



Australian Government  
Department of Education,  
Skills and Employment

# In Home Care Handbook

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The document must be attributed as the In Home Care Handbook.

## Version control

| Date of change (Published) | Version | Description of Changes  |
|----------------------------|---------|---|
| June 2018                  | 1.0     | Creation of In Home Care Handbook   |
| December 2018              | 2.0     | <ul style="list-style-type: none"> <li>• Incorporated the increase to the hourly rate cap to \$32.00 and IHC places to 3200</li> <li>• References to pre-implementation updated to reflect post implementation</li> <li>• Contact details updated</li> </ul>  |
| December 2019              | 3.0     | <ul style="list-style-type: none"> <li>• Extension of transitional provisions for educators in remote and very remote areas</li> <li>• Department of Education name updated</li> <li>• Corrected inaccuracies and other minor revisions</li> <li>• Attachment A - Family Management Plan removed, now available on the website</li> <li>• Attachment B – Recommendation for allocation of IHC Places removed</li> <li>• Attachment C - Travel Reimbursement Claim Form removed, now available on website</li> <li>• Updated to reflect revised travel policy from 16 May 2019</li> <li>• Indexation applied</li> <li>• Links updated</li> </ul>   |
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## Glossary

The [Child Care Provider Handbook](#) and the [In Home Care National Guidelines](#) provide lists of terms referred to in the IHC Handbook.

These are some additional terms used in the IHC Handbook.

**Table 1: Glossary of additional terms used in the IHC Handbook**

| Term                   | Definition  |
|------------------------|---|
| ARIA+                  | <i>Accessibility/Remoteness Index of Australia (ARIA+)</i> is an index of the accessibility of places to service centres or remoteness of places. For detailed information see: <a href="http://www.adelaide.edu.au/hugo-centre/spatial_data/aria/">www.adelaide.edu.au/hugo-centre/spatial_data/aria/</a>  |
| Department             | Refers to the Australian Government Department of Education, Skills and Employment in its role in administering the IHC program and acting on behalf of the Secretary of the Department of Education, Skills and Employment.  |
| IHC place              | A place allocated to an approved child care service under section 198A(ba) of the <i>A New Tax System (Family Assistance) (Administration) Act 1999</i> .   |
| Distribution of places | The Department reviews the allocation of IHC places at state and territory level annually and determines a distribution of places across all jurisdictions based on the existing allocation, the unmet demand in each jurisdiction represented by waiting lists, and the target distribution of demand derived from census data.                      |
| Family                 | For an IHC session of care, a family is composed of a Child Care Subsidy (CCS) eligible individual, possibly the individual's partner, and children who are Family Tax Benefit (FTB) children of the eligible individual or individual's partner, or a former partner who all reside in the same domestic residence at the time the care is provided. |
| Nominated child        | One CCS eligible child must be selected as the nominated child for each session of care for services to claim the CCS or Additional Child Care Subsidy (ACCS) for IHC. The eligible individual nominates any one of the children in each session of care eligible for the CSS or ACCS.  |

# 1. Introduction

## 1.1. About the Handbook

The In Home Care (IHC) Handbook complements the [In Home Care National Guidelines](#) and the [Child Care Provider Handbook](#). The IHC Handbook outlines the operational policy for the IHC program delivered through a network of IHC Support Agencies.

The Australian Government has engaged IHC Support Agencies to service each state and territory. The IHC Support Agencies play a key role in program delivery by advocating for families, brokering care arrangements and matching families to suitable IHC Services. They interact with the IHC Services to ensure national consistency in the approach to service delivery.

**Table 2: Contact details for IHC Support Agencies**

| State/ Territory | Email address  | Phone number               |
|------------------|--|----------------------------|
| ACT              | <a href="mailto:support@ihcsupportagencyact.org.au">support@ihcsupportagencyact.org.au</a>             | 1800 940 906               |
| NSW              | <a href="mailto:info@ihcsupportagency.org.au">info@ihcsupportagency.org.au</a>                         | 1800 IHCARE (1800 442 273) |
| SA               | <a href="mailto:info@ihcsupportagency.org.au">info@ihcsupportagency.org.au</a>                         | 1800 IHCARE (1800 442 273) |
| VIC              | <a href="mailto:info@ihc.org.au">info@ihc.org.au</a>   | 1800 993 737               |
| QLD              | <a href="mailto:info@ihc.org.au">info@ihc.org.au</a>   | 1800 993 737               |
| WA               | <a href="mailto:inhomecaresupportagencywa@wanslea.asn.au">inhomecaresupportagencywa@wanslea.asn.au</a> | 1300 164 202               |
| NT               | <a href="mailto:inhomecaresupportagencynt@wanslea.asn.au">inhomecaresupportagencynt@wanslea.asn.au</a> | 1300 164 202               |
| TAS              | <a href="mailto:info@ihcsupportagencytas.com.au">info@ihcsupportagencytas.com.au</a>                   | 1300 052 057               |

The IHC Handbook is a guide to the requirements and responsibilities of IHC Support Agencies in their role to ensure the integrity of the care type and to support the Department of Education, Skills and Employment (the department) in monitoring quality and compliance. The IHC Handbook also provides guidance on how the IHC Support Agencies will work with Approved IHC Providers, IHC Services, IHC educators and families. The IHC Handbook provides interpretation of the broader context and policy intent underpinning the IHC Service type and program delivery arrangements.

Approved IHC Providers, IHC Services, and IHC educators should consult the [Child Care Provider Handbook](#) for detailed guidance on the delivery of Child Care Subsidy.

The IHC Handbook will be updated as required. The IHC Handbook as it appears on the website of the department will be the most recent version, with the date of the version stipulated on the landing page. Care should be used in referring to printed copies of the IHC Handbook, as there is always a risk that a printed copy may be out of date. It is recommended that you regularly check the website for updates.

The IHC Handbook can be found at [www.education.gov.au/in-home-care](http://www.education.gov.au/in-home-care). For further information about the IHC Service type and program delivery arrangements please contact [inhomecare@dese.gov.au](mailto:inhomecare@dese.gov.au).

## 1.2 Legislative framework

IHC Support Agencies and Approved Providers of IHC Services must comply with all relevant Commonwealth, state and territory legislation. IHC Support Agencies must comply with all requirements and obligations in their contracts and any other Commonwealth, state or territory laws that affect their business operations. If there is a conflict between the material in the IHC Handbook and the legislation, legislative instruments and regulations, or IHC Support Agency contracts, those instruments or contracts will always prevail.

The key legislation of the Family Assistance Law includes:

- *A New Tax System (Family Assistance) Act 1999*  
([www.legislation.gov.au/Series/C2004A00490](http://www.legislation.gov.au/Series/C2004A00490))
- *A New Tax System (Family Assistance) (Administration) Act 1999*  
([www.legislation.gov.au/Series/C2004A00491](http://www.legislation.gov.au/Series/C2004A00491))

The following instruments are also relevant to users of the IHC Handbook:

- *Child Care Subsidy Minister's Rules 2017* ([www.legislation.gov.au/Series/F2017L01464](http://www.legislation.gov.au/Series/F2017L01464))
- *Child Care Subsidy Secretary's Rules 2017* ([www.legislation.gov.au/Series/F2017L01463](http://www.legislation.gov.au/Series/F2017L01463))


These Acts and legislative instruments are collectively known as 'Family Assistance Law'.

For a full list of legislative instruments that are part of the Family Assistance Law, see [www.education.gov.au/family-assistance-law-0](http://www.education.gov.au/family-assistance-law-0).

The *Education and Care Services National Law Act 2010* (the National Law) and the *Education and Care Services National Regulations 2011* govern the operation, and monitor the quality of, most education and care services in all states and territories.

IHC is out of scope for the National Law. Approved providers of IHC Services are not obliged to meet the requirements under the National Law. However, relevant provisions and requirements of the National Law and Regulations have been incorporated into the *Child Care Subsidy Minister's Rules 2017* and the [IHC National Guidelines](#).





Approved Providers of IHC must comply with the [Child Care Subsidy Minister's Rules 2017](#) and the [IHC National Guidelines](#). Further detail on these requirements is included in this handbook.

South Australia and Tasmania have additional laws governing IHC:

- [Tasmania: Child Care Act 2001](#)
- [South Australia: Education and Early Childhood Services \(Registration and Standards\) Act 2011](#)

### 1.2.1 Relevant Delegations

Please note that the Secretary of the Department of Education, Skills and Employment has delegated the following legislative powers to specified personnel of an employed, or otherwise engaged, external In Home Care Support Agency:

- The power to determine whether eligibility requirements in relation to sessions of care provided by an approved In Home Care service are met for the purpose of determining an individual's eligibility for CCS (under section 85BA(1)(e) of the *A New Tax System (Family Assistance) Act 1999*);
- The power to allocate IHC child care places (under section 198B of the *A New Tax System (Family Assistance) (Administration) Act 1999*); and
- The power to reduce the allocation IHC child care places by unused or unusable places (under section 198C of the *A New Tax System (Family Assistance) (Administration) Act 1999*).



## 2. In Home Care (IHC)

### 2.1. What is IHC?

IHC is an approved child care service type created under the Australian Government's child care package that commenced on 2 July 2018. IHC is aligned to the key elements of the package which is intended to help parents and carers who want to work or who want to work more, and to make early childhood education more affordable and accessible.

Families unable to access Centre-based Day Care (CBDC), Family Day Care (FDC) and Outside School Hours Care (OSHC) because of their unique circumstances may be able to access education and care provided in the family home through IHC to support their workforce participation.

