

# 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](mailto: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 leaving or has recently left the care of Child Safety OR is cared for under the Unaccompanied Humanitarian Minor Program.
- The young person is homeless or at risk of homelessness (\*see definition below)
- Attached is a Wesley Mission Queensland consent form
- Attached is a case plan and the application includes a detailed rationale explaining why YHARS After Care brokerage is required and how this will assist the young person in achieving their case plan goals
- Attached is an itemized quote or invoice for the goods or services being requested in this application
- All other options for funds have been explored and YHARS After Care funds are not duplicating existing services, or services provided by other providers
- Expenditure demonstrates value for money and is the best use of resources to meet identified client needs or goals
- The goods or services applied for 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

**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 provide a rationale outlining the need for brokerage that supports the defined goals of the young person's case plan (to be attached). YHARS After Care funds are not intended to replace or duplicate existing services or financial assistance available, please detail what alternate options for financial assistance have been explored with evidence of the outcome.**

### Client Details

<b>Given name</b>		<b>Cultural Affiliation</b>	
<b>Middle name</b>		<input type="checkbox"/> Aboriginal	
<b>Surname</b>		<input type="checkbox"/> Torres Strait Islander	
<b>Gender</b> <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other		<input type="checkbox"/> Australian South Sea Islander	
<b>Date of Birth</b>		<input type="checkbox"/> Pacific Islander background	
<b>Age</b>		<input type="checkbox"/> Refugee or newly arrived immigrant	
<b>Year estimated</b> <input type="checkbox"/>		<input type="checkbox"/> None of the above	
<b>Country Of Birth</b>		<b>First language spoken at home</b>	
<b>Phone Number</b>		<b>Speaks English</b>	
<b>Address</b>		<input type="checkbox"/> Very well <input type="checkbox"/> Well	
		<input type="checkbox"/> Not well <input type="checkbox"/> Not at all	
<b>Type of housing:</b> (i.e. transitional housing, private, community housing, emergency)			
<b>Tenure type</b> <input type="checkbox"/> Owner <input type="checkbox"/> Renter <input type="checkbox"/> Rent Free <input type="checkbox"/> No tenure (i.e. living with foster/ resi care)			
<b>Living with</b> (i.e. lone person, children, parents, foster family, unrelated persons)			

### Financial/Employment & Education Information

<b>Is the Young Person currently receiving Centrelink benefits?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Type of payment</b>
<b>Is the Young person currently employed?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Type of employment</b>
<b>Is the Young Person currently engaged in Education or training?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Type of education?</b>

### 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

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

<b>Reasons for seeking assistance</b> (Please mark all that apply)		
<b>Interpersonal relationships</b>	<b>Yes</b>	<b>Note</b>
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		
<b>Financial</b>	<b>Yes</b>	<b>Note</b>
Problematic gambling		
Housing affordability stress		
Financial stress		
<b>Accommodation</b>	<b>Yes</b>	<b>Note</b>
Housing crises		
Inadequate or inappropriate dwelling		
Previous accommodation ended		
Unable to return home due to environmental reasons		
<b>Employment/Education</b>	<b>Yes</b>	<b>Note</b>
Employment difficulties		
Unemployment		
Disengaging from school/training		
<b>Health</b>	<b>Yes</b>	<b>Note</b>
Mental Health issues		
Medical issues		
Problematic drug use or substance use		
Problematic alcohol use		
<b>Other</b>	<b>Yes</b>	<b>Note</b>
Transition from youth detention		
Transition from care		
Itinerant		
Discrimination (including racial discrimination)		
Other		

## Payment and Acknowledgment of Receipt and Distribution

It is a funding requirement that the referring agency send the YHARS After Care Acknowledgement of Receipt and Distribution (AOR) form to [yhars@wmq.org.au](mailto:yhars@wmq.org.au) as soon as the goods and/or services are received and distributed. This confirms that YHARS After Care brokerage has been used for the purpose it was intended, as per the guidelines and approval. Without this form YHARS is unable to approve any future applications until the outstanding AOR is received.

YHARS After Care Brokerage should be paid directly by the referring agency on behalf of the client for the goods and/or services. Direct cash payments to the client or foster carers are not permitted.

The brokerage funds provided to your agency for the purchase of goods and/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](mailto: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, 11a Southampton Road, Ellen Grove, QLD, 4078 and include:

- The Young Person's name as reference in the description
- The referring agency ABN
- Bank account details
- Contact details
- Reference Number or Invoice Number
- GST Inclusive

For Child Safety Officers working within a CSSC, YHARS After Care can accept a Tax Invoice from the service/supplier of goods for payment on behalf of the client. 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**