

# Child Care Subsidy (CCS) - Nominated Supervisor

## NQS 7.1.2

Name of the person conducting the checklist: \_\_\_\_\_ Date: \_\_\_\_\_

**Written Records (Include records that are made and stored electronically, as long as they are stored safely and any changes are also recorded.) Keep records for 7 years.**

|   |                           |                          |                          |
|---|---------------------------|--------------------------|--------------------------|
| Complaints made about compliance with the Family Assistance Law   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| Any notice made to a state/territory agency about a child at risk of abuse or neglect   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| Attendance record for each child at service (whether eligible for CCS and/or Additional CCS or not) including records of any absences | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| Evidence that any absences in excess of the 42 days allowed meet the required criteria  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| Copies of invoices and receipts for the payment of child care fees  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| Copies of all Statements of Entitlement issued and any Statements advising a change of entitlement                                    | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |

**Complying Written Arrangements (CWAs) for each child (unless fees are not paid under this type of arrangement) which include:**

|   |                           |                          |                          |
|---|---------------------------|--------------------------|--------------------------|
| <ul style="list-style-type: none"> <li>names and contact details of provider and person responsible for paying fees</li> </ul>  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| <ul style="list-style-type: none"> <li>date arrangement starts</li> </ul>   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| <ul style="list-style-type: none"> <li>name and date of birth of child (or children)</li> </ul>   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| <ul style="list-style-type: none"> <li>if care will be provided on a routine basis, and if so, details about the days on which sessions of care will usually be provided, and the usual start and end times for these sessions of care</li> </ul> | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| <ul style="list-style-type: none"> <li>whether care may be provided on a casual or flexible basis (in addition to, or instead of, a routine basis)</li> </ul>   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| <ul style="list-style-type: none"> <li>details of fees to be charged eg via fee schedule or information available on website that the parties understand may vary from time to time</li> </ul>  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| If parents are separated and both parents (or their new partners) are paying part of the fees there are 2 CWAs  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |

**All evidence to support required background checks for specified personnel**

***Persons with management or control of a provider***

|  |                           |                          |                          |
|--|---------------------------|--------------------------|--------------------------|
| Working with Children Check if person required to have one (Card no. and expiry)   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| Certified copy of Police Criminal History Check from relevant State dated no more than six months before the application for approval  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| An extract from the National Personal Insolvency Index Bankruptcy Search service provided by the Australian Financial Security Authority dated no more than three months before the application                      | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| A current and historical personal name extract search of the Australian Securities and Investments Commission records dated no more than three months before the application (including a nil result)                | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| Evidence (computer printout) the person does not appear on the banned and disqualified register held by the Australian Securities and Investments Commission dated no more than three months before the application. | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |

**Persons responsible for the day to day operation of the service**

|   |                           |                          |                          |
|---|---------------------------|--------------------------|--------------------------|
| Working with Children Check if person required to have one (Card no. and expiry)  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| Certified copy of Police Criminal History Check from relevant State dated no more than six months before the application for approval | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |

**Service Contact**

|  |                           |                          |                          |
|--|---------------------------|--------------------------|--------------------------|
| Working with Children Check if person required to have one (Card no. and expiry) | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
|--|---------------------------|--------------------------|--------------------------|



| <b>Notifications</b>  |                           |                          |                          |
|---|---------------------------|--------------------------|--------------------------|
| Dept of Education and Training (DET) notified of total hourly fee charged (before any fee reductions, discounts or rebates), and changes to hourly fees within 14 days of start of service, notice of service approval or any change.   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| DET notified of days service operates and opening and closing hours notified within 14 days of start of service, notice of service approval or any change   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| DET notified of number of anticipated on-going full day vacancies (or full session vacancies for OSHC) available for each day of the following week from the Monday notified by 8 pm each Friday.   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| DET notified of anticipated service closure at least 42 days before service stops operating, or if this is not possible within 24 hours of closure.   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| DET notified of change of provider's or service physical or postal address no later than 30 days before change, or if this is not possible as soon as practicable.  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| DET notified of change of provider's or service name, including evidence of service name change, within 14 days of change.  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| DET notified of change of provider or service email address, website, phone or fax number within 14 days of change.   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| DET notified about any new person with management or control of a provider or who becomes responsible for the day to day operation of the service within 7 days. Information includes, name and contact details and a declaration provider has undertaken all required background checks, together with details of person's working with children card if applicable. | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| DET notified of change of name or contact details for any person with management or control of the provider or any person responsible for the day-to-day operation of any of the service within 7 days  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| DET notified within 7 days if background checks reveal person has a serious conviction (ie for violence, sexual offence, fraud, offence with maximum 2 year sentence), is undischarged bankrupt or was the director/secretary of a company when it went into administration etc or for the preceding 12 months  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| DET notified within 7 days of an event/circumstance affecting a person with management or control or a person responsible for the day-to-day operation of the service that indicates the person is not likely to be a fit and proper person to administer CCS or Additional CCS.  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| DET notified within 7 days after a person with management or control or a person responsible for the day-to-day operation of the service stops holding these roles, including when role ceased and why.   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| DET notified within 7 days after an educator obtains a child care qualification from an RTO where the provider or person with management or control has an interest in the RTO and it appears the qualification was not obtained on merit or there is a conflict of interest.   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| DET notified within 7 days where a person with management or control obtains an interest in a business (or is likely to) which may affect their ability to comply with the Family Assistance Law or create a conflict of interest.  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| DET notified within 24 hours of a change in the status of a Working with Children Card eg amended, suspended, revoked.  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| DET notified within 24 hours of the provider entering into administration, receivership, liquidation or bankruptcy.   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| DET notified within 24 hours of the closure of any service due to unforeseen circumstances.   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| DET notified within 24 hours after the provider becomes aware a person with management or control or a person who becomes responsible for the day-to-day operation of the service has a serious conviction.   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| <b>Actions</b>  |                           |                          |                          |
| Where possible parents/carers are encouraged to lodge CCS claim before enrolling child as this can stay active for 1 year before any sessions of care reported, but actual claims can only be backdated up to 28 days   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| An Enrolment Notice is submitted through PEP or third-party software showing child is enrolled and type of arrangement service has with person paying fees  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| Separate enrolment notice provided for each child at service  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |



|   |                           |                          |                          |
|---|---------------------------|--------------------------|--------------------------|
| Attendance/session reports submitted through PEP or third-party software for all enrolled children  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| Where sessions of care exceed 12 hours they are submitted as 2 or more sessions.  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| Attendances submitted under the enrolment of the parent who has an arrangement with the service to pay the fees for the sessions of care  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| A session report is submitted for each week a session of care has been provided to a child (including absences)   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| Session reports submitted within 14 days after the end of the week care was provided  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| <b>Session reports contain</b>  |                           |                          |                          |
| • Start and end dates of the week   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| • Session details eg date, sessions start and end times, and from 14.1.19 attendance start and end times  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| • Absences if relevant and reasons for absence if child's had more than 42 days absent in a financial year  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| • Actual fee charged to parent ie fee parent liable to pay after any other subsidies/discounts/part payment by another parent   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| • Details of other subsidies paid to provider to reduce fees if relevant  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| • Whether session part of an early education program  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| If a mistake is made in a session report which has been submitted, report is varied or withdrawn within 28 days after the start of the week the report relates to, or end of financial year if this occurs sooner. (It's much harder to do this after the 28 days). | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| If service closed for any reason except a public holiday or a local emergency, children are not reported as absent from care.   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| An initial enrolment notice must be submitted within seven days from:   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| • the end of the week the provider and family entered into an arrangement or  |                           |                          |                          |
| • the provider or service being approved (if after the start of the arrangement or attendance) or   |                           |                          |                          |
| • the end of a suspension of service (if the enrolment occurs during a period of suspension).   |                           |                          |                          |
| A new Complying Written Arrangement is prepared and enrolment notice submitted where care will continue after a break of 8 or more weeks  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| If parents separate while care is being provided for their child under a single arrangement, a new enrolment notice is submitted for the parent who was not previously the CCS claimant if he or she is now paying some of the fees.                                | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| Updates to arrangements are recorded in writing (hardcopy or electronic) when changes are made  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| Enrolments are updated within 7 days of the change/event requiring the update   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| If relevant provider certifies a child is at risk of serious abuse and neglect so Additional CCS (child wellbeing) available to help children and their families through increased subsidy for six weeks  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| If relevant the provider applies for the Additional CCS (child wellbeing) to continue after 6 weeks   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| Statements of Entitlement are provided to parents of children eligible for CSS or Additional CSS once every fortnight.  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| Statements of Entitlement are only issued for care already received.  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| <b>Statements of Entitlement contain:</b>   |                           |                          |                          |
| • name of individual Statement issued to  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| • name of child sessions of care provided to  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| • unique identifier assigned to child's enrolment by service  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| • date of issue and start and end dates of Statement period   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| • name of provider  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| • any service business name registered with the Australian Securities and Investments Commission  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| • Provider's ABN (if any) and any service ABN (if different)  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| • unique identifier of service and the provider   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |



|   |                           |                          |                          |
|---|---------------------------|--------------------------|--------------------------|
| <ul style="list-style-type: none"> <li>daily and weekly totals of number of hours of care provided during Statement period, including start and end times for each session of care, and from 14 January 2019, the start and end times of child’s attendance</li> </ul>  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| <ul style="list-style-type: none"> <li>For the Statement period and cumulatively for the financial year until the date of issue– the sum of: <ul style="list-style-type: none"> <li>the number of days on which the service is taken to have provided a session of care to the child while the child was absent (up to 42 days in the financial year)</li> <li>the number of days on which the service is taken to have provided a session of care to the child, beyond 42 cumulative days in the financial year and the particular circumstances that apply</li> </ul> </li> </ul> | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| <ul style="list-style-type: none"> <li>hourly fees for each session of care in the Statement period</li> </ul>  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| <ul style="list-style-type: none"> <li>daily and weekly totals of the amount of all fees charged during the statement period, including details about any discounting or refund applied in order to pass on fee reductions</li> </ul>   | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| <ul style="list-style-type: none"> <li>For the statement period: <ul style="list-style-type: none"> <li>the number of hours for which fees were reduced</li> <li>the total of fee reduction amounts</li> <li>a breakdown of the amounts of fee reduction for each session of care and whether it related to a payment of CCS or Additional CCS.</li> </ul> </li> </ul>  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| CCS is passed on to families (eg through fees reductions) within 14 days of receipt.  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |
| Any CCS not passed onto families within 14 days is returned.  | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> NA |

**Actions required**