IHC is designed to support the provision of early childhood education and care in the home particularly for families working non-standard or variable hours, geographically isolated from other approved child care services or those with complex and challenging needs but not to subsidise, for example, medical, health or disability care.

IHC is targeted to those families that need this service type the most, provided at the time they need it. IHC Support Agencies will advocate primarily for the needs of the family to support them to access affordable early childhood education and care. They act as a conduit between the family and IHC Services to ensure quality early childhood education and care is provided which meets the needs of the family.

Research shows that children benefit from access to mainstream child care where they can interact with their peers. IHC Support Agencies will ensure families are aware of the range of approved child care, government funded and community-based support services available to meet their needs and support them to transition to mainstream child care services, when available and appropriate.

For more information on the IHC program, see the [IHC National Guidelines](#) and 'In Home Care' references in the [Child Care Provider Handbook](#).

## 2.2. IHC Eligibility Criteria

IHC Services will be required to provide subsidised care only for:

- children of individuals eligible for CCS
- families that demonstrate that no other types of approved child care are suitable or available at the times required by the child(ren) **AND** where one or more of the following eligibility criteria, as prescribed in the *Child Care Subsidy Minister's Rules 2017*, apply:<sup>1</sup>
  - the parents or carers of the child are working non-standard or variable hours, outside normal child care service hours
  - the parents or carers of the child are geographically isolated from other types of approved child care, including because they reside in a rural or remote location
  - the family has challenging or complex needs.

For more information on eligibility for the CCS and ACCS, see “Child Care Subsidy” and “Additional Child Care Subsidy” references in the [Child Care Provider Handbook](#).

## 2.3. Child Care Subsidy (CCS) for IHC

The CCS family hourly rate cap for In Home Care is \$33.17<sup>2</sup> per hour.

While eligibility for CCS is a requirement to access IHC, the amount of subsidy a family is entitled to receive does not determine a family’s ongoing eligibility for IHC, nor does the amount of subsidised hours a family is entitled to under the activity test determine the number of IHC hours a family is eligible to receive under IHC.

Families may also be eligible for the Additional Child Care Subsidy (ACCS), which provides additional fee assistance to support vulnerable or disadvantaged families and children. The amount of ACCS entitlement for eligible families will be equal to the actual fee charged, up to 120 per cent of the hourly rate cap, (or 95 per cent of the fee charged up to 95 per cent of the hourly rate cap for parents transitioning to work). The ACCS family hourly rate cap for IHC is \$39.80 per hour.

The hourly rate caps for CCS and ACCS for IHC are subject to annual indexation in alignment with other child care subsidy hourly rate caps. For more information on CCS and ACCS for IHC, see “Child Care Subsidy” and “Additional Child Care Subsidy” in the [Child Care Provider Handbook](#) and the [Guide to ACCS \(child wellbeing\)](#).

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<sup>1</sup> IHC may be used in combination with other types of care, including other child care service types or government funded or community-based services. However, IHC must not be used as a substitute option for other types of care.

<sup>2</sup> 2020-21 Income thresholds, the annual cap and the hourly rate caps. These will be Index annually.

## 2.4. IHC places

The number of IHC places is capped at 3200 nationally. An IHC Service must be allocated a place or places for a family to receive the CCS for IHC. It is important for IHC Support Agencies and services to understand how places are distributed, recommended, allocated or reduced in order to operate successfully.

An IHC place is equivalent to 35 hours of subsidised care per week, per child. A family may access more than one place or part thereof, up to the total number of hours per fortnight of subsidised care for each child as determined by the family's Activity Test Result. Where there are multiple children in the family receiving IHC, the places required by the family will be the cumulative number of places for each of the children receiving IHC in the family. For example, a family with two children accessing 35 hours each, per week, of IHC will be provided with two places.

IHC Support Agencies will allocate or reduce places to IHC Services under the Family Assistance Law, and will notify IHC Services of any changes to their allocation of places.

|             |  |
|-------------|--|
| Distributed | IHC places are distributed to each jurisdiction by the department. Places will be redistributed as required.           |
| Recommended | IHC Support Agencies recommend to the department, if required, the number of places to be allocated to an IHC Service. |
| Allocated   | IHC places are allocated by the IHC Support Agency to an IHC service.  |
| Reduced     | IHC places are reduced by the IHC Support Agency from an IHC Service.  |
| Allocated   | IHC places are allocated by the IHC Support Agency to an IHC Service.  |

### Example 1

Family 1 has three children, each receiving the same number of hours of care per week

*Assumptions:*

- An individual is eligible for CCS
- The Activity Test result entitles the family for up to 36 hours of subsidised care per fortnight
- The family receives 28 hours of subsidised care per fortnight i.e. 14 hours of IHC in four sessions of 3.5 hours each per week
- The service is allocated 1.2 places

| Child             | IHC places (per week)       |
|-------------------|-----------------------------|
| 1 (4 days a week) | $(4 \times 3.5) / 35 = 0.4$ |
| 2 (4 days a week) | $(4 \times 3.5) / 35 = 0.4$ |
| 3 (4 days a week) | $(4 \times 3.5) / 35 = 0.4$ |
| Family Total      | 1.2 places                  |

### Example 2

Family 2 has two children, each receiving different hours of care per week.

#### Assumptions:

- An individual is eligible for CCS
- The Activity Test result entitles the family for up to 36 hours of subsidised care per fortnight
- The family receives IHC for a cumulative total of 45.5 hours per week
- The service is allocated 1.3 places

| Child                        | IHC places (per week)       |
|------------------------------|-----------------------------|
| 1 (3.5 hours, 5 days a week) | $(5 \times 3.5) / 35 = 0.5$ |
| 2 (7 hours, 4 days a week)   | $(4 \times 7) / 35 = 0.8$   |
| Family Total                 | 1.3 places                  |

### 2.4.1. Distribution of IHC places to Jurisdictions

The number of places available under the IHC program is capped at 3200 places nationally. The department initially distributed places to states and territories based on utilisation as at 1 July 2018, with the aim to moving towards a target distribution to enable an equitable distribution across states and territories. The target distribution will be reviewed annually, or as required.

The department will determine the distribution of IHC places taking into account at least the following factors:

- the population of children in each jurisdiction
- the utilisation of IHC places by IHC Services
- the number of IHC places allocated to IHC Services with ongoing enrolments in each jurisdiction
- the number of IHC places that can be distributed to each jurisdiction to meet demand in jurisdictions with a waiting list or to promote further engagement with the program in those jurisdictions without a waiting list.

**Table 3: Target distribution of IHC places**

|                     | NSW | VIC | QLD | SA  | WA  | TAS | NT | ACT | TOTAL |
|---------------------|-----|-----|-----|-----|-----|-----|----|-----|-------|
| Target distribution | 950 | 700 | 900 | 180 | 310 | 80  | 40 | 40  | 3200  |

The department will review the distribution of IHC places annually or as required with the aim to reach the target distribution of IHC places, to ensure an equitable national distribution of places as determined by the department.

As families stop using IHC places in jurisdictions where utilisation exceeds the target distribution, places may be re-distributed to other jurisdictions with the aim of achieving the target distribution. A jurisdiction over their target number may be able to retain some places where other jurisdictions are unable to utilise the additional places. Any re-distribution of places will be determined based on

the review of places with the aim of moving to the target distribution, along with consideration of families on waiting lists.

### 2.4.2. Distribution of IHC places for the 2018-19 year

To ensure continuity of care arrangements, the department distributed IHC places across jurisdictions based on utilisation of families transitioning into the refined IHC program, refer Table 4.

**Table 4: Initial distribution of IHC places as at 2 July 2018**

|  | NSW | VIC | QLD | SA  | WA  | TAS | NT | ACT | TOTAL |
|--|-----|-----|-----|-----|-----|-----|----|-----|-------|
| Initial distribution of IHC places for 2018-19 | 926 | 650 | 847 | 155 | 293 | 57  | 33 | 39  | 3000  |

### 2.4.3. Allocation and reporting of places by IHC Support Agency

IHC Support Agencies will assess whether a family meets the IHC eligibility criteria, match the family to a suitable service and allocate the required places to each service.

If IHC Services require a change to their place allocation, the Approved Provider will need to apply to the IHC Support Agency. IHC Support Agencies will assess applications for increasing or reducing allocated places, bearing in mind that the overall allocation of places to a service must not exceed the distribution of places to the jurisdiction.

Allocation and reduction should be on a quarterly, or as needs basis, such as when a service closes or opens. When allocating or reducing places, the IHC Support Agency should consider the following:

- current utilisation
- equitable allocation of places across the service
- the distribution of places to their jurisdiction
- waitlists.

Reasons for changing the allocation of IHC places to an IHC Service could include:

- a family leaving the program or the hours of IHC for a family changing
- an IHC Service ceasing to provide IHC and the families it was servicing still needing IHC
- a new family requiring IHC
- places not utilised by a service may need to be reallocated to accommodate other IHC Services.

Changes to utilisation within an IHC Service's allocation must be reported to the department by the IHC Support Agency by the end of each quarter in the year. For practical purposes, an IHC Support Agency does not need to reallocate places each time a family is referred to, or leaves, a service as long as the service allocation is not exceeded or the place does not remain vacant for more than a month, refer [section 2.4.6](#).

In allocating places to IHC Services, the IHC Support Agencies are required to consider the following matters:

- a place is based on the number of hours of care provided per **child**, and not per family. If there are multiple children in a family receiving IHC, then the number of places allocated to the service will reflect this. For example, if there are two children receiving IHC for 35 hours each per week (i.e. a cumulative total of 70 hours), then the service providing care will need to be allocated two places
- the IHC Support Agency may agree that a service retains places that are not utilised when a family leaves a service to allow for growth
- the IHC Support Agency may at any time agree a reduction in the allocation of places to reduce or remove unutilised places
- additional places may be required by IHC Services to accommodate ad hoc emergency situations.

Service delivery to families (and consequent utilisation of these additional places) must only commence once the Family Management Plans have been developed for the new families. It is a requirement under the *Child Care Subsidy Minister's Rules 2017* that an IHC Service can only enrol a child for care after receiving a referral from the relevant IHC Support Agency.

#### 2.4.4. Allocation of IHC places to IHC Services

Allocation of places by IHC Support Agencies should accommodate services' current and future requirements. This may include any expected week-to-week volatility (i.e. school holidays) in the numbers of places required by existing families or may include places to allow the service to take on additional families as needed. It is a condition of continued approval under Family Assistance Law that IHC Services do not submit attendances for more hours than would exceed their allocated places.


#### 2.4.5. IHC Service request to increase allocation of places

An IHC Service may request places above the number allocated. The IHC Service must submit a business case to the IHC Support Agency that identifies the number of additional places sought along with a justification. IHC Approved Providers can apply directly to the department for additional places in limited exceptional circumstances however, the request will be reviewed taking into account the recommendation of the IHC Support Agency.

IHC Approved Providers can use the [IHC Application for Additional Allocation of Child Care Places](#) form located on the department's.

#### 2.4.6. Utilisation of allocated places

Utilisation will vary depending on a number of changes to a family's circumstances such as varying hours of care, ceasing and commencing care. When a family exits IHC, the IHC Service will need to advise the IHC Support Agency, **within seven calendar days**. The service will continue to retain its allocated number of places until the allocation is reduced.



Unutilised (i.e. vacant) places may be used to match families waiting to access IHC, once the IHC Support Agency has developed a Family Management Plan for the family and agrees that the service is suitable and that this is the most appropriate arrangement.

In this situation, the IHC Support Agency can match the new family to the service without needing to (re)allocate places to that particular service. The IHC Support Agency will need to report this adjustment as part of its quarterly reporting arrangements.

If one or more places remain vacant at an IHC Service for more than a month, as part of the IHC Support Agency's quarterly place allocation review, an IHC Support Agency **may** reduce the places to the IHC Service or services where this situation arises.

#### 2.4.7. Ad hoc emergency allocation

Places may need to be allocated to services to accommodate families in emergency situations, such as where a family in crisis has been referred to IHC.

If the IHC Service has vacant places, then service delivery can commence immediately, once the IHC Support Agency has referred the family *and* there is no need for the allocation of additional places.

If a service requires additional allocated places to accommodate the family in such circumstances, the IHC Support Agency should prioritise the allocation of necessary places to meet the crisis situation. The IHC Support Agency may take up to two business days in allocating the required places to the relevant service.

#### 2.4.8. An IHC service ceases to provide IHC

When an IHC Service ceases to provide IHC, they must inform the IHC Support Agency. The IHC Support Agency will consider the places held by the closing IHC Service and allocate those places to a service or a number of services, if required, which have the capacity to meet the families' needs.

More information on when an IHC Service ceases to provide IHC can be found in [section 4.1.10](#).

#### 2.4.9. A family relocates to another jurisdiction

When a family using IHC relocates to another jurisdiction, they will not automatically be eligible for IHC places in the new jurisdiction. IHC Support Agencies may share the Family Management Plan with other IHC Support Agencies to assist in determining ongoing eligibility for IHC.



## 3. IHC Operating Model

### 3.1. IHC Process Overview Description

This section provides an overview of the IHC operating model and the roles of families, IHC Support Agencies, IHC Service Providers and the department during transition to the Child Care Package on 2 July 2018 and from commencement of the package. More detail on the operations of the IHC Support Agency and its interactions with families, service providers and the department is in [Section 4](#) of this document.

### 3.2. Transition processes

#### 3.2.1. Families

- Priority to IHC places will be given to existing families using IHC who meet the eligibility criteria for IHC and are eligible for the CCS
- Families will need to complete their CCS assessment or claim and be assessed as being eligible for the CCS to be transitioned to the new IHC service type
- Families will need to provide and/or confirm circumstances to IHC Support Agencies to determine IHC eligibility and to develop a Family Management Plan.

#### 3.2.2. IHC Support Agencies

The IHC Support Agencies will:

- prioritise existing families in terms of preparing Family Management Plans (either from information provided from IHC Services or from PricewaterhouseCoopers) and matching these families to suitable IHC Services
- consider family's wishes to retain their current service/educator
- work with families to develop Family Management Plans for transitioning families
- establish referral pathways to assist families in accessing other child care and support services (IHC may be provided in combination with other types of child care but not as a substitute)
- recommend allocation of places to services
- where a service ceases to provide IHC, recommend the allocation of places to other services able to meet the care needs of the families at the service to provide IHC.

### 3.2.3. Approved Providers of IHC Services

Approved Providers of IHC Services will:

- register IHC Services with the IHC Support Agency in the relevant jurisdiction
- engage qualified IHC educators to deliver IHC to families
- ensure existing educators have registered through PRODA
- provide details of families on waiting lists to IHC Support Agencies.

### 3.2.4. Department of Education, Skills and Employment

The department will:

- publish the initial distribution of IHC places to each jurisdiction for service delivery in 2018-19 – this will reflect the expected utilisation as at 2 July 2018
- advise IHC Support Agencies of their initial and target distribution of IHC places.

## 3.3. Operation of the IHC program

### 3.3.1. Families

Families wishing to test eligibility for IHC will need to **contact an IHC Support Agency to discuss their needs**. Discussions can be held over the phone. The purpose of the discussion will ascertain the family's eligibility for IHC.

Families will need to:

- lodge a CCS claim (if they have not already completed this step) to test their CCS eligibility as this is a pre-requisite to accessing IHC. Claims must be lodged to Centrelink through an individual's MyGov account
- share all relevant information with the IHC Support Agency to assist them in preparing a Family Management Plan to determine whether the family meets the eligibility criteria for IHC
- provide the documentary evidence required by the IHC Support Agency
- consider the suitability of the IHC Services recommended to them by the IHC Support Agency (the IHC Support Agency should, where possible, ensure the family has a choice of services)
- review the Complying Written Arrangement (CWA) prepared by the IHC Service
- indicate to the IHC Service their preference for the nominated child for IHC sessions of care (the IHC Service will **enrol children in IHC and nominate an eligible child** for each session of care)
- notify the IHC Support Agency (and Services Australia through MyGov) of any change of their circumstances that will affect their eligibility for IHC.


### 3.3.2. IHC Support Agencies

The processes that IHC Support Agencies undertake to support families are to:

1. **assess whether a family meets the eligibility criteria for IHC** – the IHC Support Agency will work with the family to verify evidence of specific needs that make the family eligible for IHC sessions, including identifying other support programs that may assist the family.
2. **develop a Family Management Plan** – the IHC Support Agency will work with the family to develop a Family Management Plan that documents the agreed approach to addressing the needs of the family including IHC, other approved child care services where appropriate and other support programs that are applicable. Each Family Management Plan will have a review period for the plan documented when it is created.
3. **match family with IHC Service** – the IHC Support Agency will match the family with an appropriate IHC Service to deliver care; service delivery arrangements will take into account the family's requirements outlined in the Family Management Plan. Where possible, the IHC Support Agency will ensure the family has a choice of IHC Services, and negotiate with the services to ensure a preferred educator is engaged to provide care. The IHC Support Agency will maintain a register of IHC Services providing care in their state/territory and publish their contact details on its website to assist families.
4. **allocate and reduce places to IHC Services for families** – the IHC Support Agency will allocate and reduce IHC places to services to meet the families' early childhood development and education and care requirements. The IHC Support Agencies must take into account the maximum number of hours of subsidised care a family is entitled to in the allocation of places to a service with respect to that particular family.
5. **review Family Management Plans** – on a quarterly basis (at minimum) or as required, the IHC Support Agency will review all Family Management Plans to ensure that the IHC arrangements are still appropriate for the families' current needs.
6. **advocate for families** – the IHC Support Agency will primarily advocate for the needs of families, to help them find care arrangements that are appropriate for their circumstances. This includes identifying other support services required for the family to access mainstream child care, wherever possible.

