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| **Department of Communities, Housing and Digital Economy** | QLD-GOV-Crest |

Particulars

**(Service Provision)**

**Version 1.0**

**THE PARTIES**

|  |
| --- |
| **STATE OF QUEENSLAND**, through the Department of Communities, Housing and Digital Economy |

**and**

|  |  |
| --- | --- |
| **Funded Organisation**  |  |
| **ABN/ACN** |  |
| **Org. number** |  |
| **Agreement number** |  |

1. **IMPORTANT INFORMATION**

## These Particulars must be read together with the Short Form Terms and Conditions.

## Some capitalised terms used in these Particulars are defined at item 12.

1. **IMPORTANT DATES**

|  |  |
| --- | --- |
| **Services Start Date\*** |  |
| **Agreement Expiry Date** |  |

*\*Note: The Services Start Date is relevant to when payments of the Funding will start and when You must start delivery of the services. See ‘Timing of Payments’ in item 4 and the ‘Special Conditions’ in item 10.*

1. **SERVICE OUTLET**
2. Your service outlet details for the delivery of the services, as they appear on Our online reporting system, are set out below.

|  |  |  |
| --- | --- | --- |
| **Service outlet number** | **Service outlet**  | **Departmental region where service outlet is located** |
|  |  |  |

1. You must ensure that Your service outlet details, including service outlet name, contact person or position, street, postal and email addresses, telephone and fax numbers, are current on Our online reporting system.

*Note: These are Your details in relation to delivery of the services under this Agreement. Address and contact details for the Agreement generally, including giving and receiving notices, are specified in item 11 of these Particulars.*

1. **FUNDING**

|  |  |
| --- | --- |
| **Funding stream** |  |
| **Total Funding under Agreement (excl. GST)** |  |
| **Funding details (excl. GST)** | per-annum |  |
| one-off |  |
| **Timing of payments** | The first quarterly instalment will be paid within 28 days after the Services Start Date. Provided that You are up-to-date with the Reporting Requirements, each remaining quarterly instalment will be paid to You within 28 days after You have met Your Reporting Requirements for the immediately preceding quarter, as specified in item 9. |
| **One-off Funding**Not applicable |

1. **FUNDED PURPOSE**

The Funded Purpose is the delivery of the services specified at item 6.

1. **SERVICES TO BE DELIVERED**

The services to be delivered, including the Service Users, Deliverables and Service Delivery Requirements are specified below.

* 1. **Description of services**

|  |  |
| --- | --- |
| **Service Users**  |  |
| **Service type(s)**  |  |
| **Service particulars** |  |
| **Geographic Catchment Area**  |  |
| **Operating hours** |  |
| **After hours and closure arrangements** |   |

* 1. **Deliverables**

The required Deliverables for the services are specified in the table below.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Service User code** | **Service type code** | **Output** | **Quantity per annum** | **Number of Service Users** | **Funding amount per annum (excl. GST)** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  | **Total amount** |  |

* 1. **Service Delivery Requirements**

In delivering the services, You must:

1. comply with all provisions titled (or that include in the title) ‘Requirement’; and
2. give consideration to all provisions titled (or that include in the title) ‘Consideration’,

in the sections of the document(s) specified in the table below, published on Our Website\*.

|  |  |
| --- | --- |
| **Document name** | **Document section** |
|  |  |

*\* Note: If You cannot locate a document on Our Website, please contact Us and We will assist You or provide You with a copy of the document.*

1. **QUALITY STANDARDS**
	1. **Quality Standards**

The Quality Standards are the Human Services Quality Standards.

* 1. **Assessment of compliance**
1. The Quality Framework specifies the types of human services:
2. that are in-scope for certification;
3. that are Self-Assessable; or
4. in relation to which We may accept other current accreditation or certification as evidence that the services are being delivered in compliance with the Quality Standards.
5. Subject to item 7.2(c), for services that are Self-Assessable, You must:
6. self-assess whether the services are being delivered in compliance with the Quality Standards, using the self-assessment tool available on Our Website and in accordance with the Quality Framework; and
7. promptly and, in any case, immediately upon request, provide a copy of Your self-assessment to Us.
8. Item 7.2(b) does not apply if You hold any current certification with Us that human services that You deliver comply with the Quality Standards.
9. For services that are of a type described in item 7.2(a)(iii), You must:
10. promptly and, in any case, immediately upon request, provide to Us a copy of any relevant accreditation or certification, together with any supporting or additional information that We may request; and
11. maintain that accreditation or certification until the Agreement Expiry Date.
12. **ASSETS TO BE PURCHASED WITH THE FUNDING**

Not applicable

1. **REPORTING REQUIREMENTS**

This item sets out the Reporting Requirements for the Funding, which must be met to Our satisfaction.

