# Additional Carer Support

# Specialist Package

## Annual review and renewal form

## Guidance notes

Permanency Support Program (PSP) Providers complete this form to request the Additional Carer Support (ACS) Specialist Package be renewed for another year.

In completing this form, the PSP Provider confirms that all existing evidence for continued eligibility is held by the PSP Provider and will be available on request. Where there is additional criteria met, or there is new and/or updated evidence for existing eligibility, this must be supplied with this renewal form, for example an updated NDIS plan.

Submit this form via a [ChildStory Partner Portal Person Service Request](https://childstory.lightning.force.com/lightning/articles/Knowledge/Partner-Create-a-Person-Service-Request). Requests should be submitted 4 weeks before the end date of the package.

**This form should only be used if the ACS package was previously approved via an application form for this child or young person.** If no previous application has been made, use the[ACS application form](https://dcj.nsw.gov.au/content/dam/dcj/dcj-website/documents/service-providers/out-of-home-care-and-permanency-support-program/oohc-resources/-permanency-case-management-policy/Additional-Carer-Support-Package-Application-Form.doc).

Where the original approval was given as a flexible time limited support (as the full criteria was not met) to maintain or step down a placement from a high cost emergency arrangement (HCEA) to a foster care placement, the renewal form cannot be used. A full application form is required if the additional support is needed.

If the full eligibility criteria are no longer met (four or more of the below criteria), the ACS package cannot be renewed and this form is not required.

Refer to the ACS eligibility rules within the [PSP Packages Eligibility Rules and Inclusions](https://dcj.nsw.gov.au/content/dam/dcj/dcj-website/documents/service-providers/out-of-home-care-and-permanency-support-program/contracts-funding-and-packages/PSP_Packages_Eligibility_and_Inclusions_FC_ITC.pdf).

Renewal requests are approved by the relevant DCJ Director.

### **1. Child Details**

**Name:** Click or tap here to enter text.

**Date of birth (Please use format day/month/year. DD/MM/YYYY):** Click or tap here to enter text.

**ChildStory ID number:** Click or tap here to enter text.

**Case plan goal package:** Choose an item.

**Baseline package:** Choose an item.

**Child needs package:** Choose an item.

**Number of other children in OOHC in the placement:** Click or tap here to enter text.

### **2. Eligibility Criteria**

**Four or more of the following criteria must apply. Check all that apply.**

**For any new criteria enter in detail/description of the evidence supplied with this renewal form.**

Select shift+enter to create a new paragraph if required.

[ ]  The carer is likely to require at least 12 nights (or equivalent) respite per annum in addition to the 24 nights provided by the standard PSP packages.

 Click or tap here to enter text.

[ ]  The carer is or will participate in developing and enacting the child’s behaviour support plan and participates in its monitoring and review by a psychologist (or similar discipline).

Click or tap here to enter text.

[ ]  The carer has or is developing additional advanced skills in relation to trauma-informed care and/or other relevant, accredited, specialist training.

Click or tap here to enter text.

[ ]  The carer is or will be required to provide the child with **additional assistance** in bathing and showering, toileting, dressing/undressing, and participates in the monitoring and review by an occupational therapist (or similar discipline).

Click or tap here to enter text.

[ ]  The carer is or will be required to provide the child with **additional assistance** in play, peer relationships, achieving developmental milestones and learning, and participates in the monitoring and review by an occupational therapist (or similar discipline).

 Click or tap here to enter text.

[ ]  The carer is or will be required to provide a **special diet** to the child (as recommended by a relevant professional) **and/or assistance with feeding**, and participates in the monitoring and review by a dietician (or similar discipline).

 Click or tap here to enter text.

[ ]  The carer is or will be required to participate, with the child’s teachers and school staff, in the monitoring and review of a student behaviour support plan.

 Click or tap here to enter text.

**The following must apply**

[ ]  The placement requires additional caseworker availability/responsiveness to the carer and/or child per week to provide, for example, support, mentoring, coaching, capacity to attend clinical appointments.

Click or tap here to enter text.

### **3. Summary of ACS use**

This section must be completed.

1. **Outline what the ACS package funding was used for within the current approval period:** Click or tap here to enter text.
2. **Outline the intended use and continued need for the ACS funding in the new year:** Click or tap here to enter text.

## PSP Provider Details and Declaration

In typing your name and date you are indicating that your endorsement of this application.

**PSP Provider name**: Click or tap here to enter text.

**Your details** (name and role): Click or tap here to enter text.

**Contact information**: Click or tap here to enter text.

[ ]  I verify that the information provided is correct and the information of eligibility is held within our records and will be available on request or have been provided with this application where additional/new eligibility is met.

**Date**: Click or tap to enter a date.

## DCJ Approval

To be completed by DCJ

**CFDU Manager Client Services name**: Click or tap here to enter text.

[ ]  Supported

[ ]  Not supported

**Date**: Click or tap to enter a date.

**Lead Contract Manager name**: Click or tap here to enter text.

[ ]  Supported

[ ]  Not supported

**Date**: Click or tap to enter a date.

**Director Community Services or Operations or Commissioning and Planning name**: Click or tap here to enter text.

[ ]  Approved

[ ]  Not Approved

**Date**: Click or tap to enter a date.

If approved, the package needs to be entered manually onto ChildStory by the relevant CFDU/CSC with secondary case management responsibility.