

Application for accreditation of a residential service

Residential Services (Accreditation) Act 2002

This form is effective from 3 September 2018

ABN: 86 504 771 740

<p style="text-align: center;">OFFICE USE ONLY</p> <hr/> <p>Date received</p> <p>Application number</p> <p>Lodgement details</p> <p>Lodgement unit number</p> <p>Amount allocated</p> <p>\$</p> <p>Total amount</p> <p>\$</p>	<p>Instructions</p> <p>This form needs to be completed to apply for accreditation of a residential service, as required under Section 47 of the <i>Residential Services (Accreditation) Act 2002</i> (the Act).</p> <p>Please note:</p> <ul style="list-style-type: none"> • The Notes accompanying this form should be read before completing this form • Use BLOCK letters • Attach extra pages if necessary • All dates should be DD/MM/YYYY • If you require further information regarding this form, please contact Regulatory Services on 07 3013 2666 or Department of Housing on 13 QGOV (13 74 68) for after hours enquiries. <p>A complete application for accreditation must be lodged before the due date, otherwise the services' registration will be automatically cancelled.</p> <p>Privacy statement—Please read</p> <p>The Department of Housing is collecting your personal information in accordance with the <i>Residential Services (Accreditation) Act 2002</i> in order to process your application. Your personal information will also be provided to the public upon request through the Register of Residential Services or may be disclosed to the Residential Tenancies Authority, the Office of the Public Guardian, the Department of Justice and Attorney General or to other Federal, State and Local government agencies in the performance of a function of, the <i>Residential Services (Accreditation) Act 2002</i> or as required or permitted by law. Your personal information will be handled in accordance with the <i>Information Privacy Act 2009</i>.</p> <p>Fee</p> <p>Fees are applicable for this application. Refer to Notes for current fees. Goods and Services Tax (GST) is not payable on the application fees.</p>
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Part 1—Registered service provider details

Registered service provider	<p>Registration certificate number</p> <p>Have there been any changes to the service provider details as notified on the certificate of registration?</p> <p style="text-align: center;">No Yes—Please provide details</p> <p>Is the service provider an individual or a corporation?</p> <p style="text-align: center;">Individual—Go to individual service Corporation—Go to corporate service</p>
Individual service providers	<p>Preferred title Mr Mrs Ms Miss Other (specify)</p> <p>Last name First name</p> <p>Last name First name</p> <p>ACN</p> <p>Corporation name</p>

Part 1—Registered service provider details continued

Postal address	Postal address Suburb State Postcode
Contact details	Phone (business) Fax (business) Phone (home) Mobile Email Preferred contact method Phone Fax Mobile Email Mail
Corporate service provider	ACN (Australian Company Number) and/or Full name of corporation
Corporate registered office address Note: a post office box address is not acceptable.	Address Suburb State Postcode
Nominated director Director nominated as main contact	Preferred title Mr Mrs Ms Miss Other (specify) Last name First name Position held in the corporation Residential address Suburb State Postcode Phone (business) Fax (business) Phone (home) Mobile Email Preferred contact method Phone Fax Mobile Email Mail

Part 2—Details of previous accreditation

<p>Previous accreditation application</p>	<p>Have you previously applied for accreditation and:</p> <p>Been refused accreditation Yes No</p> <p>Withdrawn your application Yes No</p> <p>Allowed your application to lapse Yes No</p> <p>If the answer of any of the above is YES, please indicate the level of accreditation applied for:</p> <p>Level 1 accommodation service Level 2 food service</p> <p>Level 3 personal care service</p>
<p>Accreditation refusal details</p>	<p>If your previous application for accreditation of the service was refused please provide:</p> <p>Date of refusal DD / MM / YYYY</p> <p>Reason for refusal:</p> <p>Please provide information to illustrate the corrective action taken to address the reasons for refusal (you may use a continuation sheet if necessary):</p> <p>On what date did this service recommence DD / MM / YYYY</p>

Part 3—Service details

<p>Service details</p> <p>Indicate the level of accreditation to which this application relates.</p> <p>More than one level may be applied for.</p> <p>All residential services must hold Level 1 accreditation.</p>	<p>Level 1 accommodation service Level 2 food service</p> <p>Level 3 personal care service</p> <p>Number of residents accommodated at the time of making this application?</p> <p>Have you been granted an extension of time in which to make this application?</p> <p>Yes No</p>
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Part 4—Registered residential service premises

<p>Registered residential service premises</p>	<p>Address at which the registered residential service is conducted</p> <p>.....</p> <p>Suburb State Postcode</p> <p>Maximum number of residents who can be accommodated in the residential service</p> <p>.....</p> <p>Number of relevant employees or staff usually in attendance at the residential service</p> <p>.....</p> <p>Has the registered residential service premises undergone any changes since the last application for accreditation? Please see Notes for examples of changes you should include.</p> <p>No Yes—Please provide further information</p> <p>.....</p> <p>.....</p> <p>.....</p> <p><i>Please note that Form 7: Notice of other changes should be completed where changes have occurred.</i></p>
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Part 5—Checklist and declaration

Check list and declaration

N/A=Not applicable

Applicants sign here

Each service provider should sign.

