Guardianship Financial Plan

Name of child:

ChildStory number:

Date:

*N.B. The provision of financial support for guardians, including both allowances and guardianship support payments, is subject to legislative and policy changes. If legislative or policy changes are made that impact on this financial plan, DCJ will notify the guardian in writing.*

| **Expenditure Type** | **Item and rationale** | **Cost** | **Duration of support to be provided (e.g. duration of order or time limited)** |
| --- | --- | --- | --- |
| **Guardianship Allowance Rate**  The guardianship allowance will be paid at the DCJ standard care allowance rate.  Higher guardianship allowance +1 or +2 rates are available where a Special Needs Assessment recommends +1 or +2. | Standard guardianship allowance rate |  | Payment for the duration of the order |
| **Cultural and life story work (includes support for family time)** | | | |
| For cultural activities that assist in maintaining the identity and culture of a child or young person.  For the purchase of items to support life story work.  For assistance with travel and accommodation costs to attend family time (contact). |  |  | Payment available as required or for the duration of the order |
| **Medical, Dental and Optical** | | | |
| A guardian is required to meet expenditure for general medical costs and pharmaceutical costs via the guardianship allowance.  Where approved in the case plan DCJ may pay for special dental, medical & optical aids. | 1.Medical  2. Dental  3. Optical |  | Payment available as required or for the duration of the order |
| **Professional Therapy**  (e.g. occupational therapy, speech and language, psychology/counselling, physiotherapy) | | | |
| Enquiries should be made with Medicare for any available rebates.  A mental health plan should be obtained from the child or young person’s GP. The gap between the Medicare rebate and the cost of service may be funded by DCJ.  Attempts should be made to access community health services in the first instance. |  |  | Payment available as required or for the duration of the order |
| **Education** | | | |
| From the allowance the guardian will meet the costs of school uniforms, sports uniforms, writing materials, excursions and school camps, fees, text book hire.Where DCJ has approved enrolment and/or payment of school fees for a child to attend a non-government school, include the cost of the fees here.NB: A copy of Executive District Director approval must be attached to this plan. |  |  | Payment available as required or for the duration of the order |
| **Child Care** | | | |
| Child must attend an approved Child Care Service (specify how many days per week).  All guardians should apply to Centrelink for the Commonwealth Child Care Subsidy (CCS). The Child Care Subsidy is paid directly to the child care service provider.  The gap between the CCS rebate and the cost of service may be funded by DCJ. |  |  |  |
| **Total** |  | **$ XXXX** |  |

DCJ Approvals

|  |  |
| --- | --- |
| **Caseworker**  Name:  Date: | Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Manager Casework**  Name:  Date: | Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Manager Client Services**  Name:  Date: | Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |
| **Director Community Services**  Name:  Date: | Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Executive District Director**  Name:  Date: | Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |