**Licensing Services: Agency level assessment Tool**

*OFFICE USE ONLY*

**Instructions**

The Licensing Services: Agency level assessment Tool (the Tool) is to be completed by a Department for Child Protection (DCP) licensing and compliance officer. Please complete all sections of the form prior to seeking endorsement from the service provider. Once endorsed by the service provider, endorsement is required by the Manager, Licensing Quality and Compliance and approval is required by the Manager, Service Contracts and Licensing.

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| **OVERVIEW** | | | | |
| Name of service provider | \*\*\* | | | |
| Name of existing foster/kinship care agency | \*\*\* | | | |
| Address of service provider or foster/kinship care agency | \*\*\* | | | |
| Application type | New Foster Care Agency (FCA) | FCA renewal | New Kinship Care Agency (KCA) | KCA renewal |
| Date of desktop assessment | Click or tap to enter a date. | | | |
| Date of onsite assessment | Click or tap to enter a date. | | | |
| Name of responsible DCP licensing and compliance officer | \*\*\* | | | |
| Name of responsible officer (service provider) | \*\*\* | | | |
| Name of other service provider employee(s) in attendance at onsite assessment meeting | \*\*\* | | | |
| DCP Region *(For example, South, North, Central, Far North Far West)* | \*\*\* | | | |
| Overview of services provided by service provider/agency *(For example, what services does the service provider/agency provide?)* | \*\*\* | | | |