Please attach a separate sheet for additional signatures if required.

For corporation—
1 x director and 1 x director or secretary unless you are a sole director—see section 127 of the *Corporations Act 2001* (Cth).

Sign here 

Have you completed the following?

I have read all the accompanying Notes for this form.

I have completed all relevant parts of the form.

I have enclosed a completed self-assessment workbook.

I have enclosed all of the documents as mentioned in the self-assessment workbook

A copy of the Building Compliance Notice (BCN) and Fire Safety Management Plan (FSMP) has been provided.

I have enclosed the appropriate fee for accreditation of a residential service.

I have checked the answers I have given on this form and in the completed self-assessment workbook and state that they, and the additional documents provided, are true and correct in every detail to my knowledge.

Signed

.....
(registered service provider/s)

Date
DD / MM / YYYY

Signed

.....
(registered service provider/s)

Date
DD / MM / YYYY

Note: to supply incorrect or misleading information may subsequently result in the cancellation of accreditation. Conducting a residential service without accreditation may result in a maximum penalty of 200 penalty units or cancellation of registration.

The penalty for a corporation may be up to 1000 penalty units.

Part 6—lodgment and payment details

Lodgment

Please email the completed application, any supporting documentation and fees to regulatoryservices@chde.qld.gov.au.

If you would like more information regarding this application, contact Regulatory Services on 07 3013 2666, email regulatoryservices@chde.qld.gov.au, or visit our website at www.housing.qld.gov.au.

After hours enquiries can be made to the Department of Housing on 13 QGOV (13 74 68).

Payment details

Pay via BPOINT at:

www.bpoint.com.au/pay/DHPWREGULATORYSERVICES Biller Code: **1655513**

A receipt will not be issued unless specifically requested via BPOINT.

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Instructions

A service provider may apply for accreditation of more than one residential service. Service providers should make a separate application for each residential service. Form 2 should also be used for applying for additional levels of accreditation for a particular residential service.

Self-assessment

Before lodging this application you should complete the self-assessment workbook to assess your own performance against the relevant accreditation standards and identify any areas for improvement. The completed self-assessment workbook must accompany your application for accreditation. A self-assessment workbook can be obtained from Regulatory Services by calling 07 3013 2666 or emailing regulatoryservices@chde.qld.gov.au.

Assessment of a residential service

The assessment of a residential service for accreditation will include:

1. an assessment of the residential service's written policies and procedures. This will be conducted as a desktop study and will establish the existence and adequacy of the documents required by the relevant accreditation standards. The documents that will be assessed, as mentioned in the self-assessment workbook, should accompany your application for accreditation.
2. a site visit to assess the residential service's level of compliance with accreditation standards. This may involve observing the provision of the service, discussions with relevant employees, staff, residents, residents' families or other representatives.

The following documents are also required to be submitted with your application form:

1. a building compliance notice issued by local government within the previous 12 months, in relation to MP 5.7—Residential Services Building Standard of the Queensland Development Code and notification of compliance with MP 2.1—Fire Safety in Budget Accommodation in Buildings of that Code if accommodating six or more residents. The building compliance notice is issued by local government and notification of compliance with MP 2.1 may be obtained by contacting either Queensland Fire and Emergency Service or your local council.
2. a fire safety management plan or a copy of a decision notice from a local government approving a development application that required a fire safety management plan to be provided as part of the application.

Definitions

A building compliance notice for premises, *means* a notice, issued by the local government for the local government area in which the premises are situated, stating that the premises comply with the prescribed building requirements.

Food service *means* a service of regularly providing meals to a resident.

Personal care service *means* a service of regularly providing or arranging to provide a resident with:

- a) help in:
 - i. bathing, toileting or another activity related to personal hygiene; or
 - ii. dressing or undressing; or
 - iii. consuming a meal; or
 - iv. meeting a mobility problem of the resident; or
 - v. taking medication; or
- b) help in managing the resident's financial affairs.

Relevant employee in relation to a service, *means* a person who is employed in the service by the service provider and has a principal place of residence that is not 1 or more rooms in the service.

Staff of a residential service *includes* a volunteer and a resident who participates in the conduct of the service.

Fee schedule

The fee for an application for accreditation (as outlined in the *Residential Services (Accreditation) Regulation 2018*) is: \$35.99 multiplied by the number of residents accommodated in the residential service at the time of making this application (e.g. 10 residents x \$35.99 = \$359.90).

Note: *The number of residents accommodated at the time of making the application will be verified during the accreditation visit. To supply incorrect or misleading information may subsequently result in the cancellation of accreditation. Conducting a residential service without accreditation may result in a maximum penalty of 200 penalty units (maximum penalty \$28,750) or cancellation of registration. The maximum penalty for corporations is 1000 penalty units (maximum penalty \$143,750).*