IHC Support Agencies also carry out processes on behalf of the department to ensure the proper management of the IHC program, including:

1. **monitoring the integrity of the care type** – IHC Support Agencies will regularly review the IHC arrangements within their jurisdiction to ensure that IHC is being delivered within the policy framework. The policy framework for the IHC program and service delivery is outlined in the [In Home Care National Guidelines](#). The key principles for IHC are to:
  - focus service delivery primarily on early childhood education and care – by establishing referral pathways to support services, the IHC Support Agencies will ensure the subsidised care provided through the IHC program has a clear focus on early childhood development and meets the education and care needs of families

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- ensure consistency in the assessment of families' eligibility for IHC, to ensure IHC is targeted at those who most need it. It is expected the Community of Practice discussions amongst the IHC Support Agencies will help ensure consistency in the assessment of the eligibility criteria
  - support families to transition to other approved child care services where appropriate – IHC may be offered in combination with the other approved child care service types. Where one of the children requires IHC due to complex needs, it may be possible for the other children in the family to access other types of child care. Where appropriate, the IHC Support Agencies must assist families in accessing other types of child care services by brokering the best outcomes for the family and each of the children in the family receiving IHC
  - improve consistency in service delivery at a national level – by developing good working relationships with the IHC Services and through the community of practice for educators, IHC Support Agencies could help ensure consistency in the approach to service delivery and the quality of service delivery. While service delivery arrangements will be tailored to meet the requirements of individual families, the IHC Support Agencies have a key role in promoting the quality of service delivery, and support the department in monitoring quality
  - promote good practices through their interaction with IHC Services and the Community of Practice of IHC educators will help enhance the quality of care
  - establish referral pathways to support services, where required.
2. **complaints handling** – the IHC Support Agency will be the first point-of-call for families, IHC Services, and IHC educators about the IHC program, particularly for complaints. IHC Support Agencies are responsible for developing a complaints handling process for their jurisdiction. Complaints in relation to an IHC Support Agency will need to be sent directly to the department by emailing to [inhomecare@dese.gov.au](mailto:inhomecare@dese.gov.au)
  3. **incident reporting** – in all instances, Providers of IHC Services are responsible for reporting serious incidents to the department within 24 hours, refer [section 4.2.2](#). The IHC Support Agencies will report to the department any serious incidents that they become aware of, and support the department in investigating serious incidents. The IHC Support Agencies are required to maintain a record of incidents reported to them and provide a report to the department, which includes the number and nature of incidents of accidents and/or injuries and the action taken by the relevant educator and/or IHC Service. IHC Support Agencies must comply with state-based Child Protection Laws and mandatory reporting requirements under the Commonwealth, state and territory legislation.
  4. **report quarterly on allocation of places** – the IHC Support Agencies will report the number of IHC places allocated to IHC Services in their jurisdiction each quarter through their quarterly reporting processes, including changes in the quarter.
  5. **report identified matters of potential non-compliance** – the IHC Support Agency must report any non-compliance issues that they become aware of to their corresponding department state network office.

6. **monitor equitable allocation of places in IHC** – IHC Support Agencies will monitor that the investment in the IHC program is meeting the policy objectives of the program.
7. **review allocation of IHC places** – the IHC Support Agencies will review allocation of IHC places across their jurisdictions annually and as required.

### 3.3.3. Approved Providers of IHC Services

Approved Providers need to remain aware of and adhere with their obligations under the Family Assistance Law. This section outlines IHC program matters only. Providers can also refer to the [Child Care Provider Handbook](#) for more information.

Approved Providers of IHC Services are required to register with the IHC Support Agency servicing their state or territory before they are able to be allocated IHC places and provide service delivery.

When a provider wants to cease delivering IHC, they need to advise both the department and the IHC Support Agency before they advise families. Refer to section 7, Record Keeping and Notifications of the [Child Care Provider Handbook](#).

The processes that Approved Providers of IHC Services undertake specifically for IHC that would supplement the processes they are undertaking as part of meeting their requirements and obligations for administering CCS and ACCS are to:

- **direct families in need of IHC to the IHC Support Agency** in their jurisdiction – all families inquiring about IHC should be directed to the IHC Support Agency so that their eligibility for the program can be determined
- determine the early childhood education and care requirements with the individual / family in the home – the educator will provide education and care learning program
- **Home Safety Assessments** – IHC Services will need to make a thorough risk assessment of the family home when they are negotiating arrangements for care. Refer to the [In Home Care National Guidelines](#) section 3.4.3.

### 3.3.4. Engagement with IHC Support Agencies

It is a condition of ongoing approval that an approved provider of an IHC Service must undertake to:

- only enrol a child for IHC after receiving a referral from an IHC Support Agency
- only provide care within the allocation of places given to an IHC Service
- inform IHC Support Agencies when a child ceases to be enrolled at the service within seven days of cessation
- provide reasonable assistance to and cooperate with IHC Support Agencies consistently with furthering the purpose of their role as set out in the [In Home Care National Guidelines](#)
- report serious incidents to the department within 24 hours (noting they should also comply with relevant state law).

### 3.3.5. Incident Reporting

Providers of IHC Services must implement appropriate arrangements to manage serious incidents. They must comply with state-based Child Protection Laws and mandatory reporting requirements under the Commonwealth, state and territory legislation. This includes (without limitation) notifying the department in writing within 24 hours after any of the following:

- a serious incident occurs
- a circumstance occurs that could have resulted in the occurrence of a serious incident.

The following incidents are serious incidents:


- the death of a child while being cared for by the service or as a result of an incident that occurred while being cared for by the service
- any incident involving injury, harm, trauma to, or illness of, a child while being cared for by the service for which:
  - the attention of a medical practitioner was sought, or ought reasonably to have been sought; or the child attended, or ought reasonably to have attended, a hospital
  - any incident for which the attendance of emergency services at premises where care is usually provided is sought, or ought reasonably to have been sought
- a child being cared for:
  - is missing
  - appears to have been taken or removed from the premises where the service provides the care in a manner that would contravene the Education and Care Services National Regulations, regardless of whether the regulations apply
  - is accidentally locked in or locked out of the premises where the care is being provided or any part of those premises, including vehicles
- any other incident that would be required to be reported to a regulator under any applicable Work Health and Safety laws.

IHC Services must report any of the above serious incidents to the department through the IHC mailbox, [inhomecare@dese.gov.au](mailto:inhomecare@dese.gov.au), by completing the IHC Serious Incident Report.

The [IHC Serious Incident Report](#) form is located on the department's website.

### 3.3.6. Location of care

IHC must be provided only at the family home of the individual who is eligible for CCS, except in exceptional circumstances. For example, where the family relocates temporarily to another location and IHC is still required.



The Approved Provider for an IHC Service must seek approval from the department in writing prior to providing care at an alternate location. A request for approval must detail:

- the reason why the family home is not an acceptable location
- the alternate location
- the exceptional circumstance which requires care to be provided at the alternate location
- the timeframe that the care will be provided in this location
- confirmation that the alternate location is appropriate i.e. safety assessment check.

### 3.3.7. Insurance

An Approved Provider for an IHC Service must, at all times, have in place the following:

- workers compensation insurance in relation to the relevant IHC Service as required by law
- a current policy of insurance providing adequate cover for the relevant IHC Service against public liability with a minimum cover of \$10,000,000.

### 3.3.8. IHC sessions of care

All children reported by an IHC provider in an IHC session of care must meet the eligibility requirements for IHC. This includes an individual's requirement to be eligible for CCS and for the children to meet the requirements for CCS. If one child in the session does not meet the CCS requirements then it is not a valid session of care, and no subsidy will be paid on behalf of the family.

For example, if one child is attending schooling for part of the day or is an older child (and therefore not meeting the requirements for CCS), this child should not be recorded in the session of care. IHC Services may need to consider reporting separate sessions to ensure only children meeting the CCS requirements are included in each session, refer example 3 below.

For information on the obligations to report actual attendance times, refer to *Managing and reporting session of care* section in the [Child Care Provider Handbook](#).

### 3.3.9. Nominated child

As IHC has a **family** CCS hourly rate cap, rather than a per child CCS hourly rate cap, for reporting purposes only, one child in a family must be identified as the 'nominated child' for each session of care. The nominated child can be any child that meets the eligibility criteria for IHC in the session of care.

The nominated child is the only child in the session of care against which the fee is recorded. When a service submits a session of care report, the fee charged by the service for the session of care must be reported in full against the nominated child and a \$0 rate must be reported against the other eligible children receiving care in that session.

The family should inform the IHC Service which child is to be the nominated child for each session of care when agreeing on IHC enrolments with the IHC Service. Generally, this would be the same child for each session unless the child is nearing the annual subsidy cap (refer [section 3.3.10](#)).

### 3.3.10. The annual subsidy cap in relation to the nominated child

The annual subsidy cap for CCS applies to all approved child care service types. Only families on incomes \$189,390<sup>2</sup> or more are subject to the annual subsidy cap. The subsidy cap is income dependent and does not apply to all families.

ACCS is not included in the calculation of the annual subsidy cap. Therefore, if one of the children in a session of care is eligible for ACCS, this child could be selected as the nominated child, with no impact on the child's annual subsidy cap.

When there are multiple children in the family receiving IHC and the nominated child reaches or nears the annual cap, the family should request the IHC Service to nominate another CCS eligible child for future sessions of care. The IHC Service should seek the family's preference when enrolling a child as the nominated child for each sessions of care.

Care should be taken when nominating a child for sessions of care throughout the year particularly as the CCS will be reported in full against this child.

For example, a child accessing IHC after hours and Family Day Care during the day will reach the annual cap faster than a school-age child accessing IHC only before and after school hours. In this circumstance, the school-age child should be selected as the nominated child for the sessions of care they are attending.

When developing the Family Management Plan the nomination child process should be explained to families so that they are aware of impact of the nomination process on reaching the annual subsidy cap.

#### Example 3

Family 3 uses In Home Care from 8am to 6pm for their two children:

- Child 1 requires IHC from 8am to 6pm
- Child 2 attends school from 9am to 3pm and requires IHC before and after school.

Assumptions:

- An individual is eligible for CCS
- The combined family income is \$200,000 which means the family is subject to the annual subsidy cap of \$10,560 per child

If the family asks the IHC Service to select Child 1 as the nominated child for all sessions of care, Child 1 may reach the annual cap before the end of the year.

To maximise the amount of CCS the family can claim over the year, the family should ask the IHC Service to select Child 2 as the nominated child during the times that this child is in care, before and after school. For the remaining hours during the day, Child 1 is selected as the nominated child.



