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| Application for consent to delegate or subcontract independent assessor services ndependent Assessor Panel Deed |
|  For Independent Assessors Panel Deed  |
| Application Form | Click or tap to enter a date. |
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| **Summary**This form is used by existing Independent Assessor service providers (IA panel members) who have signed the Independent Assessor Panel Deed (**IA Panel Deed**) to apply for consent to delegate or to subcontract to a third party. You must obtain DCJ’s written consent to delegate or subcontract your independent assessor services to a third party. Please refer to your IA Deed, clauses 3.7 (delegation) and 19.8 (subcontracting) and the FAQ for the 2024 Independent Assessors Deed (**FAQ**).DCJ requires that all persons who are performing independent assessor services on its behalf are suitably qualified and have a valid Working with Children Check.**Delegation (or, subcontracting of an individual Request for Services)**"Delegation” refers to a limited form of subcontracting where you arrange for a particular Request for Services to be performed by a third party. This requires subcontracting approval from DCJ.[Before proceeding note that you are not obliged to accept any Request for Services. If you advise that you are not available, you are not obliged to arrange a substitute delegate. DCJ can reallocate the Request for Services to another IA panel member. This may be simpler than filling out an application form for a one-off request to delegate.]**Subcontracting** “Subcontracting” refers to subcontracting of part or all of your services under the IA Panel Deed to be performed by a third party to undertake specific assessment work (for example, subcontracting your obligation to perform services on an ongoing basis for a fixed term to a third party).[Before proceeding note that if you are proposing to change your corporate structure or provide your services via a different service organisation, please advise DCJ - as this is a different process.]**You remain liable as head contractor for your personnel including delegates and subcontractors**If DCJ consents to a request to delegate or subcontract your services, you still remain liable under your IA Panel for these services. You are liable for all payments and other obligations due to the delegate or subcontractor and for ensuring they comply with the terms of the IA Panel Deed. You should seek your own legal advice on how to set up your arrangements with the delegate or subcontractor so that you comply with the IA Deed and your legal obligations.DCJ may impose any conditions on the consent if given, as it sees fit. For risk assessment purposes DCJ may require you to provide copies of documents or other proof of suitability of the third party to perform the services, prior to determining whether to grant consent.Any consent granted does not extend beyond any agreed term and is subject to revocation by notice in writing including if DCJ determines that a panel refresh is to be conducted. |

Instructions

Read and follow all instructions (blue text) in this form.

The form is in three parts. You must complete all parts as indicated.

When you have completed the form and signed the declaration, send the application by email to the IA Project team at IndependentAssessorsProject@dcj.nsw.gov.au You may delete the front page summary and these instructions before submitting the form.

We strongly recommend you obtain independent legal advice in relation to this form.

# Part 1. Application details

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| Date of application | Click here to enter a date. |
| Service provider name | <your organisation’s name> |
| ABN | <your ABN> |
| Service provider’s representativeThe contact person for this application | Name: Position: Phone number: Email address:  |
| Name of the existing Panel Deed member you are seeking to subcontract under | <panel members name as it appears on the panel deed> |
| Name of your assigned DCJ contract manager | Manager, Statewide Contracts |
| Name of third party (proposed delegate or subcontractor)ABN  | <full name as it appears on ABN lookup>ABN as it appears on ABN look up  |
| Is the delegate or subcontractor an  |

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| [ ]  Aboriginal Service Provider[ ]  CALD Service Provider[ ]  Neither |

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| Do the proposed delegation or subcontracting arrangements give rise to any conflicts of interest?Please refer to your IA Deed, clause 12 and to the FAQ for the IA panel. | [ ] No[ ] Yes: please provide details |
| Are you proposing to delegate a Request for Services (or up to 5 Requests for Service during the Term), or Are you proposing to subcontract part or all of the services to the third party for some or all of the Term of your IA Deed? | [ ]Go to Delegation section in Part 2[ ]Go to Subcontracting section in Part 2 |

# Part 2 – Details of delegation or subcontracting

1. **Delegation of a specific request for services**

Please complete if your request is to delegate a specific Request for Services (up to 5 Requests for Service may be included)

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| Which Request for Services are you seeking to delegate and why?(You may specify up to 5 Requests for Service that you currently have or describe the types of future Requests, up to 5, you would be seeking to delegate to the third party). |  |
| Is the proposed delegate an existing IA Panel member (check on the IA Panel public register available [here](https://dcj.nsw.gov.au/service-providers/oohc-and-permanency-support-services/permanency-pathways/panel-of-independent-assessors.html)) | [ ] Yes – go to declaration Part 3 [ ] No – please answer the questions under the heading “Off panel risk assessment where third party is not an IA panel member” |

# B. General subcontracting

Please complete if your request is to subcontract part or all of the services for part of the Term of your IA Panel Deed

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| Describe the services you are seeking to subcontract and why |  |
| For how long do you propose to subcontract these services? | [ ] limited period as follows: |
| Is the proposed subcontractor an existing IA Panel member (check on the [Independent Assessor Panel Register](https://dcj.nsw.gov.au/content/dam/dcj/dcj-website/documents/service-providers/out-of-home-care-and-permanency-support-program/key-contacts/IA-service-geography-coverage.xlsx))  | [ ] Yes – go to declaration Part 3 – [internal note: DCJ Director Statewide Contracts to review][ ] No – please answer the questions under the heading “Off panel risk assessment where third party is not an IA panel member” |

# Off panel risk assessment where third party is not a current IA panel member

Complete this section if the third party who will perform the services is not an IA panel member.

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| Have you made enquiries as to whether an IA panel member is available | [ ] Please provide details |
| WWCC number and expiry date of the third party who will be performing the services |  |
| Does the third party have the relevant qualifications including a current Working with Children Check and National Police Certificate for the purpose of delivering child-related services, and are trained and experienced to deliver the service provision as required under your IA Deed? Attach evidence of the WWCC as part of this application.  | [ ] yes I have sighted the WWCC and National Police Certificate for the third party.[ ] yes I have attached the WWCC  |
| Have you sighted and taken a copy of the third party’s current insurance policies as required under the IA Panel Deed OR will your own insurance policies cover the third party? | [ ] have sighted insurances and taken a copy OR[ ] my own insurances will cover the third party |
| Have you sighted and taken a copy of the third party’s relevant accreditation, certification, registration or licence, as applicable for this service? | [ ] |
| Have you confirmed that the third party is not banned from providing the services (i.e. current employee of DCJ or a Permanency Support Services funded service provider – refer to clause 8.6 IA Panel Deed and to FAQ). | [ ] |

# Part 3. Service provider declaration

1. As authorised signatories\* of <your organisation’s name>, we confirm that:
	1. our governing body is aware of the additional responsibilities and obligations of subcontracting;
	2. our governing body is aware of, and approved the information in this form being submitted to DCJ;
	3. DCJ has strongly recommended we obtain independent legal advice in relation to this form; and
	4. we warrant that all information provided by us in this form is true and correct.

\* Must be an authorised signatory of the organisation, or their delegate.

#### Signature block for organisations with multiple authorised signatories

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| *Name* |  | *Name* |
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| *Position* |  | *Position* |
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| *Signature* |  | *Signature* |
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| *Date* |  | *Date* |