

Rannán Párolla,  
An Roinn Oideachais agus Eolaíochta,  
Cor na Madadh,  
Baile Átha Luain,  
Co. na hIarmhí.



Payroll Division,  
Department of Education and Science,  
Cornamaddy,  
Athlone,  
Co. Westmeath.

**Circular Pay 0005/2006**

**To the Management Authorities, Principal Teachers and Substitute (Casual/Non Casual) Special Need Assistants of Primary and Second Level Schools.**

## **New Arrangements for the Payment of Substitute (Casual/Non Casual) Special Need Assistants from the 1<sup>st</sup> January, 2006.**

### **1. Introduction**

The Minister for Education & Science wishes to inform Boards of Management and school staff of the new arrangements for the payment of Substitute Special Need Assistants from the 1<sup>st</sup> January, 2006.

While reference will be made to Substitute Special Need Assistants throughout this circular, it should be noted in future that Substitute Special Need Assistants will be referred to as Casual or Non Casual Special Need Assistants.

### **2. Single Payroll for all Special Need Assistants in Primary and Second Level Schools**

At present Special Need Assistants employed in Primary and Second level schools are paid on a payroll operated by the Department whilst substitute Special Need Assistants are paid by Boards of Management. To implement the terms of the Protection of Employees (Part-time Work) Act, 2001, as they apply to Casual and Non Casual employees, it is necessary to introduce a single payroll to be operated by the Department from the 1<sup>st</sup> January, 2006.

The current system for the payment of Substitute Special Need Assistants in Primary and Second Level Schools whereby claim forms are submitted to the Substitute SNA Payroll Section of the Department and schools are reimbursed, has ceased since 31<sup>st</sup> December, 2005.

All outstanding claim forms for the payment of Substitute Special Need Assistants employed in Primary and Second Level Schools prior to 31<sup>st</sup> December, 2005 must be submitted to the Substitute SNA Payroll Section of the Department by the **31<sup>st</sup> January, 2006**.

### **3. New Forms for Payment**

Substitute Special Need Assistants in Primary and Second Level Schools will be paid through the new payroll with effect from January, 2006.

The relevant forms (copies of forms included) must be completed and submitted to the Substitute SNA Payroll Section, Payroll Division of the Department for the payment of Substitute Special Need Assistants on an ongoing basis. Application forms (Casual/Non Casual SNA Form 1 and Casual/Non Casual SNA Form 2) are also available to download from the Department's website at [www.education.ie/education/personnel/special need assistants](http://www.education.ie/education/personnel/special%20need%20assistants).

### **4. Dates of Payment**

Substitute Special Need Assistants will be paid on a fortnightly basis on the same day as other Special Need Assistants in Primary and Second Level Schools.

For payroll purposes, claims for Substitute Special Need Assistants must be submitted well in advance of the payroll date. For example, if a Special Need Assistant is to be paid on Thursday, 9<sup>th</sup> February, 2006 the

closing date (i.e. latest date for input of claims for that payment in the Department) is Friday, 27<sup>th</sup> January, 2006. Similar arrangements apply to Special Need Assistants currently on the Department's payroll. A list of payroll closing dates for 2006 is attached as Appendix A.

Accordingly, the first payroll issue in which the Substitute Special Need Assistants will be paid is the 9<sup>th</sup> February, 2006. School Authorities should ensure that claims are submitted as early as possible to facilitate payment.

## **5. Collection of Special Need Assistant Data**

Schools were requested some time ago to ensure that Substitute Special Need Assistants submitted personal details of PPSN, name, address, bank account and details of substitute service. Any Substitute Special Need Assistant who has not submitted these details should do so immediately.

## **6. Rates of Pay**

Substitute Special Need Assistants are paid at an hourly rate of €13.95 effective from 1<sup>st</sup> December, 2005 inclusive of holiday pay at 8%. The current daily rate is €89.31 inclusive of holiday pay.

## **7. Method of Payment**

All payments to Substitute Special Need Assistants will be lodged directly to their personal bank account by electronic funds transfer (EFT). Bank details need only be submitted once and should only be re-submitted if there is a change in bank account details.

## **8. Superannuation Deductions**

Superannuation deductions will commence for Substitute Special Need Assistants on the new payroll. The only group from whom deductions will not be made are Special Need Assistants who have retired on compulsory age grounds and are not new entrants (please refer to the Public Service [Miscellaneous Provisions] Act 2004 and Department of Education and Science Circular 09/04 [Post Primary] and Circular 10/04 [Primary]). In this context, it should be noted that Special Need Assistants over 65 who undertake substitute work after 31<sup>st</sup> March, 2004 will have superannuation deductions made if a break of more than 26 weeks occurs between periods of employment.

