



## Complex Needs Payment: Frequently Asked Questions

### **Will the Complex Needs Payment be restricted to children and young people with a high CAT score?**

No. Service providers can apply for a complex needs payment for any child or young person who satisfies the eligibility criteria. For children and young people with a low or medium CAT score, the CAT should be reapplied prior to applying for a complex needs payment as they may be eligible for a higher level of funding under the Child Needs Package.

### **In the case of 'Disability care', how is 'reasonable period of time' defined?**

What constitutes a reasonable period of time will need to be considered on a case by case basis based on the children or young person's needs, their age and the presenting issue. The overarching principle is that a child's health, safety and wellbeing are not compromised by a lack of timely access to critical services and supports.

### **If a child or young person changes service provider, will the payment follow the child?**

If a child or young person changes service provider, the new service provider will be able to continue to access the complex needs payment for the agreed service or support. Payment will be paid upon receipt of an invoice, after the service has been received. Invoices should be received from the service provider within 30 days of commencement of the service and monthly thereafter.

### **What does one-off or time limited mean?**

The 'one-off and time limited' nature of this payment reflects the intention that it only be used in extraordinary circumstances. If, while a child or young person is in care, multiple issues arise that fit within the eligibility criteria, it is possible to apply for the payment more than once. The maximum period for a Complex Needs Payment is 6 months.

### **Will FACS approval be required prior to engaging services?**

An application for a complex needs payment must be approved by FACS prior to the engagement of service or expenditure of funds. Payments will not be made retrospectively.

### **Will there be a right of appeal if an application is declined?**

No, applications will be declined if the service required is covered by the PSP packages. If an application is declined because of a lack of supporting information, providers will be advised of the opportunity to submit more information to support the claim.

## What happens if an alternative care arrangement (hotel/motel/serviced apartment) is required for a child or young person in OOHC?

FACS is committed to significantly reducing, and ultimately eliminating, the number of children and young people placed in alternative care arrangements (that is hotels, motels or serviced apartments).

Under the Permanency Support Program (PSP), there is an expectation that service providers have emergency carers available to prevent the use of alternative care arrangements. Service providers receive a Placement Capacity Payment to compensate them for the cost of resources needed to have a placement immediately available.

Before a child or young person is placed in an alternative care arrangement, service providers must demonstrate to FACS that every effort has been made to support and maintain the child or young person in their current placement. Where this is not possible, service providers must exhaust all other placement options, including working with FACS to explore availability with other service providers, before an alternative care arrangement is considered.

If an alternative care arrangement is the only option available, service providers must obtain approval through their local Child & Family District Unit (CFDU) prior to placing the child or young person. CFDUs must notify the Deputy Secretary Northern Cluster's team by close of business the next day. CFDU should also be consulted by funded service providers before determining where the child or young person is placed to ensure the premises is appropriate for children and the Housing NSW 'Women and Children Temporary Accommodation list' has been checked.

If the placement extends to 5 or more days, the service provider must complete the *Request for approval for an alternative care arrangement: for funded service providers* form. Approval will only be given for a maximum 8 weeks. If placement extends beyond this, the service provider will need to complete and submit another form. If the projected annual cost is over \$500,000, Secretary approval is also required.

FACS will pay the **difference** between the agreed cost of maintaining a child or young person in an alternative care arrangement and funding the service provider receives under the PSP baseline package. That is, for each day a child or young person is in an alternative care arrangement, FACS will pay the agreed cost of maintaining them in the arrangement **minus** the relevant daily rate paid to service providers quarterly, in advance, as part of PSP (as outlined in Schedule 3 (Table 6) of the [Program Level Agreement](#)).

Alternative care arrangements **will not be funded via a complex needs payment** but through a separate process for emergency accommodation.

If an alternative care arrangement is required, service providers are required to notify the Office of the Children's Guardian.

**Where the child or young person is in an alternative care arrangement for a period of greater than one month, progress will be monitored by FACS either via the District Complex Case Panel or other agreed district oversight process.**

## Where should complex needs payment applications be sent?

Applications for a Complex Needs Payment, along with supporting documentation, should be sent to your Child and Family District Unit (CFDU) or to the Central Access Unit (CAU) for ITC Providers.