### Example 3

The IHC Service enters three sessions of care for each day:

Session 1: 8am to 9am – Child 2 is the nominated child

Session 2: 9am to 3pm – Child 1 is the nominated child

Session 3: 3pm to 6pm – Child 2 is the nominated child

### 3.3.11. IHC educators

Requirements for IHC educators including, child ratios, Nationally Coordinated Criminal History Check and educator age requirements for IHC are detailed in section 3.6 of the [In Home Care National Guidelines](#).

#### Qualification requirements for educators

IHC educators are required to have a minimum Certificate III level qualification in a relevant course, or be working towards a relevant qualification, with a major focus on Early Childhood Education, to ensure consistency in the quality of care being provided.


Acceptable qualifications for IHC educators are detailed in section 3.6 of the [In Home Care National Guidelines](#).

IHC Providers are required to maintain records of educator qualifications and evidence of whether an educator is working towards an acceptable qualification. Providers must produce records of educator qualifications upon request by the department. Providers should assist educators in attaining the required qualifications including gaining recognition of prior learning.

IHC Support Agencies who are also Registered Training Organisations, may be able to support IHC educators across the various jurisdictions in acquiring the required qualifications.

There are transitional provisions outlined in section 3.6.1 of the IHC National Guidelines, that apply until 31 December 2021 for IHC educators in remote or very remote areas that permit an IHC educator to provide care without meeting the minimum qualification requirements. The following illustrates how the provision for an unqualified educator to be supported by a qualified educator may work in practice:

- Staff employed by the IHC Service will need to have the required qualification (a Certificate III in a relevant course, at a minimum) and work with the unqualified IHC educator to develop an educational program that meets the early childhood development and education and care needs of the children receiving family. The qualified staff also review the progress of each of these children with respect to the educational program.
- These activities may involve interacting with the educator and the children. If a family receives IHC for five days a week, this interaction would need to occur for one day a week on average (however, any such interaction must occur at least on a monthly basis).

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- The interaction may be face-to-face or via Skype. As the IHC educator has access to a qualified staff member who is involved in the education and care of the children receiving IHC, the educator would have met the qualification requirements for IHC.
  - IHC educators are required to keep a record of the interactions with qualified educators.

### Providing care for a family member

The IHC educator must not be a family member, except in limited circumstances, as described in the *Child Care Subsidy Minister's Rules*. There is no entitlement to the CCS or ACCS where an IHC educator cares for:

- their, or their partner's, child, including a foster care child, adopted child, kinship child or child for which they otherwise have legal responsibility, or
- their, or their partner's: brother, sister, half-brother or half-sister, step-brother or step-sister, or
- their, or their partner's: niece, nephew, cousin, grandchild or great grandchild.

The IHC program is designed to support the provision of early childhood education and care only to members of the one (including blended) family in their home. IHC educators are not allowed to bring their own children to the care environment while they are providing IHC sessions of care for other children.

For families that live in very remote areas only and are unable to find an IHC educator, in certain circumstances a qualified, suitable relative can be an IHC educator. The children can be the IHC educator's (or their partner's) niece, nephew, cousin, grandchild or great grandchild. This exemption also includes foster care arrangements, to ensure children living with a foster family in very remote areas, who cannot reasonably access other IHC educators, may be provided with IHC.

Where these circumstances exist, the family needs to contact the IHC Support Agency servicing their jurisdiction and put forward their case. The IHC Support Agency's recommendation supporting this case is required before the IHC educator can be engaged by an IHC Service and care commences. The IHC Support Agency must keep a record of the case made by the family and their recommendation to support or not.

### 3.3.12. The Department of Education, Skills and Employment

The department will administer the IHC program through:

- setting and managing the distribution of IHC places nationally, reviewing distribution of places annually, or as required
- allocation of places to services in limited exceptional circumstances, taking into account the recommendations made by the IHC Support Agencies
- performance management of IHC Support Agencies
- monitoring compliance of Approved Providers of IHC Services in accordance with the Family Assistance Law – should a service have a history of non-compliance with the Family Assistance Law, the department will advise the relevant IHC Support Agency

- investigating incidents in IHC that are reported by the IHC Providers, IHC Support Agencies or other sources
- evaluating the IHC program after two years' operation to determine the extent to which the program is meeting its objectives.

The department will support a community of practice amongst the IHC Support Agencies. This will help to:

- foster a nationally consistent approach to program delivery, including the interpretation of IHC eligibility criteria
- promote collaboration amongst IHC Support Agencies and support a peer review process
- hold IHC program-related meetings with IHC Support Agencies (expected to be twice a year, either face-to-face or via teleconference).

The department will carry out processes specific to IHC, including the following:

- **monitor equitable allocation of places in IHC** – using the quarterly reports from IHC Support Agencies and data drawn from the Child Care Subsidy System, the department will monitor that the investment in the IHC program is meeting the policy objectives of the program
- **review allocation of IHC places** – using the quarterly reports from IHC Support Agencies and data drawn from the Child Care Subsidy System, the department will review allocation of IHC places across the nation annually and as required
- **advise IHC Support Agencies of annual distribution of places** – each year or as required, the department will review the distribution of IHC places nationally and advise the IHC Support Agencies a revised distribution of IHC places to each jurisdiction.

The department may investigate incidents notified by the IHC Services and complaints received from the various parties exercising its powers under the Family Assistance Law and the *Regulatory Powers (Standard Provisions) Act 2014*.

Services Australia will assess eligibility for CCS and ACCS and administer payments through the Child Care Subsidy System.

### 3.3.13. Quality

As a condition of continued approval, the approved providers of IHC Services are required, under the [Child Care Subsidy Minister's Rules 2017](#), to have a commitment to high quality of child care.


Approved Providers of IHC Services must be equipped to provide high quality child care appropriate to the needs of families and the community having regard to the provider's ability and commitment to:

- provide a tailored, individual education program based on each child's knowledge, ideas, culture, abilities and interests
  - the Family Management Plan will capture the early childhood education and care requirements of each of the children receiving IHC in the family

- the Family Management Plan will also capture any requirements for additional support services by the family and/or children
- the Family Management Plan should inform the development of a tailored, individual education programs including any supervision of distance education (which is not subsidised under IHC)
- a review of the educational program by the IHC Service/educator will inform the educational development of children and will support discussion with the family
- develop a program that acknowledges and strengthens the cultural identity of children to whom care is provided
  - the Family Management Plan will seek to capture details pertaining to the cultural identity of the family/children
- ensure children are adequately supervised at all times
  - the IHC educator to child ratio is set to ensure that children are adequately supervised at all times. In discussing their expectations of the IHC educator to assist with the development of the Family Management Plan, the family will be asked to provide sufficient details about the extent of supervision required by each of the children receiving IHC
- ensure reasonable precautions are taken to protect children from harm or injury and any hazard likely to cause harm or injury
- the IHC Service must ensure that the IHC educator has a current first aid qualification; where there are more than one educators providing IHC in the family home, the service must ensure that at least one IHC educator who is caring for children at residential premises holds a current first aid qualification.

The IHC Services are also required to:

- provide the family with the Service's written policies, procedures and standard practices
- ensure the safety of children receiving IHC, including during transportation, and that educators and other staff who have regular contact with these children are fit and proper persons
- maintain medication schedules for children prescribed by a medical practitioner and written authorisation by the parent where the educator is required to administer the medication
- ensure the IHC educator has a list of relevant state/territory authorities who should be notified under the state/territory legislation
- maintain a record of illnesses or injury which have been notified to the relevant authorities
- seek appropriate permissions from the family and retain these permissions
- ensure the IHC educator has the latest Family Management Plan following quarterly reviews by the IHC Support Agency

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- ensure the IHC educator has access to service staff during business hours and in the case of an emergency (by providing an after-hours contact detail).

The IHC educators are required to:

- meet the IHC qualification requirements, and have a sound understanding of early childhood development and the child's education and care and other support needs; and participate in professional development activities offered by the IHC Service and participate in the communities of practice hosted by the IHC Support Agency
- nurture children's health and safety; IHC educators must be aware of each child's symptoms, allergies and medical issues and procedures to be followed in these circumstances
- hold a current First Aid Certificate, and store medications and the First Aid Kit appropriately
- administer medications as prescribed in the medication schedule authorised by a medical practitioner, and maintain a record of the administration of the medication
- develop a suitable learning program for each of the children receiving IHC, and record each child's progress against the program and discuss the progress with the family
  - the written program should reflect the education and care requirements outlined in the Family Management Plan;
  - the educational program should be designed to help develop the child's social, emotional, physical and creative abilities, and should promote each child's engagement in self-directed learning/play and independence
- follow safety procedures during excursions and travel.

#### Notification of incidents

- The IHC educator must notify the relevant state or territory authorities and the IHC Service of any notifiable incident within 24 hours.
- The IHC Service must notify the department of any notifiable incident within 24 hours of the incident occurring.
- The [IHC Serious Incident report](#) form can be found on the department's website

## 4. IHC Support Agencies

The IHC Support Agencies will work closely with Approved Providers of IHC Services to facilitate high quality care for families who meet the eligibility criteria using a consistent approach to assessing IHC eligibility nationally.

### 4.1. Support for families

#### 4.1.1. Assess families against the IHC eligibility criteria

IHC Support Agencies assess families against the IHC eligibility criteria to determine if they are eligible for IHC. IHC Support Agencies should ensure that eligibility criteria is applied consistently across all families in their jurisdiction and work with other IHC Support Agencies to ensure the eligibility criteria are applied consistently at a national level. IHC Support Agencies must ensure that sufficient evidence is gathered to support their assessment of a family and is retained by the IHC Support Agency.

