



Business Rules: Eligibility Criteria for PSP Complex Needs Payment

COMPLEX NEEDS

The specialist package for complex needs is a one-off, time limited payment that is only accessible in extraordinary circumstances for children and young people in statutory OOHC. It is intended to promote placement stability and support achievement of the case plan goal. It is **not** intended to be an ongoing payment.

A Complex Needs Payment will only be considered by FACS where:

- there is a demonstrated need for specific time-limited supports with clearly identified outcomes
- the eligibility criteria for one or more categories outlined below has been met and there is evidence to support the application.
- an application for a complex needs payment is approved by FACS prior to engagement of the service or expenditure of funds.

The Complex Needs Payment categories are:

1. Therapeutic behaviour support
2. Disability care
3. Additional rostered staff

In truly extraordinary circumstances, service providers may make a submission to the Deputy Secretary Northern Cluster to consider making a discretionary payment for an additional service and/or support, the absence of which would compromise a child or young person's health, safety or wellbeing or compliance with a court order.

A Complex Needs Payment can only be accessed by application to FACS. The application must include supporting evidence such as relevant independent assessments. Any payment under this package will not necessarily cover the full projected cost of proposed services.

The 'one-off and time limited' nature of this payment reflects the intention that it only be used in extraordinary circumstances. The maximum duration of a Complex Needs Payment will be 6 months. It may be possible to reapply for the payment again for a child or young person subject to meeting the eligibility criteria and approval process.

1. Therapeutic Behaviour Support

Description	<p>A Complex Needs Payment for therapeutic behaviour support will only be considered in extraordinary circumstances where the child or young person requires time-limited intensive therapeutic behaviour support. This would include assessment, development and implementation of a trauma informed behaviour support plan, by a specialist therapeutic service provider.</p> <p>It will only be available in situations where the service provider's internal specialist services cannot manage the child's behaviour and/or needs and there are no appropriate mainstream health and/or disability services available.</p>
Eligibility	<ul style="list-style-type: none">• The child or young person is in foster or kinship care and is exhibiting extreme behaviours that place them at risk of harm to themselves or others.• There is supporting data measuring the child or young person's extreme behaviours, duration and frequency.• There are records and evidence that outline the therapeutic behaviour support strategies already implemented by the service provider as part of the behaviour support plan, and why the strategies have not achieved the desired outcomes.• There is supporting clinical evidence from a qualified medical or allied health professional that the child or young person is assessed with acute mental health and/or significantly challenging behaviours and requires a specialist services.• The service provider demonstrates the child or young person's extreme behaviour cannot be met, or cannot be met within a reasonable period of time, through mainstream health and/or disability services, including the National Disability Insurance Scheme (NDIS).• All available options have been explored including re-assessment of the CAT/child needs package, Intensive Therapeutic Transitional Care outreach and any other programs implemented by FACS to support statutory OOHC.
Minimum Review period	Progress will be monitored on a monthly basis by the Complex care panel (or District equivalent).

2. Disability care

Description	<p>A complex needs payment for disability care will only be considered in extraordinary circumstances where the child, young person or their carer is unable to access mainstream services and/or specialist disability services through the National Disability Insurance Scheme (NDIS) or the services required cannot be accessed within a reasonable period of time. This category excludes funding of additional rostered staff.</p>
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Eligibility	<ul style="list-style-type: none"> • The child or young person is in foster care or kinship care. • There is supporting clinical evidence from a qualified disability or medical professional that the child or young person requires intellectual and/or physical disability services. • The service provider and/or professional demonstrate how provision of these services will meet the child or young person's needs. • The service provider demonstrates that all other options have been explored including re-assessment of the child's needs package, and that the child is unable to access mainstream and/or specialist disability services through the National Disability Insurance Scheme (NDIS) or the services required cannot be accessed within a reasonable period of time.
Minimum Review period	Progress will be monitored on a monthly basis by the Complex care panel (or District Equivalent).
Additional notes	<p>The NDIS mandate is to provide reasonable and necessary disability supports. The level and type of supports that will be funded through the NDIS will depend on the individual needs of each child or young person and the National Disability Insurance Agency (NDIA) assessment of reasonable and necessary support.</p> <p>The NDIA may consider the following supports as 'reasonable and necessary' supports for children and young people in care:</p> <ul style="list-style-type: none"> • Supports for children and young people required as a direct result of a child or young person's disability. This includes supports that enable families and carers to sustainably maintain their caring role, such as community participation, therapeutic and behavioural supports, aids and equipment and supports to help build capacity to navigate mainstream services. • Supports required due to the impact of a child or young person's impairment on functional capacity where they are in OOHC and have support needs that are above those of children of similar ages. The diversity of OOHC arrangements is recognised and the level of reasonable and necessary supports will reflect the circumstances of the individual child or young person. <p>The NDIA sets the access requirements (eligibility criteria) for the NDIS. To help people understand if they are eligible for assistance under the Scheme, the national NDIS website contains a tool, called the NDIS Access Checklist.</p> <p>For further information about access requirements, see Access requirements</p> <p>FACS has developed resources and guidelines for funded service providers and FACS Casework staff outlining the NDIS access, planning and review process; roles and responsibilities and where to go for further information. See www.facs.nsw.gov.au/ndis.</p>

3. Additional rostered staff

Description	<p>A Complex Needs Payment for additional rostered staff will only be considered in very limited circumstances where the child or young person has significant and complex needs that:</p> <ul style="list-style-type: none">• place them at risk of harm to themselves or others in the household• are unable to be met without additional short-term rostered staff to de-escalate or stabilise the care arrangements.
Eligibility	<ul style="list-style-type: none">• The child or young person is in Intensive Therapeutic Care (ITC). The service provider demonstrates that funding for additional staff under the relevant Intensive Therapeutic Care Baseline Package is insufficient to meet the child or young person's significant and complex needs.• The service provider demonstrates how additional short-term rostered staff will de-escalate and stabilise the care arrangements• A plan is developed that includes a time-limited period in which the service provider will step-down the need for additional rostered staff.
Minimum Review period	<p>As the use of additional rostered staff is time limited, the application of this support will be reviewed every four weeks by the FACS District Complex Care Review Panel (or equivalent) and Central Access Unit.</p>
Additional notes	<p>FACS only supports children and young people in long term individual (1:1) residential care settings (care arrangements of only one child or young person and multiple staff), or reliance on additional rostered staff, where it is essential for safety reasons.</p>

Additional comments

Discretionary extraordinary placement support

In truly extraordinary circumstances, the Deputy Secretary Northern Cluster, may use their discretion to provide a Complex Needs Payment for a critical service or support.

Service providers are required to make a submission to the Deputy Secretary explaining what circumstances have led to the need for a Complex Needs Payment. Through supporting evidence, the service provider must demonstrate that additional services and/or supports are essential to a child or young person's health, safety or wellbeing; or compliance with a court order.

The submission must outline what services and supports have already been implemented and their impact as well as demonstrate that funding through the PSP packages has been exhausted and that mainstream services, including the NDIS, cannot be accessed.