

SCHEDULE FOR THE STANDARD FUNDING AGREEMENT

SCHEDULE: Housing Assistance and Homelessness Prevention

Commencement Date: [Drafter - insert the date when the last party to do so has signed the Schedule. This may be hand written. Delete this instruction prior to printing the Schedule]

Completion Date: 31 December 2011

Item A	OUR PROGRAM INFORMATION	
A.1	Program Name	Housing Assistance and Homelessness Prevention Reconnect Program
A.2	<p>Program Objectives</p> <p>To prevent homelessness and reduce its impact, particularly on families and young people, through funding to support innovative prevention and early intervention initiatives.</p> <p>Reconnect is a community based early intervention program for young people aged 12 to 18 years who are homeless or at risk of homelessness and their families. It aims to help young people achieve family reconciliation and improve their level of engagement with work, education, training and the community.</p> <p>[Drafter – Insert where a location has a Reconnect – Newly Arrived Youth Specialist (NAYS)]</p> <p>The Reconnect - Newly Arrived Youth Specialists (NAYS) target newly arrived young people aged 12-21 years who are homeless or at risk of homelessness, and their families. Eligible participants must have arrived in Australia in the previous five years. They can be young people from all visa entry types, however there is a focus on young people entering Australia on humanitarian visas and family visas.</p>	

Item B	YOUR ACTIVITY INFORMATION (see also Clause 2 of the Terms & Conditions)	
B.1	Name of Organisation	[Drafter - Insert the legal name of the organisation]
B.2	ABN	
B.3	Activity Name	Reconnect
B.4	<p>Activity Details</p> <p>Reconnect provides counselling, mediation, group work and practical support in culturally and contextually appropriate services. Service providers may also 'buy in' other services to meet the individual needs of clients, such as specialised mental health services.</p> <p>Reconnect objectives are achieved by working with homeless young people and those at risk of homelessness to achieve:</p> <ul style="list-style-type: none"> • family reconciliation, wherever practicable, between homeless young people, or those at risk of homelessness and their family. Family reconciliation outcomes include: <ul style="list-style-type: none"> - the young person returns home; - ongoing positive family relationships are created which provide the young person with emotional and physical support; - reconciling the young person with other family members e.g. grandparents or siblings; - both parent (s) and the young person accept that independence is appropriate for the young person; and - establishing a viable support system for the independent young person that includes a 	

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	<p style="text-align: center;">member of his/her family.</p> <ul style="list-style-type: none"> • engagement with employment, education, training and the community; • innovative service delivery approaches through the application of Good Practice Principles and Action Research; • improvement of coordination of services delivered by government and the community sector; • targeting of communities to build on their existing capacity to develop appropriate responses to their own needs; and • participation of culturally and linguistically diverse and Aboriginal and Torres Strait Islander communities. <p>The Reconnect Operational Guidelines provide the framework for the implementation and administration of Reconnect. A copy of the Guidelines is enclosed. The Guidelines may be amended by us from time to time.</p> <p>Performance will be monitored based on the data entered for your Reconnect sites identified at item B.7. of this schedule in the Department's online data system for the Reconnect program and the information contained in the Annual Progress Report which includes Community Capacity Building Checklist and Action Research reports. The Department may also undertake service visits as part of performance monitoring.</p>	
B.5	Activity Period	
	Start Date	1 July XXXX
	End Date	30 June XXXX
B.6	<p>Activity Performance Indicators</p> <p>The performance of each Reconnect service will be monitored against the following benchmarks using the data you have entered in the Reconnect online data system.</p> <p>1. Number of project participants by \$</p> <p>The average cost per case is to be approximately:</p> <ol style="list-style-type: none"> a. \$4,000 for services in *Highly Accessible areas, b. \$4,500 for services in *Accessible and *Moderately Accessible areas, and c. \$6,000 for services in *Remote and *Very Remote areas (*Based on ARIA categories). <p>2. Rating against quality requirements</p> <p>Contact is attempted with a least 90% of young people/families within one working day of being referred.</p> <p>3. % of participants from priority target groups.</p> <p>The cultural profile of the service's client group reflects the profile of young people in the local area, or reflects specialist service's target group.</p> <p>4. Rating of achievement of project goals –</p> <ol style="list-style-type: none"> a. Formal needs assessment and goal setting is provided to at least 90% of young people. b. 70% of cases with family functioning and engagement goals, are partially or fully met at the end of support c. Demonstrate positive benefits for 70% of young people d. At least 70% of young people have improved accommodation at the end of the support. <p>5. Rating of completion of agreed service development</p> <p>Worked collaboratively with other service providers to increase the early intervention capacity of the service system.</p>	

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B.7	<p>Activity Details - Reconnect Site/s [Drafter – delete if only one site]</p> <p>You are funded to provide the following Reconnect services in the following sites: [Drafter - Detail below the name, specialist service type if appropriate, and service coverage for each site provided by this organisation under the Reconnect Program. An example is given below]</p> <ul style="list-style-type: none"> • Reconnect XXXXXXt covering the Statistical Local Areas of: • Reconnect XXXXXX <ul style="list-style-type: none"> ○ Generalist Reconnect covering the Statistical Local Areas of: ○ Reconnect - Specialist NAYS covering the Statistical Local Areas of
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Item C	FUNDING AND PAYMENT (see also Clause 6 of Terms and Conditions)			
C.1	Reconnect Site - [] [Drafter- use the above heading for providers with a single site and enter the site name, or Total Funding under the Reconnect Program Use the above heading for providers with multiple sites, delete whichever is not applicable	2008/09	2009/10	2010/11
	Amount payable	[enter total amount payable]		
	GST component (if applicable)	[enter GST component]		
	Total			
	Details of Funding per Reconnect Site - Drafter – where there are multiple Reconnect sites, please enter the funding details for each site using the format below. Delete this section if the provider has only one site.			
C.1.1	Reconnect Site - [enter Reconnect site name]	2008/09	2009/10	2010/11
	Amount payable	[enter total amount payable]		
	GST component (if applicable)	[enter GST component]		
	Total			
C.1.2	Reconnect Site - [enter Reconnect site name]	2008/09	2009/10	2010/11
	Amount payable			
	GST component (if applicable)			
	Total			
C.2	Your Account details You must notify us in writing of any changes to these account details			
	Institution and Branch			
	BSB Number			

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	Account Name	
	Account Number	

Item D	Budget
	You are not required to provide a budget. Reconnect Operational Guidelines recommend services allocate at least 5 per cent of Reconnect funding to brokerage.

Item E	REPORTS (see also Clause 5 of the Terms and Conditions)
NOTE	
Your reports must contain all the information specified below. All reports must be in English and in a form acceptable to us. All reports must be provided within the timelines set out in Item F.	
E.1	<p>Performance Reports (Against Performance Indicators listed in Item B)</p> <p>The Department will monitor the performance of each Reconnect service against the performance indicators listed at Item B.6 based on the data you have entered in the Reconnect online data system.</p> <p>You must provide the following report for each Reconnect site:</p> <ul style="list-style-type: none"> • Annual Progress Report – using our online data system. <ul style="list-style-type: none"> ○ Community Capacity Building Checklist ○ Action Research reports <p>Site visits may also be required.</p>
E.2	<p>Activity Work Plan</p> <p>Not Applicable</p>
E.3	<p>Annual Report</p> <p>Not Applicable. You are not required to provide your organisation’s Annual Report. Note: For the sake of clarity, the Annual Report of your organisation is different to the Annual Progress Report referred to in E.1.</p>
E.4	<p>Financial Acquittal Reports</p> <p>You must provide an annual, independently audited financial acquittal report in accordance with Clause 10 of the Terms and Conditions.</p>
E.5	<p>Other Reports</p> <p>Not applicable</p>

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Item F		MILESTONES / REPORTING REQUIREMENTS / PAYMENT SCHEDULE			
The following table combines all of your reporting requirements. If you comply with the terms of this Agreement, we will make payments to you as set out below					
Milestones and Reports		Information to be included	Report / Document Template to be used	Due Date	*Payment Amount (GST incl.)
F.1	Funding Agreement Executed	Payment is conditional on the Department receiving this signed Schedule for the Standard Funding Agreement by the due date.	Schedule for the Standard Funding Agreement	22 June 2009	\$
F.2	Payment	Payment will be up to 50% of the total Funding Amount for 2009/10	Not Applicable	1 July 2009	\$
F.3	Payment	Payment will be the remainder of the total Funding Amount for 2009/10	Not Applicable	2 January 2010	\$
F.4	Payment	Payment will be up to 50% of the total Funding Amount for 2010/11	Not Applicable	1 July 2010	\$
F.5	Report	Annual Progress Report for 2009/10	Annual Progress Report template	31 July 2010	Not Applicable
F.6	Financial Acquittal	Independently Audited Financial Acquittal Report for the total Funding Amounts for 2008/09 and 2009/10	Refer to Clause 10 of the Terms and Conditions	30 November 2010	Not Applicable
F.7	Payment	Payment will be the remainder of the total Funding Amount for 2010/11	Not Applicable	2 January 2011	\$
F.8	Report	Annual Progress Report for 2010/11	Annual Progress Report template	31 July 2011	Not Applicable
F.9	Financial Acquittal	Independently Audited Financial Acquittal Report for the total Funding Amount for 2010/11	Refer to Clause 10 of the Terms and Conditions	30 November 2011	Not Applicable

