as four or more consecutive ECCE weeks and includes maternity leave, sickness and career breaks etc.***

A notification of change **must be** reported to the Pobal AIM Team via their PIP Portal by the ECCE provider.

A notification of change can also be reported by the Inclusion Co-ordinator. An off-line notification form will be downloadable from the AIM website to facilitate an Inclusion Co-ordinator who wishes to notify Pobal AIM team directly via post or email ([aimteam@pobal.ie](mailto:aimteam@pobal.ie)).

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### *Section 1: Pre-school Facility and Employer Details*

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- ECCE Provider Name:
- ECCE Provider Address:
- DCYA Reference:
- Employer Contact Name:
- Employer Contact Number:
- Employer Contact Email:

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### *Section 2: Inclusion Co-ordinator Details*

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- Full Name:
- Graduate ID:
- Personal Contact Number:
- Personal Contact Email:

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### *Section 3 – Notification of Change*

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Change Type: <i>(Please circle)</i>	Ceased Employment
	Change in Start Date or Extended Absence

If ceased employment is selected above please complete the following:

Last Date of Employment:	
Was notice provided? Yes or No	
Reason for employment ending? <i>(optional)</i>	

If Change in start date or Extended absence is selected above please complete the following:

Reason for Absence: <i>(Please circle)</i>	Revised Start Date  Maternity Leave  Sick Leave  Career Break  Other (please specify)
Revised Employment Start Date: (only applicable if revised start date is chosen above)	
Date Extended Absence Started:	
Actual Return Date: <i>(This is the date the IC returned to work – if known)</i>	

***If the "Actual Return Date" changes or is not known at the time of submission an updated notification of change form should be submitted to the Pobal AIM Team on return of the Inclusion Co-ordinator to the ECCE setting.***

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*Section 4 - Confirmation and Signature*

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I confirm that the information provided within this notification of change is true and accurate at the time of submission.

Full Name: (Block Capitals)	
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Signature:	
Position:	
Date:	