Superannuation deductions will be made from each salary payment. In general, Substitute Special Need Assistants will pay superannuation deductions as follows:

- 1.5% of current co-ordinated salary towards Spouses and Children's Pension (pre-tax deduction from gross salary less twice the maximum personal annual rate of Dept. of Social and Family Affairs Old Age Contributory Pension)
- 1.5% of current gross salary towards Retirement Gratuity (pre-tax deduction from gross salary)
- 3.5% of current co-ordinated salary towards Retirement Pension (pre-tax deduction from gross salary less twice the maximum personal annual rate of Dept. of Social and Family Affairs Old Age Contributory Pension)

For further information refer to Circular Letter PEN 02/04 on [www.education.ie](http://www.education.ie).

## **9. Absences for which Substitution is payable**

### **9.A Sick Leave**

A Substitute Special Need Assistant may be employed to replace a Special Need Assistant who is absent on certified sick leave if medical certification is provided. Sick leave absences are subject to the terms of the sick leave scheme. Where a Special Need Assistant is absent on sick leave for more than two consecutive days a medical certificate is required for the total period of the absence.

Medical certificates must state the name of the Special Need Assistant, as it is known on the Department's record i.e. the name that is on the Special Need Assistant's payslip.

If a Special Need Assistant is absent on uncertified sick leave (subject to a maximum of two consecutive days), the School Authorities may employ a Substitute Special Need Assistant from the first day of absence.

## **9.B Maternity Leave**

A Substitute Special Need Assistant may be employed by the School Authorities to cover paid maternity leave up to 18 consecutive weeks, leave in lieu up to 30 consecutive days and unpaid maternity leave up to 8 weeks for a Special Need Assistant or until the end of the contract of employment. Part-time Substitute Special Need Assistants will be paid on a pro rata basis.

## **9.C Adoptive Leave**

A Substitute Special Need Assistant may be employed by the School Authorities to cover paid adoptive leave up to 16 consecutive weeks, leave in lieu up to 22 consecutive days and unpaid adoptive leave up to 6 weeks or until the end of the contract of employment. Part-time Substitute Special Need Assistants will be paid on a pro rata basis.

The periods of absence referred to above for maternity and adoptive leave are those that currently apply. You will be notified of any change to these provisions as they arise.

## **9.D Brief Absences**

The position regarding substitute cover for brief absences is outlined in Circular SNA 18/04 which is available on the Departments website.

## **10. Maximum Hours and Entitlement to undertake Substitute Special Need Assistant Work**

A Substitute Special Need Assistant may be paid for substitution work for a maximum of 32 hours per week. A regular part time Special Need Assistant may be paid for additional substitute hours subject to a combined maximum of 32 hours per week. Full time Special Need Assistants cannot be paid for substitute work. Job-sharing Special Need Assistants or those on approved leave of absence may not engage in substitute work.

## **11. Dissemination of Information**

Management authorities are requested to bring the contents of this Circular to the attention of all Substitute Special Need Assistants in their schools and also to the attention of the members of the Boards of Management.

## **12. Queries on this Circular**

If you have any query in relation to this Circular please contact the SNA Payroll Section, Payroll Division at 090 648 4136 or e-mail your query to [sna\\_pay@education.gov.ie](mailto:sna_pay@education.gov.ie)

P. Maloney,  
Principal Officer.  
January, 2006

<b>SPECIAL NEED ASSISTANTS PAYROLL CLOSING DATES FOR 2006</b>		
<i>PAYMENT DATE</i>	<i>PAYROLL PERIOD</i>	<i>CLOSING DATE</i>
12/01/2006	2006/02	N/A
<b>26/01/2006</b>	<b>2006/04</b>	N/A
09/02/2006	2006/06	27/01/2006
<b>23/02/2006</b>	<b>2006/08</b>	<b>10/02/2006</b>
09/03/2006	2006/10	24/02/2006
<b>23/03/2006</b>	<b>2006/12</b>	<b>10/03/2006</b>
06/04/2006	2006/14	24/03/2006
<b>20/04/2006</b>	<b>2006/16</b>	<b>07/04/2006</b>
04/05/2006	2006/18	21/04/2006
<b>18/05/2006</b>	<b>2006/20</b>	<b>05/05/2006</b>
01/06/2006	2006/22	19/05/2006
<b>15/06/2006</b>	<b>2006/24</b>	<b>02/06/2006</b>
29/06/2006	2006/26	16/06/2006
<b>13/07/2006</b>	<b>2006/28</b>	<b>30/06/2006</b>
27/07/2006	2006/30	14/07/2006
<b>10/08/2006</b>	<b>2006/32</b>	<b>28/07/2006</b>
24/08/2006	2006/34	11/08/2006
<b>07/09/2006</b>	<b>2006/36</b>	<b>25/08/2006</b>
21/09/2006	2006/38	08/09/2006
<b>05/10/2006</b>	<b>2006/40</b>	<b>22/09/2006</b>
19/10/2006	2006/42	06/10/2006
<b>02/11/2006</b>	<b>2006/44</b>	<b>20/10/2006</b>
16/11/2006	2006/46	03/11/2006
<b>30/11/2006</b>	<b>2006/48</b>	<b>17/11/2006</b>
14/12/2006	2006/50	01/12/2006
<b>28/12/2006</b>	<b>2006/52</b>	<b>15/12/2006</b>