**Table 5: Examples of appropriate documentary evidence to establish eligibility**

| Eligibility Criteria   | Examples of documentary evidence  |
|--|---|
| Child(ren) are eligible for CCS  | <ul style="list-style-type: none"> <li>Letter of Assessment from Centrelink. Parents or carers' can obtain via their MyGov account once assessed for CCS eligibility.</li> </ul>  |
| No other kinds of approved child care are suitable or available                        | <ul style="list-style-type: none"> <li>Written statements or emails from approved child care services expressing the unavailability of places, or the inability to provide service at the time needed by the family, or the inability to provide services that meet the child care needs of the family.</li> <li>Evidence from experts or authorities expressing that other kinds of approved child care are not suitable.</li> </ul> |
| Parents or carers' are working non-standard or variable hours                          | <ul style="list-style-type: none"> <li>Statement from parents or carers' employer of employment conditions and typical working hours; or a statement from the employer indicating the nature of the work and variability in working hours.</li> <li>Copy of rosters (weekly, fortnightly, monthly or quarterly).</li> </ul>   |
| Parents or carers' are geographically isolated from other types of approved child care | <ul style="list-style-type: none"> <li>Indication of distance to the closest approved child care service that might otherwise have met the family's requirements; for example, advice from a FDC Coordination Unit or a Centre-based Day Care service to this effect.</li> <li>Statutory declaration indicating distance to the closest approved child care service prohibits attendance at the service.</li> </ul>                   |

| Eligibility Criteria                        | Examples of documentary evidence  |
|---|---|
| The family has challenging or complex needs | <ul style="list-style-type: none"> <li>• Certification from relevant authorities/professionals. This could include medical certifications for serious illnesses or disabilities that create challenging needs.</li> <li>• Statutory declaration of family circumstances that outline complex and/or challenging needs.</li> <li>• Directives from courts or other authorities that create challenging needs.</li> </ul> |

### 4.1.2. Families geographically isolated from other types of child care

Families accessing IHC because of the remoteness of their location must be able to provide documentary evidence that their location prevents them from accessing other approved child care services.

IHC Support Agencies will use the Accessibility and Remoteness Index of Australia (ARIA+) (2016) as one measure to guide the consideration of remoteness and isolation from approved child care services. Families that live in a location designated as Very Remote, Remote, or Moderately Accessible (Outer Regional) in the ARIA+ (2016) measure may be able to demonstrate that they are isolated from approved child care services primarily based on the distance from their home to the nearest available, appropriate approved child care service. However, families will be considered on case-by-case basis with consideration of a family’s proximity to the nearest child care service.

### 4.1.3. Families with complex or challenging needs

IHC Support Agencies have a role in ensuring the integrity of the care type by ensuring IHC supports the provision of early childhood education and care in the home and is not provided to subsidise medical care, health care or disability support.

IHC has a focus on early childhood development and education and care, and may complement health or disability support received through other government funded and community-based programs. For example, a child with additional needs may receive disability support through the National Disability Insurance Scheme (NDIS) or a parent may receive parental support through a community based program. The family, if they are eligible for the CCS and meet the eligibility criteria for IHC, may also be able to receive IHC. It is the role of the IHC Support Agencies to establish referral pathways to support the family in accessing other support services where required.

Families with circumstances that include one or more of the following may meet the eligibility criteria for IHC because of complex and/or challenging needs. Families may experience ongoing or temporary, situations, for example:

- a child with additional needs whose early childhood education and care requirements cannot be catered for in another approved child care setting
- a parent is undergoing treatment for a serious illness, which prohibits the children from accessing other approved child care types due to the likelihood of the parent being immunocompromised

- the child and/or siblings have a serious illness and other types of approved child care are not appropriate due to the risk of transmitting illness
- the whole family is experiencing the challenging situation; e.g. their house has burnt down in a bushfire, the family relocates to temporary accommodation and there are no child care places available in that area.

A family may have complex needs that are not related to medical or disability needs.

Complex needs depend on the individual and their situation and may appear as ‘multiple unmet needs’ for example, families experiencing a combination of issues including professional, medical, social issues that render the other types of approved child care inappropriate. These families may also require other support services in addition to early childhood education and care. IHC Support Agencies have a key role in brokering appropriate care arrangements for the family including child care and other support services.

It is important that the family is asked to consider whether mainstream child care service types may become appropriate should the family be able to access the necessary support services.

#### 4.1.4. Family Management Plan

The purpose of a Family Management Plan is to:


- record the family’s unique circumstances and child care requirements
- identify and record if a family requires additional support through other relevant programs
- develop a strategy to transition the family to other approved child care service types over time, where available and appropriate.

The Family Management Plan will capture all relevant information relating to the family’s early childhood education and care needs including education and care needs of each of the children requiring IHC. This information is complementary to the Complying Written Arrangement created for the family by the Approved Provider, and is used to help the IHC Support Agency and IHC Services to determine what support the family needs.

The Family Management Plan will include (but not limited to):

- the age of the children and relevant information about the care required
- the sessions/hours of care required per fortnight including education and care to be provided in the family home and where relevant, hours of other types of approved child care accessed
- any special needs of the children, and additional support services being accessed/needed from other appropriate sources such as disability support and allied health services
- for families that require assistance with the provision of distance education - hours of formal schooling for each of the children in the family receiving IHC, where applicable (noting that these hours cannot be claimed for the Child Care Subsidy or Additional Child Care Subsidy, (refer section 2.5.2 of the [IHC National Guidelines](#)) and hours of supervised homework
- the family’s expectations of the IHC educator



- 
- confirmation that the IHC Support Agency has explained the nominated child process to the family
  - period of IHC needed
  - details of other children in the family home not requiring IHC.

The Family Management Plan will be a shared resource for use by the family, IHC Support Agency, Approved Provider of IHC Services, and IHC educator to foster a common understanding of the family's requirements. All these parties have a shared responsibility to exchange information about any changes in family's current circumstances, subject to privacy requirements.

Personal details contained in the Family Management Plan will be protected under the *Privacy Act 1988* ("the Privacy Act"). The department, IHC Services, the IHC Support Agency and IHC educators will be required to secure that information and only use it for the purpose of providing IHC.

See the [Family Management Plan template](#) on the website.

#### 4.1.5. Matching families with services

IHC Support Agencies must match families meeting the IHC eligibility criteria with IHC Services that have the capacity to meet their needs. If required, IHC Support Agencies will then allocate IHC places to the matched IHC Services.

IHC Support Agencies should match families to IHC Services on the basis of:

- IHC educators available through the IHC Service
- proximity to the family, particularly of the IHC educator to be assigned to the work (it may be necessary for the educator to board with the family, however, this must be through private arrangement between the family and the educator).

Preference should be given to IHC Services that are aware of the characteristics of other services that the family might also be receiving. Where more than one IHC Service and/or IHC educator is available to meet the needs of the family, the family should be given a choice of service/educator. Where more than one agreeable option for IHC Service exists, IHC Support Agencies should take into account the equitable distribution of places among IHC Services.

If the family wishes to be matched to another service, the IHC Support Agency will take into consideration, the issues raised by the family and match the family to another service providing care in that location. If there are no other services available that meet the family's needs, then the family will be placed on the waiting list.

Families who wish to nominate their own educator, or retain an existing educator, may be able to do so, provided the educator meets the requirements for IHC and is engaged by an approved IHC Service.

#### 4.1.6. Quarterly Review of Family Management Plans

The IHC Support Agency must review all Family Management Plans that are due for a review each quarter. Family Management Plans are reviewed to establish that the care arrangements outlined in the plans are still appropriate. This review can be face-to-face or conducted via an email or phone. The IHC Support Agency may talk to the family and/or the service/educator depending on the family's circumstances. When creating or revising a Family Management Plan, the IHC Support Agency must identify a date when the plan is reviewed. Any changes to the allocated places arising from these reviews must be included in the Quarterly Report that the IHC Support Agency delivers to the department.

Family Management Plans should be revised whenever a family identifies a change in its circumstances, or when an IHC Service indicates that it cannot continue the arrangements that are in place, or if the family and its IHC Service are in dispute about the services that are to be provided.

#### 4.1.7. Change in family circumstance

If there is any change in the family's circumstances, the **family** must notify the IHC Support Agency and update their details with Services Australia via their MyGov account, if necessary.

A change in the family's circumstances could affect:

- the child care assistance the family receives, and/or
- their eligibility for IHC.

Where a change in family circumstances affects the family's eligibility for IHC, the IHC Support Agency should review the change and determine the effect of the change on the family's IHC arrangements.

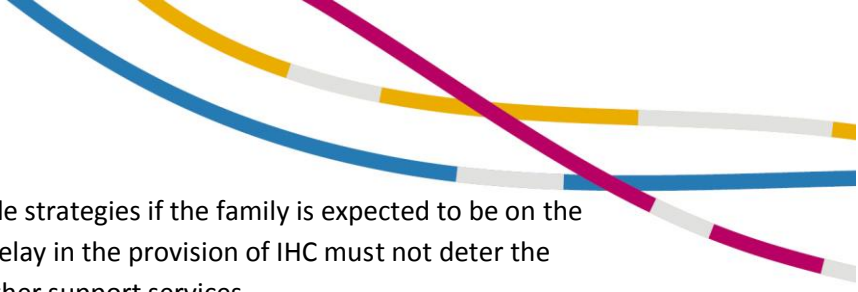
#### 4.1.8. Family waiting list

Families will be matched to services on a 'first come first served' principle. Families will be placed on a waiting list managed by the IHC Support Agency if there are:

- no IHC places available in the jurisdiction, or
- no IHC Services or educators available that have the capacity to provide quality education and care.

