



Approving Special Child Care Benefit Rate

Application for a higher limit where 18% limit has been reached

Who should use this form?

This form is to be used by a child care service approved for the purposes of Child Care Benefit (CCB) if the service is likely to exceed the 18% limit on Special Child Care Benefit (SCCB) expenditure.

If you intend to approve an application for SCCB rate you must consider whether you have exceeded the 18% limit. If your service has exceeded the limit you may not approve any further SCCB rate.

The 18% SCCB limit for a quarter is calculated on the total CCB fee reductions paid to your service in the quarter before last. For example, when determining how much SCCB rate you can provide during the third quarter, you need to consider the total amount of CCB fee reductions your service received during the first quarter in the previous year. The total of CCB fee reductions includes amounts of Grandparent CCB, and SCCB. It does not include amounts of Child Care Rebate (CCR) or Jobs, Education and Training Child Care Fee Assistance.

Section 79 of the A New Tax System (Family Assistance) Act 1999 prohibits a service from certifying SCCB rate for a child after the service has exceeded the 18% limit unless a higher limit has been approved by the Department of Social Services. A service that exceeds the appropriate limit without the Department of Social Services' approval is contravening family assistance law and may have sanctions imposed on it. Sanctions may include cancellation of CCB approval. If a service certifies SCCB rate after the 18% limit is reached the difference between the amount of SCCB paid and the amount of CCB that would normally be paid is a debt due to the Commonwealth by the service.

If approving a SCCB application where the 18% limit has been exceeded, or will be, you must complete this form and fax it to the Department of Social Services CCMS Helpdesk on **1300 663 429** or email to ccmshelpdesk@dss.gov.au, or alternatively forward all individual SCCB claims for the current quarter to the Special Child Care Assessment Team in the Department of Human Services.

Service name

Service CCB Approval ID

Service address

Contact for enquiries

Phone number ()

Email

Working out your service's 18% limit:

Please specify the higher limit that you believe will be required, for example, 25 per cent. When specifying a higher limit, you should consider the number of new applications you are likely to receive and the number of weeks remaining in the current quarter, as well as the hours appropriate to each SCCB application.

Total SCCB, CCB and GCCB received for the quarter before last:	Anticipated total of SCCB for the current quarter:
SCCB	What is the total SCCB your service intends to approve for this current quarter? Anticipated SCCB = \$
CCB	
GCCB	
TOTAL (SCCB + CCB + GCCB) = \$	
Your SCCB 18% limit is: (Total multiplied by 0.18)	Your higher SCCB% limit: (Anticipated SCCB for the current quarter divided by the total CCB, SCCB and GCCB received for the quarter before last multiplied by 100)

What is the higher limit you will require as a percentage?

What is the number of families that are enrolled at this service who have been approved for SCCB in the current quarter?

For which quarter are you requesting a higher limit?
(month-month year format)

Quarter	Quarterly Periods 2014-2015	Quarter	Quarterly Periods 2015-2016
One	7 July 2014—5 October 2014	One	6 July 2015—4 October 2015
Two	6 October 2014—4 January 2015	Two	5 October 2015—3 January 2016
Three	5 January 2015- 5 April 2015	Three	4 January 2016—3 April 2016
Four	6 April 2015—5 July 2015	Four	4 April 2016—3 July 2016

Quarter	Quarterly Periods 2016-2017
One	4 July 2016—2 October 2016
Two	3 October 2016—1 January 2017
Three	2 January 2017—2 April 2017
Four	3 April 2017—2 July 2017

***NOTE:** You must lodge your application in the current quarter. You cannot apply for a higher limit for a past quarter or a future quarter.

Reasons for requesting a higher limit

This service requires a higher SCCB limit because (please tick the appropriate box and then provide a detailed response in the space provided):

- ☐ **Multiple families are in various temporary financial hardship situations, for example:**
 - Loss of employment or the failure of a business;
 - Destruction of, or severe damage to, a person’s home, necessitating relocation of the family or the need to place a child in care or to increase child care;
 - Significant additional expenditure or a significant reduction in income arising from an event such as a death or serious illness in the family;
 - When a person has ceased to receive an income support payment and as a consequence the person incurs significant additional expenditure associated with commencing new employment, or the person experiences a significant reduction in income.
- ☐ **A major employer has closed in the local area.**
- ☐ **A natural disaster has reduced the capacity of many families to pay their fees.**
- ☐ **This service is part of an integrated or contacted service partnership arrangement to provide child care in relation to child protection or early intervention programs (please list the name of the agencies that your service has formal or informal arrangements with below).**

Additional Information:

The above list is not exhaustive, and all applications for a higher SCCB limit are considered on a case by case basis. Please describe below.

Please attach relevant documentation or additional information if the space provided is insufficient.

Service statement

- I declare that the information given in this application is complete and correct.
- I am authorised to complete this application on behalf of the service.
- I understand there are penalties for giving false or misleading information.

Signature _____

Date / /

Name of authorised person _____ Position held at service _____

What to do next?

- When this form is fully completed and signed you should fax a copy of the application form to the Department of Social Services CCMS Helpdesk on **1300 663 429** or email to ccmshelpdesk@dss.gov.au.
- When your application has been assessed, the Department of Social Services will contact you on the outcome of your application.

Extension of SCCB rate for individuals

If you consider access to SCCB should exceed the 13 weeks you have already approved you must refer those cases to the Special Child Care Assessment Team in the Department of Human Services for consideration.

Before you extend a period of SCCB you should review the child's circumstances to ensure they meet the criteria. SCCB is required to:

- support, maintain or increase access to Child Care Benefit approved child care for children who are at risk of serious abuse or neglect if the cost of care is a barrier; and/or
- assist families experiencing temporary financial hardship by helping them maintain access to child care while they adapt to their new circumstances.

For further information please refer to Chapter 14 of the Child Care Service Handbook.

Please note this form is not an application to the Special Child Care Assessment Team in the Department of Human Services for SCCB.