*Note – If you have multiple Reconnect sites, the Payment Amount is the sum of payments to all sites.

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Item G	INSURANCE REQUIREMENTS (Refer to Clause 21 of the Terms and Conditions)
	<p>You must have the following additional or Activity specific insurance/s:</p> <p>No additional insurance required</p>

Item H	ASSETS (Refer Clause 13 of the Terms & Conditions)
	No assets to be purchased with this funding

Item I	SUBCONTRACTORS (see also Clause 28 of the Terms & Conditions)
	<p style="background-color: yellow;">Drafter: if there are any subcontractors required to undertake the Activity (or part of), please list them here and provide details for the parts of the Activity they must perform. If there are no subcontractors, please write None specified. This Item also applies to Consortiums.</p> <p>The following subcontractors are required to undertake the Activity/ies as indicated:</p>

Item J	SPECIFIED PERSONNEL (see also Clause 29 of the Terms & Conditions)
	None Specified

Item K	CONFIDENTIAL INFORMATION (see also Clause 17 of the Terms & Conditions)
	Not Applicable

Item L	NOTICES (see also Clause 38 of the Terms & Conditions)
Our contact details and address for notices	
Name or Position	
Phone	

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Email	
Postal Address	
Facsimile	
Your contact details and address for notices	
Name or Position	
Phone	
Email	
Postal Address	
Facsimile	

Item M	VULNERABLE PERSONS, POLICE CHECKS AND CRIMINAL RECORDS (Refer to Clause 19 of the Terms and Conditions)
	Applies in full

ANNEXURE A - Supplementary Conditions

Not Applicable

SAMPLE

Signatories to this Agreement

Parties

Commonwealth of Australia, as represented by and acting through the **Department of Families, Housing, Community Services and Indigenous Affairs** ABN 36 342 015 855 of Tuggeranong Office Park, Athllon Drive, Greenway ACT 2905 ("us", "we" or "our")

[Drafter: insert legal name of funding recipient] ABN **[Insert ABN]** of **[Insert registered address]** ("you" or "your")

Executed as an agreement on

[Insert Date when the Department or Agency delegate executes the agreement)].

Signed for and on behalf of the **Commonwealth of Australia** by the relevant Departmental delegate, represented by and acting through the Department of Families, Housing, Community Services and Indigenous Affairs, **ABN 36 342 015 855**, in the presence of:

(Signature of Departmental/Agency Representative)

(Signature of Witness)

(Name of Departmental/Agency Representative)

(Name of Witness in full)

[Drafter: please choose the appropriate signature block, depending on what kind of body the funding recipient is. You should then delete the other signature blocks that are not used]

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Company

Signed by **[insert name of funding recipient] [ABN]**, in accordance with its Constitution:

(Signature of Director)

(Signature of other Director/Secretary)

(Name of Director in full)

(Name of other Director/Secretary)

Individual

Signed by **[insert name of funding recipient] [ABN]**, in the presence of:

(Signature of Funding Recipient)

(Signature of Witness)

(Name of Funding Recipient)

(Name of Witness in full)

Partnership

Signed by **[insert name of partnership] [ABN]**, in the presence of:

(Signature of Partner)

(Signature of Witness)

(Name of Partner)

(Name of Witness in full)

Incorporated Association

The Common Seal of **[insert name of Funding Recipient] [ABN]** was affixed here in accordance with its rules in the presence of:

(Signature of Public Officer)

(Signature of committee member/secretary)

(Name of Public Officer)

(Name of committee member/secretary in full)

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Other

Signed by **[Insert name of Party] [ABN]**, in the presence of:

(Signature of Party)

(Signature of Witness)

(Name of Party)

(Name of Witness in full)

SAMPLE

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