IHC Support Agencies must review their waiting list whenever IHC places are reduced or newly distributed in their jurisdiction. Families on the waiting list should be matched with IHC Services on a first-come, first-served basis, taking into account the location of the family, the location of service delivery by available IHC Services and 'Managing child care places' as outlined in the [Child Care Provider Handbook](#).

IHC Support Agencies are required to review the Family Management Plans of the families on the waiting list every quarter. This may be to verify if they still meet the eligibility criteria for IHC and their care needs. The review can be conducted face-to-face or undertaken via telephone or email.



The IHC Support Agency must canvass possible strategies if the family is expected to be on the waiting list for longer than three months. A delay in the provision of IHC must not deter the IHC Support Agency in referring families to other support services.

#### 4.1.9. Families exiting the program

There are several likely circumstances when a family will exit the IHC program:

- other approved child care service types becoming available (Centre-based Day Care, FDC or OSHC or a combination of these that meet the family's requirements)
- the circumstances for which the family was provided IHC change, and the family no longer meets the IHC eligibility criteria
- the family's circumstances may change because (but not limited to):
  - the family may move location that allows them to find available mainstream child care
  - income or activity levels may change that impacts their entitlement to the CCS
  - the children are no longer 13 years or under, now attend secondary school
  - the family's needs change in a way that other mainstream child care arrangements are now appropriate
  - child care options in the locality of the family change – mainstream child care options that were previously unavailable (i.e. fully-booked), or new child care options become available and these service(s) could meet the needs of the family.


These circumstances may be identified through the family volunteering the information, the IHC Service reporting the changes, or the IHC Support Agency reviewing the Family Management Plan. The IHC Service must advise the department and the IHC Support Agency, of the cessation of the IHC enrolment in the Child Care Subsidy System, within seven days of the family ceasing to access care.

#### 4.1.10. IHC Services ceasing to provide IHC

If a service ceases to provide IHC, families accessing IHC through the service will be prioritised to receive care through another IHC Service. The IHC Support Agency must work to match the family, and where required and possible, the IHC Educator with another IHC Service or other approved child care service as if that family was the first family on the IHC Support Agency's waiting list.

The IHC Support Agency will recommend to the department that Places allocated to the service ceasing to provide IHC will be allocated to another IHC Service(s), by the IHC Support Agency, in order to provide care for displaced families, if required. These places will not be reallocated where a need has not been identified.

The IHC Support Agency should ensure there is a fair and equitable process for the reallocation of places from the ceasing service to other services. This may involve inviting all other Approved Providers of services to apply for the additional places. In re-allocating the places to other service(s), the IHC Support Agency should consider the capacity of services to provide a seamless transition with minimal disruption for the families and educators.



If no suitable arrangement can be made for the family, the family is placed on the IHC Support Agency waiting list. If the family is placed on the waiting list, the places reduced from the closing IHC Service may be available for further allocation.

#### 4.1.11. Support to access other types of approved child care

IHC Support Agencies should, wherever possible, support families to find appropriate and available places in a mainstream approved child care centre. To enable this, IHC Support Agencies must have an awareness of other approved child care services operating in their jurisdiction. [Child Care Finder](#) can be used as a tool in finding child care services with available places for each service.

In developing the Family Management Plan, IHC Support Agencies must identify all appropriate child care options within an attainable distance from the family home. Families unable to access other child care options because of place availability must be on a waiting list for each of these child care services or provide a case as to why they cannot access these services.

Where a Centre-based Day Care service is not appropriate because of the additional needs of a child, the IHC Support Agency could canvass with the Centre-based Day Care service the Inclusion Support Programme (ISP) as an option. The ISP assists early childhood and child care services to include children with additional needs by providing tailored inclusion advice and support from Inclusion Agencies. The ISP also provides specialist equipment and funding to address inclusion barriers where required, so that all children are able to participate meaningfully and experience a true sense of belonging within the program.

For more information on ISP, see “Inclusion Support Program” in the [Child Care Provider Handbook](#) and the [Inclusion Support page on the department’s web site](#).


#### 4.1.12. Referral to other government funded or community support services

IHC Support Agencies should ensure that families are aware of the range of services available to them. The IHC Support Agencies will establish referral pathways to support families in accessing additional support needs. This may include disability support, maternal and child health services, and support services provided through other government funded or community based programs. For example, a shift-working family may require transport services for children attending schools in addition to IHC for part of the day or a family with complex needs may require health care services or disability support in addition to IHC.

If the NDIS is one of the pathways identified, the IHC Support Agency will refer the family to an NDIS provider that can meet their needs. The family will be able to continue to receive the support for early childhood education and care in the home from the IHC Service while those other supports are planned and mobilised.

The IHC Support Agencies will be required to establish a comprehensive suite of referral pathways to assist families in accessing additional support services as required. Services other than early childhood education and care will not be subsidised through CCS or ACCS.

The IHC Support Agency may broker additional support as private arrangements which are not subsidised through CCS or ACCS between the families and IHC Services, where the IHC Service/educator has the capacity to provide these additional services.



By referring families to other programs that do not include early childhood education and care, the family may be able to receive a combination of support services that enables them to access mainstream child care services.

## 4.2. Working with IHC Services

The IHC Support Agency will support IHC Services by:

- impartially and consistently applying the IHC eligibility criteria so that IHC Services are helping those families that are genuinely in need of the service
- providing Family Management Plans to enable suitable matching to educators.

### 4.2.1. Monitoring adherence to guidelines

An approved provider of an IHC Service must undertake to operate in a manner consistent with the [IHC National Guidelines](#). The regular review of Family Management Plans should include inquiries into the standard of care that the IHC Service is delivering.

### 4.2.2. Serious incidents

Where an IHC Support Agency becomes aware of a serious incident that has not been reported by the IHC Service to the department, the IHC Support Agency should report the incident to the department as soon as possible, and support the department in any investigation.

## 4.3. Supporting educators

The IHC Support Agency is expected to establish a Community of Practice among IHC educators employed by IHC Services providing care within their jurisdiction. A facilitated online forum for IHC educators could serve as a central element of the Community of Practice.

Through the Community of Practice for IHC educators, IHC Support Agencies might:

- make available resources for providing education and care in the family home and tips for working with families that have complex needs,
- share examples of best practice in meeting education and care needs from IHC educators within the community, and
- provide guidance on educational opportunities for IHC educators.

## 4.4. Other program requirements

### 4.4.1. Recommend IHC places to the Department

IHC Support Agencies are responsible for determining the allocation and reduction of IHC Places. However, in limited circumstances, IHC Approved Providers can apply directly to the department for either an increase or reduction in the number of IHC places allocated to the service. In such circumstances, the department will take into consideration the recommendation of the IHC Support Agency in making its decision.

### 4.4.2. Program monitoring

IHC Support Agencies will be responsible for maintaining accurate records relating to the delivery of the IHC program, in particular:

- a register of approved IHC Services in their jurisdiction
- a register of the IHC arrangements for which they have allocated IHC places, including how conflict of interests are handled
- the current allocation of IHC places in their jurisdiction and which arrangements those places support
- the timing of arrangements, particularly the commencement and finalisation dates for the IHC arrangements for which IHC places have been allocated
- a register of complaints received about the operation of IHC in their jurisdiction, including complaints about the IHC Support Agency
- a register of incidents reported to them from the operation of IHC in their jurisdiction.


They will report the details of these records to the department quarterly, and as significant changes occur, to allow the department to monitor the correct administration of the IHC program in the Child Care Subsidy System.

IHC Agencies have a role also in supporting the department in monitoring compliance and quality. IHC Support Agencies are required to report to the department any behaviour by IHC Services that they know or believe to be non-compliant within three business days. IHC Support Agencies are also required to support the department in monitoring the quality of service delivery.

### 4.4.3. Promoting the IHC program

IHC Support Agencies must promote IHC to families and relevant support services across their jurisdiction to ensure that families who cannot access other approved child care service types are aware that IHC may be an option for them.

Channels of promotion of the IHC program could include the IHC Support Agency website, word of mouth, social media, brochures or information flyers.



Examples of services to which IHC could be promoted include:

- peak bodies for shift working families
- rural and remote agencies/bodies
- social worker services including those based in hospitals
- child safety services
- disability services
- community support services
- domestic violence support services
- rehabilitation services
- other CCS approved child care services.

IHC Support Agencies have a key role in promoting the IHC program to support market development for IHC provision, particularly in areas with limited IHC service coverage. IHC Support Agencies should promote the program to existing Approved Providers that do not offer IHC as an option for expanding the child care service types they provide. For example, a provider of a FDC service or OSHC may be interested in offering the IHC service type.

[IHC Support Agency contact information](#) is available on the department's website.

#### What IHC Support Agencies should have on their website

The IHC Support Agency website should include the following information in relation to IHC:

- overview of the IHC program, including eligibility criteria and links to the department's website for the program
- IHC Services operating in the jurisdiction, including contact information and fees
- the process for accessing IHC
- resources for families and services
- verified contact details of support services
- any other resources as directed by the department.

#### 4.4.4. Working with other IHC Support Agencies

All IHC Support Agencies are part of a Community of Practice. IHC Support Agencies are expected to share their experiences, best practice techniques, and other insights from managing the IHC program in their jurisdiction with their peers in other jurisdictions.