**Please note the following:-**

- a) If a bank holiday coincides with a closing date, the closing date is subject to change.
- b) Forms which have not been fully and accurately completed will be returned to the School.
- c) All forms must be received on or before the closing date.
- d) Forms must not claim payment beyond the date of declaration.

## CLAIM FOR PAYMENT OF SUBSTITUTE SPECIAL NEED ASSISTANT

This initial claim form should be completed where Substitute Special Need Assistants have not submitted personal details previously or if she/he wishes to amend personal details. Payment can not be processed if insufficient details are supplied.

### Section 1 - Substitute SNA'S Personal Details:

PPSN 

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Title \_\_\_\_\_ First Name \_\_\_\_\_ Surname \_\_\_\_\_

Former Surname (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Phone Number \_\_\_\_\_

**Bank Details**

Name of Bank \_\_\_\_\_

Address \_\_\_\_\_

Account No 

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 Sort Code 

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### Section 2 - School Details:

Roll No \_\_\_\_\_ School Name \_\_\_\_\_

School Phone No \_\_\_\_\_ Control Group \_\_\_\_\_

Absent SNA PPSN 

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 Absent SNA Name \_\_\_\_\_

### Section 3 - Claim Details:

Week 1 beginning (Monday) \_\_\_\_\_ Week 2 beginning (Monday) \_\_\_\_\_

Reason for absence	Hrs	Mins
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

Reason for absence	Hrs	Mins
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

Substitute SNA Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please ensure that the appropriate medical certification in respect of sick leave absence(s) is enclosed with this form**

**Declaration: As Chairperson/Manager/Principal of the above named school, I certify that the information submitted is accurate and complete in all respects. I also certify that I have given my consent for the above absence shown (other than absence through illness).**

Chairperson/Manager/Principal Signature \_\_\_\_\_ Date \_\_\_\_\_

**For Official Use:** Payroll Issue \_\_\_\_\_ Input by \_\_\_\_\_ Date \_\_\_\_\_

M C Received Y \_\_\_ N \_\_\_ Checked \_\_\_\_\_ Date \_\_\_\_\_

**CLAIM FOR PAYMENT OF SUBSTITUTE SPECIAL NEED ASSISTANT**

**Section 1**

Substitute SNA PPSN           Substitute Name \_\_\_\_\_

Roll No \_\_\_\_\_ School Name \_\_\_\_\_

School Phone No \_\_\_\_\_ Control Group \_\_\_\_\_

**Section 2**

Absent SNA PPSN           Absent SNA Name \_\_\_\_\_

Week 1 beginning (Monday) \_\_\_\_\_

Reason for absence		Hrs	Mins
	Monday		
	Tuesday		
	Wednesday		
	Thursday		
	Friday		

Week 2 beginning (Monday) \_\_\_\_\_

Reason for absence		Hrs	Mins
	Monday		
	Tuesday		
	Wednesday		
	Thursday		
	Friday		

Substitute SNA Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please ensure that the appropriate medical certification in respect of sick leave absence(s) is enclosed with this form.**

**Declaration: As Chairperson/Manager/Principal of the above named school, I certify that the information submitted is accurate and complete in all respects. I also certify that I have given my consent for the above absence shown (other than absence through illness).**

Chairperson/Manager/Principal Signature \_\_\_\_\_ Date \_\_\_\_\_

**For Official Use:** Payroll Issue \_\_\_\_\_ M C Received Y \_\_\_ N \_\_\_

Input by \_\_\_\_\_ Checked by \_\_\_\_\_

Date \_\_\_\_\_ Date \_\_\_\_\_