

YHARS After Care Brokerage Application Form

Youth Housing and Reintegration Service (YHARS) After Care brokerage is available for young people aged 17-21 years old who are homeless or at risk of homelessness and are leaving or have recently left the care of Child Safety. YHARS will undertake an assessment process to ensure that the young person meets the eligibility criteria. YHARS will make a decision about whether to accept the young person's application and provide confirmation to the referring agency within two business days. Please complete and send the YHARS After Care Application Form along with all supporting documentation to yhars@wmq.org.au

Who can submit an application to the YHARS Program?

In accordance with the Guidelines for Service Delivery, a young person can be referred by the following services:

- Child Safety Officers
- Youth Justice Services
- Youth Detention Centres
- Government and Non-Government Organisations
- Applications may also be accepted for young people who are cared for under the Unaccompanied Humanitarian Minor (UHM) Program.

With the consent of the young person, the following information will be required to process the Application. Note: All boxes must apply

- The young person is aged 17-21 years.
- The young person is transitioning or have transitioned to independence out of the care of Child Safety OR has been subject to a past or present Child Protection Order OR is cared for under the Unaccompanied Humanitarian Minor Program.
- The young person is homeless or at risk of homelessness (*see definition below)
- All other options have been explored before an application is made to the YHARS After Care Program.
- A rationale for the goods or services requested is included below to support the application, including the outcome to be achieved through the use of the After Care Service brokerage.
- The young person has provided written or verbal consent for the After Care Application to occur.
- An itemized quote or invoice for the goods or services has been attached to the application.
- A Case Plan showing why this brokerage is required, including how it will assist to achieve the goals of the case plan has been attached to this application.
- Expenditure demonstrates value for money and is the best use of resources to meet case goals.
- To your knowledge, your client has not received a similar service from another agency.
- This purchase would withstand public scrutiny.

YHARS Guidelines can be found at:

<https://www.csyw.qld.gov.au/resources/dcsyw/youth/youth-housing-reintegration/youth-housing-reintegration-service-guidelines.pdf>

*Definitions

Homeless: A person is considered to be homeless if their current living arrangement:

- Is in a dwelling that is inadequate; or
- Has no tenure, or if their initial tenure is short and not extendable; or
- Does not allow them to have control of, and access to space for social relations

Reference: Australian Bureau of Statistics (ABS)

At Risk of Homelessness: A person is at risk of homelessness if they are at risk of losing their accommodation due to risk factors such as;

- Transitions from custodial and care arrangements, including out-of-home care, independent living arrangements for children aged under 18, health and mental health facilities/programs, juvenile/youth justice and correctional facilities.
- Mental health issues and other health problems.
- Domestic/family violence.

Date of Application

Referring Organisation Details

Name of person completing application

Organisation

Address

Phone	Mobile
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Email

Accommodation (Please mark all that apply)
YHARS After Care is funded specifically to address homelessness and housing vulnerabilities under the National Housing and Homelessness Agreement (NHHA) and therefore some applications may be declined if adequate evidence of high housing risk is not provided.

Has the young person been homeless in the last month?	Yes	Note
Sleeping rough or in non-conventional accommodation		
Short-term or emergency accommodation due to lack of other options		
Medium/long- term boarding house accommodation		
In Detention/ Custody		

Has the young person been homeless in the last year?	Yes	Note
Sleeping rough or in non-conventional accommodation		
Short- term or emergency accommodation due to lack of other options		
Medium/long- term boarding house accommodation		
In detention/ Custody		

Is the young person at imminent risk of homelessness?	Yes	Note
At imminent Risk of homelessness		
In temporary custodial and care arrangements (i.e. Resi care, foster care, detention, SILS.)		

Please provide a rationale to support the Young Person's Application for Brokerage

Brokerage Application

Total YHARS After Care support amount being sought in this application \$ _____

The young person may have access to \$3,850 including GST (\$3,500 plus GST) if found eligible.

Please tick good and/or services being sought in this application

- | | |
|--|---|
| <input type="checkbox"/> Utility bills or rent arrears | <input type="checkbox"/> Travel costs for client to access specialised support or affordable housing |
| <input type="checkbox"/> Bond and/or rent guarantee | <input type="checkbox"/> Removalist costs |
| <input type="checkbox"/> Material aid (food, white goods, cutlery, crockery, furnishing or medication and hygiene consumables) | <input type="checkbox"/> Essential documents (birth certificate) |
| <input type="checkbox"/> Driving lessons (up to 100 hours equivalent) | <input type="checkbox"/> Specialist service (psychological, psychiatric or other mental health services, family medication, therapy or counseling, medical and dental services) |
| <input type="checkbox"/> Employment related costs (licenses e.g. forklift ticket) | <input type="checkbox"/> Vehicle contribution |
| <input type="checkbox"/> Enrollment or course fees at an educational or training institute | <input type="checkbox"/> Other: Please specify |
| <input type="checkbox"/> Occasional child care payment | |