**DESKTOP ASSESSMENT (*Documents to be provided by service provider at time of application submission*)**

***Measure Met Key:*** *S = Satisfactory, NS = Not Satisfactory, N/A = Not applicable*

|  | | | | **DCP USE ONLY:** | | | | |
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| **CATEGORY** | **ITEM** | **MEASURE** | **EVIDENCE** | **MEASURE MET** | | | **DCP OBSERVATIONS AND COMMENTS** | **PROPOSED CONDITIONS/ACTIONS REQUIRED** |
| **S** | **NS** | **N/A** |
| 1. PEOPLE | 1.1 STAFF TRAINING | * + 1. Copy of Staff Compliance Register with expiry dates     2. All staff working in agency are listed on the register   *See* [*Carer and Personnel requirements*](https://www.childprotection.sa.gov.au/service-providers/service-provision-requirements/carer-and-personnel-requirements) *for details* | * Staff Compliance Register with applicable [carer and personnel requirements](https://www.childprotection.sa.gov.au/service-providers/service-provision-requirements/carer-and-personnel-requirements) * Evidence of WWCC renewal system |  |  |  |  |  |
|  |  |  |
| 1.2 CARER TRAINING | * + 1. Copy of Carer Compliance Register with expiry dates     2. All carers within agency are listed on register     3. Process to manage and coordinate carer training   *See* [*Carer and Personnel requirements*](https://www.childprotection.sa.gov.au/service-providers/service-provision-requirements/carer-and-personnel-requirements) *for details* | * Carer Compliance Register with applicable carer requirements * Evidence of carers requiring specific training for specific care of individual CYP |  |  |  |  |  |
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| 1.3 STAFF SUPPORT | * + 1. Evidence that staff receive regular supervision and support, with wellbeing supported | * Evidence of access to supervision opportunities * Documents available to support supervision are accessible to supervisors and staff e.g. intranet, portal * Employee Assistance Program (EAP) details available and accessible |  |  |  |  |  |
| 1.4 CARER SUPPORT | * + 1. Evidence that carers receive regular support and development | * Case worker is assigned from agency * Evidence of carer agreements that are developed in partnership with carers and agency, following the principles in the [Statement of Commitment](https://www.childprotection.sa.gov.au/carers/how-dcp-works/statement-of-commitment) to South Australian Foster and Kinship Carers * Access to information and appropriate training is available to carers e.g. intranet/portal. |  |  |  |  |  |
| 1. GOVERNANCE AND QUALITY SYSTEMS | 2.1 RIGHTS AND RESPONSIBILITIES | * + 1. Evidence that CYP are informed of their rights and responsibilities including how to lodge a complaint     2. Evidence that carers are informed of their rights and responsibilities including how to lodge a complaint | * Reading material provided such as [Being in Care booklet](https://gcyp.sa.gov.au/wordpress/wp-content/uploads/2021/07/Being-in-Care-booklet-revised-11-9-17-1.pdf) * Charter of Rights for Children and Young People in Care provided to CYP and carers * Information is appropriate to CYP capacity and understanding * Welcome pack including information for CYP who entered placement in previous 12 months and the [Statement of Commitment](https://www.childprotection.sa.gov.au/__data/assets/pdf_file/0010/209287/statement-of-commitment.pdf) for South Australian Foster and Kinship Carers * Acknowledgement of receipt of Welcome pack (at least two examples) |  |  |  |  |  |
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| 2.2 CARER ASSESSMENT AND RECORD KEEPING | * + 1. There are systems in place for Carer Reviews     2. Carer records are securely stored, maintained and recorded in a timely manner     3. Carer Agreements are developed in line with DCP requirements | * Evidence of a recording and monitoring system for Carer Reviews * Electronic and/or hard copy files for each carer is available and stored securely |  |  |  |  |  |
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| 2.3 CLIENT INCIDENT AND CARE CONCERNS | * + 1. Client incidents and care concerns are managed, recorded and actioned appropriately     2. Agency staff participation in care concern Planning Discussion and Strategy Discussion meetings | * Accessibility to incident management forms i.e. intranet/portal * Evidence of records of care concerns being raised and managed * Evidence of agency supporting carer through care concern management processes |  |  |  |  |  |
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| 2.4 EMERGENCY RESPONSE | * + 1. Evidence of Bushfire Survival Plan | * Bushfire Survival Plans are in place for carer’s homes in bushfire risk areas * Sight at least two examples for homes identified by South Australian Country Fire Service (CFS) Bushfire Safer Places website checker as in a bushfire risk zone |  |  |  |  |  |
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| 1. PARTNERING WITH CONSUMERS | 3.1 VOICE OF THE CHILD OR YOUNG PERSON | * + 1. Evidence that CYP have the opportunity to participate in decisions affecting them and feel supported | * Evidence of participation in Annual Reviews (or invitation to participate) * Evidence of participation in case planning (or invitation to participate) |  |  |  |  |  |
| 3.2 CARER PARTICIPATION | * + 1. Evidence of carer participation in case planning     2. Evidence of carers working with specialist support (where applicable) | * Evidence of attendance at case planning and Annual Reviews * Evidence of attendance at appointments with specialist support agencies |  |  |  |  |  |
|  |  |  |
| 1. CONNECTION TO CULTURE AND DIVERSITY | 4.1 FAMILY, COMMUNITY AND CULTURAL CONNECTION | * + 1. Evidence that CYP have opportunities to connect to family and community | * CYP access visits (where appropriate) * Contact with siblings where possible * Opportunity to attend community events/activities * CYP have important items to them, and/or of cultural or religious significance to them on display or readily available to them e.g. photos, artwork, ornaments, instruments, jewellery and mementos |  |  |  |  |  |
| 1. PROPERTY, ASSETS AND MAINTENANCE | 5.1 MOTOR VEHICLES | * + 1. Vehicles allocated to site are safe and secure | * Vehicle servicing is up to date * Roadside assistance is available and contact details are accessible |  |  |  |  |  |

**ONSITE ASSESSMENT**

The onsite assessment consists of a face-to-face meeting with service provider/agency executives to seek further information and discuss the results and findings of the desktop assessment. It is expected DCP will seek endorsement of the completed Agency level assessment Tool from the service provider/agency at this meeting.

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| --- | --- | --- | --- |
| Date of meeting | Click or tap to enter a date. | Location of meeting |  |
| Attendees |  | | |
| Summary of discussion |  | | |

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| --- | --- |
| ***CERTIFIED BY RESPONSIBLE OFFICER\* (SERVICE PROVIDER)*** | |
| *I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, agree that the information contained in this document is true and correct as discussed at the time of the Onsite Assessment.* | |
| **Full Name:** | **Signature:** |
| **Title:** | **Date:** |

*\*A Responsible Person/Responsible Officer should be an individual with a degree of responsibility within an organisation, who has been delegated the authority to act on behalf of an organisation. For example the Chief Executive Officer or Chief Operating Officer, or for smaller organisations, this could be the Business Manager or Business Owner.*

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| ***OFFICE USE ONLY*** | | |
| **Assessed by DCP Licensing and Compliance Officer** | | |
| Recommendation to Delegate: | | |
| **Name:** | **Signature:** | **Date:** |
| **Endorsed by Manager, Licensing Quality and Compliance** | | |
| Endorsed | Not Endorsed  Rationale: | |
| **Name:** | **Signature:** | **Date:** |
| **Approved by Manager, Service Contracts and Licensing** | | |
| Approved  Not Approved | | |
| **Name:** | **Signature:** | **Date:** |