* 1. **Performance measures**

You must collect and report on the following performance measurement data in relation to the services. The table in item 9.2 contains the requirements for reporting on this performance measurement data.

|  |  |  |
| --- | --- | --- |
| **Service User code** | **Service type code** | **Output measures** |
|  |  |  |  |
|  |
|  |  |  |  |
|  |
| **Service User code** | **Service type code** | **Demographic measures** |
|  |  |  |  |
|  |
|  |  |  |  |
|  |
|  |  |  |  |
|  |
|  |  |  |  |
|  |  |
| **Service User code** | **Service type code** | **Outcome measures** |
|  |  |  |  |
| **Service User code** | **Service type code** | **Other measures** |

* 1. **Data, statements and reports You are to submit**

You must submit the data, statements and/or reports specified below, in each case by the due date and in accordance with the details and standard of reporting requirements and lodgement requirements specified below.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Reporting period and due date** | **Details and standard of reporting** | **Lodgement** |
| ***Performance Measurement Data***  | **Reporting period:**quarterly**Due date:**within 28 days after the end of each quarter | *Performance Measurement Data* as specified in item 9.1 must be collected in accordance with the counting rules contained in the Outputs and Performance Measures Catalogue available on Our Website and any data requirement contained in the applicable investment specification document listed at item 6.3. | Submitted via Our Online Reporting System  |
| ***Directors’ Certification*** | **Reporting period:**quarterly**Due date:**within 28 days after the end of each quarter | You must complete and submit\* the form titled ‘*Directors’* *Certification*’available on Our Website. *\* Note: If You have more than one Service Agreement or Short Form Agreement with Us, You are only required to complete and submit one organisational-level Directors’ Certification for each reporting period.* | Submitted via Our Online Reporting System |

1. **SPECIAL CONDITIONS AND OTHER MATTERS**
	1. **Special Conditions – Standard**
2. You must start delivering the services specified in item 6 from the Services Start Date.
3. You must maintain accurate records and accounts of expenditure in relation to the Funding for at least 7 years from the end of this Agreement.
4. You must provide Us with all financial information We request in relation to the Funding.
5. We may conduct audits of Your records and financial accounts in relation to the Funding and You must make available all information that We, or Our auditors, request in relation to any such audit.
	1. **Special Conditions – Additional**

Not applicable

* 1. **Other Insurance**

Not applicable

* 1. **Departures from Short Form Terms and Conditions**

Not applicable

1. **NOTICE DETAILS**

## You

|  |  |
| --- | --- |
| **Your contact officer** **(person and/or position)** |  |
| **Postal address** |  |
| **Telephone number** |  |
| **Fax number** |  |
| **E-mail address** |  |

## Us

|  |  |
| --- | --- |
| **Our contact officer****(person and/or position** |  |
| **Postal address** |  |
| **Telephone number** |  |
| **Fax number** |  |
| **E-mail address** |  |

1. **DEFINITIONS FOR PARTICULARS**

In these Particulars, unless otherwise stated or a contrary intention appears:

**“Geographic Catchment Area”**,means the area or areas where the services are to be delivered, which, unless described otherwise, correspond to the Australian Bureau of Statistics Statistical Areas.

**“Human Services Quality Standards”** means the ‘Human Services Quality Standards’ forming part of the Quality Framework;

**“Online Reporting System”** means Our online reporting system for the electronic lodgement of data and reports under the Reporting Requirements

**“Our Website”** meansthe website at <http://www.chde.qld.gov.au> or such other website as We may from time to time notify You;

**“Quality Framework”** means the ‘Human Services Quality Framework’ version 4.0, published on Our Website;

**“Quality Standards”** means the ‘Human Services Quality Standards’ forming part of the Quality Framework;

**“Self-Assessable”** means human services of a type subject to self-assessment for compliance with the Quality Standards, determined under the Quality Framework;

**“Services Start Date”** means the Services Start Date specified in item 2; and

**“Short Form Terms and Conditions”** means the document titled ‘(Short Form) Terms and Conditions’, version 1.2, published on the website at <http://www.hpw.qld.gov.au/SiteCollectionDocuments/UpdatedShortFormtermsandconditions.pdf> or such other website as We may from time to time notify You.

*Note: If You cannot locate the Short Form Terms and Conditions, please contact Us and We will assist You or provide You with a copy.*

**EXECUTED as an Agreement**

|  |  |  |
| --- | --- | --- |
| **SIGNED** for and on behalf of **STATE OF QUEENSLAND**,actingthroughthe Department of Communities, Housing and Digital Economy by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_a duly authorised person, in the presence of: |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(signature) |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(signature of witness) |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(date) |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(name of witness) |  |  |

|  |  |  |
| --- | --- | --- |
| **SIGNED** by ***Name, Position*** for and on behalf of ***Organisation*** as its duly authorised officer, in the presence of: |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(signature) |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(signature of witness) |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(date) |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(name of witness) |  |  |