Client Details

Given name

Middle name

Surname

Gender

Male

Female

Other

Date of Birth

Age

Year estimated

Country Of Birth

First language spoken at home

Phone Number

Address

Cultural Affiliation

Aboriginal

Torres Strait Islander

Australian South Sea Islander

Pacific Islander background

Refugee or newly arrived immigrant

None of the above

Speaks English

Very well Well

Not well Not at all

Type of housing: (i.e. transitional housing, private, community housing, emergency)

Tenure type

Owner

Renter

Rent Free

No tenure (i.e. living with foster/ resi care)

Living with (i.e. lone person, children, parents, foster family, unrelated persons)

Financial Information

Is the Young Person currently receiving Centrelink benefits?

Yes No

Type of payment (i.e. youth allowance, newstart allowance)

Employment Information

Is the Young Person currently employed?

Yes No

Type of employment

Full time Part time Casual

Is the Young person looking for work?

Yes No

Education/Training Information

Is the Young Person currently engaged in Education or Training?

Yes No

Type of Education/Training

School Tafe University
 Apprenticeship Other

Level of attendance at Education/Training facility

Excellent Good Average Poor

Department of Child Safety, Youth & Women - Information

Details of the Department of Child Safety, Youth & Woman your client was last case managed by: NB: If you are the current CSO and you are completing the Application, please tick As Above

Child Safety Service Centre (CSSC)

Details (i.e. type of Child Protection Order and expiry date or exited date)

Does your client give consent for the YHARS team to contact Child Safety or other relevant agencies for eligibility verification?

Yes No

Unaccompanied Humanitarian Minors Program and Immigration Information

Visa Type

Date Visa Granted

UHM Agency Name

UHM Agency Phone

Does your client give consent for the YHARS team to contact Dept of immigration UHM Program verification?

Yes No

Verification of UHM Involvement documents attached?

Appropriate verification documentation that will be accepted is;

- a referral letter from the Department of Home Affairs signed by Director UHM and Guardianship Section. or
 an exit letter from the Department of Home Affairs signed by Director UHM and Guardianship Section.

The following information will allow the YHARS After Care Program to accurately assess process and record the Young Person's application:

Reasons for seeking assistance (Please mark all that apply)		
Interpersonal relationships	Yes	Note
Time out from family/other situation		
Conflict with parents/guardians		
Conflict with other household members		
Relationship/family breakdown		
Sexual abuse		
Domestic and family violence or threats of violence		
Non-family violence or threats of violence		
Child abuse neglect or environments where children are at risk		
Financial	Yes	Note
Problematic gambling		
Housing affordability stress		
Financial stress		
Accommodation	Yes	Note
Housing crises		
Inadequate or inappropriate dwelling		
Previous accommodation ended		
Unable to return home due to environmental reasons		
Employment/Education	Yes	Note
Employment difficulties		
Unemployment		
Disengaging from school/training		
Health	Yes	Note
Mental health issues		
Medical issues		
Problematic drug use or substance use		
Problematic alcohol use		
Other	Yes	Note
Transition from youth detention		
Transition from care		
Itinerant		
Discrimination (including racial discrimination)		
Other		

Payment

Brokerage should be paid directly by the referring agency on behalf of the young person for the goods or services. Direct cash payments to young people are not permitted. An email of confirmation must be provided as soon as the young person receives the goods or services.

The brokerage funds provided to you for the purchase of goods or services is grant funding and not classified as reimbursements. To meet Wesley Mission Queensland obligation to the Australian Tax Office this means that ALL items MUST have GST added to the GST EXCLUSIVE amount of the purchase. Invoices that do not meet this requirement will not be paid.

Once the application has been approved via email the referring agency must invoice Wesley Mission Queensland within 30 days. Please send all invoices to **yhars@wmq.org.au**. Once a VALID TAX INVOICE has been received payment will be made within 30 days.

A Tax Invoice should be addressed to **Wesley Mission Queensland, YHARS, 11a Southampton Road, Ellen Grove, QLD, 4078** and include:

- » The referring agencies ABN
- » Bank account details
- » All approved funds must include GST
- » Contact details (for remittance)
- » Client Name Referenced
- » Reference Number or Invoice Number

For Child Safety Officers working within a CSSC, YHARS can accept a Tax Invoice from the service/supplier of goods for payment on behalf of the young person. This is only where invoicing YHARS directly is not possible Note: please allow additional processing time.

Referring Agency

I declare that the information provided in this form, including all supporting documents, is correct to the best of my knowledge. I acknowledge and accept the requirements relating to invoices for funding received.

Signature

Date