#### 4.4.5. Handling complaints

IHC Support Agencies are the first point of contact for families and IHC Services, over time, for queries and complaints relating to the delivery of the IHC program. IHC policy complaints should be referred to the department. IHC Support Agencies have complaints-handling procedures and need to report both resolved and unresolved complaints to the department. Actions required would vary depending on who makes the complaint and the type of complaint. IHC Support Agencies must be able to handle complaints of the following nature:

- direct any complaint that indicates that a child or children are at risk to the relevant State Regulatory Authority and the department's state or territory office immediately
- families complaining about their IHC educator – IHC Support Agencies should refer the complaint to the IHC Service to resolve their concerns
- families complaining about their IHC Service – IHC Support Agencies should refer the complaint to the Approved Provider, and if unresolved refer the complaint to the department
- IHC educator complaining about a family – IHC Support Agencies should refer the complaint to the IHC Service, and monitor further developments in terms of resolution. The IHC Support Agency should act as an intermediary in this situation as the agency is the conduit between the family and the service
- IHC educator complaining about an IHC Service – IHC Support Agencies should act as an intermediary where appropriate however noting this is a matter to be resolved by the employer and the employee
- a family, an educator, an IHC Service or a Provider of a IHC Service, referral services or the public making complaints about an IHC Support Agency. These complaints should be initially referred to the relevant IHC Support Agency, through their formal complaints processes. If the complaint has not been addressed to the complainant's satisfaction, then it can be referred to the department by emailing [inhomecare@dese.gov.au](mailto:inhomecare@dese.gov.au)
- A key step in these procedures should be to filter complaints that should be handled by the department or Services Australia (concerning Families) and guide them to the contact channels in Table 6.

**Table 6: Complaints contact details for Child Care Payments and ICT**

|                             |  |
|-----------------------------|--|
| Families                    | Services Australia<br>1800 132 468<br><a href="http://www.servicesaustralia.gov.au/individuals/contact-us/complaints-and-feedback">www.servicesaustralia.gov.au/individuals/contact-us/complaints-and-feedback</a> |
| Providers and Services      | Department of Education, Skills and Employment<br>1300 667 276<br><a href="mailto:CCSHelpdesk@dese.gov.au">CCSHelpdesk@dese.gov.au</a>   |
| CCS Fraud or non-compliance | Department of Education, Skills and Employment<br>1800 664 231<br><a href="mailto:tipoffline@dese.gov.au">tipoffline@dese.gov.au</a>   |



IHC Support Agencies must report any signs of fraud or non-compliance detected in a complaint to the relevant departmental state or territory office immediately.

#### 4.4.6. Service travel reimbursement for family home visits

IHC Services are able to seek reimbursement for reasonable travel costs to visit the family home. The IHC Support Agency will process claims and administer payment for this travel reimbursement.

Travel claims can be made for the following:

- travel by car, air, rail or ferry
- overnight accommodation costs
- vehicle hire.

#### Capped Annual Budget by Jurisdiction

The amount of travel reimbursement claimed must not exceed the jurisdictional cap per financial year stated in the individual IHC Support Agency contracts, unless otherwise approved in writing, by the department.

#### Mandatory Requirements


- Travel must be undertaken for the sole purpose of IHC and monitoring families and IHC educators. Examples of acceptable reasons for a IHC Service to visit the family home include:
  - assessment of environment if safe for children and educator, and
  - identification of resources required by educator
- the family home must be located in *Inner Regional, Outer Regional, Remote and/or Very Remote* ARIA+ (2016) locations. During the period 2 August – 13 September 2020 family homes may also be located in Major Cities in Victoria only
- each person who drives during course of travel must hold a current driver's licence
- current comprehensive and third party insurance is held in relation to every vehicle driven during the time the travel takes place, and
- all travel is undertaken by the shortest practicable route.

#### ARIA+ Classifications

ARIA+ (2016) is used by the Australian Government to measure geographical remoteness with purpose of assisting with policy development. The five categories of ARIA+ are Major Cities, Inner Regional, Outer Regional, Remote and Very Remote.

To assist with determining if a region visited is classified as Inner Regional, Outer Regional, Remote or Very Remote, please refer to map available on the [Australia Bureau of Statistics \(ABS\) website](#) and filter using the following boundaries:

|                  |                           |
|------------------|---------------------------|
| Boundary type 1: | 2016 State Suburb (SSC)   |
| Boundary type 2: | 2016 Remoteness Area (RA) |



If there is still uncertainty, please contact the IHC team for advice.

## Exclusions

Travel reimbursement does not include:

- travel to visit family homes located in *Major Cities* ARIA+ (2016) locations,
- meal allowance and/or other travel incidentals,
- IHC educator travel to provide IHC in the family home.

## Claiming

The amount a service may claim each quarter is determined using the following formula:

- *Travel reimbursement rate* multiplied by the number of kilometres travelled.

The travel reimbursement rate is the current rate published by the Australian Taxation Office (ATO) using the 'cents per kilometre' method.<sup>3</sup>

Travel by air, rail or ferry is permitted but only if it is the most cost-effective and convenient method of travel. The reimbursement amount is the lesser of:

- the amount equal to cost of economy ticket (excluding GST), or
- application of the formula above, as if travel had been undertaken by road, using estimates of distance(s).

See [IHC Service Travel Reimbursement Claim](#) form on the department's website.

## Supporting Documentation

All claims must be supported by evidence to be retained by the IHC Support Agency and available as required. The required supporting documentation is dependent on the mode of transport.

*If travel is by car:*

A logbook with trip details including:

- name of driver(s) and position in the IHC Service
- registration, make, model, engine capacity of the vehicle
- date of each journey
- start point and destination of each journey
- odometer state and finish figures, and kilometres travelled, and
- purpose of each journey, including the name and address of family.

*If travel is by air, rail or ferry:*

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<sup>3</sup> See: <https://www.ato.gov.au/Business/Income-and-deductions-for-business/Deductions/Deductions-for-motor-vehicle-expenses/Cents-per-kilometre-method/>

A Tax Invoice for economy flight or ticket for the other modes of transport and proof of payment (i.e. bank statement, supplier receipt).

*If there are accommodation costs:*

A Tax Invoice for nights stayed and proof of payment.

*If there are vehicle hire costs:*

A Tax Invoice for vehicle hire, proof of payment and evidence that it was the most cost-effective and convenient method of travel.

### Timing

IHC Services are to submit the *Service Travel Reimbursement form* to their jurisdiction's IHC Support Agency within the current quarter. IHC Support Agencies have an additional 10-business days to report to the department at the end of the quarter. There is no backdating is permitted.

See [IHC Service Travel Reimbursement Claim](#) Form on the department's website.

**Table 7: Cut off dates for travel reimbursement claims**

| Quarter                      | Due date for submitting claim |
|------------------------------|-------------------------------|
| 2 July - 30 September 2018   | 15 October 2018               |
| 1 October - 31 December 2018 | 15 January 2019               |
| 1 January- 31 March 2019     | 15 April 2019                 |
| 1 April - 30 June 2019       | 15 July 2019                  |
| 1 July - 30 September 2019   | 15 October 2019               |
| 1 October - 31 December 2019 | 15 January 2020               |
| 1 January- 31 March 2020     | 15 April 2020                 |
| 1 April - 30 June 2020       | 15 July 2020                  |
| 1 July - 30 September 2020   | 15 October 2020               |
| 1 October - 31 December 2020 | 15 January 2021               |
| 1 January- 31 March 2021     | 15 April 2021                 |
| 1 April - 30 June 2021       | 15 July 2021                  |
| 1 July - 30 September 2021   | 15 October 2021               |
| 1 October - 31 December 2021 | 17 January 2022               |
| 1 January- 31 March 2022     | 15 April 2022                 |
| 1 April - 30 June 2022       | 15 July 2022                  |

## 5. Useful Contacts

### 5.1. Contact details for the department's state/territory offices and compliance teams

**Table 8: IHC contact details for department state and territory offices**

| State/ Territory | E-mail Contact   | Phone          |
|------------------|--|----------------|
| ACT & NSW        | <a href="mailto:NSWHomeBasedCare@dese.gov.au">NSWHomeBasedCare@dese.gov.au</a>     | 1800 566 046   |
| NT               | <a href="mailto:ChildcareNT@dese.gov.au">ChildcareNT@dese.gov.au</a>               | (08) 8942 8020 |
| QLD              | <a href="mailto:CCSAssessments-QLD@dese.gov.au">CCSAssessments-QLD@dese.gov.au</a> | (07) 4753 2650 |
| SA               | <a href="mailto:ChildcareSA@dese.gov.au">ChildcareSA@dese.gov.au</a>               | (08) 8306 8728 |
| TAS              | <a href="mailto:ChildcareTasmania@dese.gov.au">ChildcareTasmania@dese.gov.au</a>   | (03) 6222 9622 |
| VIC              | <a href="mailto:CCSAssessments-VIC@dese.gov.au">CCSAssessments-VIC@dese.gov.au</a> | 1800 112 812   |
| WA               | <a href="mailto:ChildcareWA@dese.gov.au">ChildcareWA@dese.gov.au</a>               | (08) 9485 3066 |

### 5.2. Child Protection Agencies

Refer to the [Guide to ACCS \(child wellbeing\)](#) to find your local child protection agency.

IHC Support Agencies are required to develop a comprehensive contact list for other referral services and agencies/organisations providing government or community funded programs in their jurisdiction.