Queensland Government

ACCOUNTABILITY CHECKLIST: Year: 20___
FORM 2

This form should be completed by student hostels and returned to Department of Education. Please refer to the Important Dates calendar within the Hostel Assistance Kit for submission deadlines.

1.	CONTACT INFORMATION:	
1.1	Name of Student Hostel	
1.2	Address	
1.3	Name of operator(s)	
1.4	Contact details for operator(s) Email: Phone:	
1.5	Name of organisation operating the hostel	
2.	**ENROLMENT INFORMATION**	
2.1	How many students are currently enrolled?	**Hostel capacity:** **Numbers enrolled:** Primary _____ Secondary _____ Other (please specify) _____
2.2	How many families are represented in the hostel's enrolment?	Number of families _____ Number of students _____
2.2	Number of students who meet the Living Away from Home Allowances Scheme (LAFHAS) and Assistance for Isolated Children Scheme (AIC) eligibility criteria? Do at least 80 per cent of enrolments meet the criteria?	No. of children meet LAFHAS criteria ____ No. of children meet AIC criteria _____ 80% of enrolments meet the criteria YES / NO *NB: 80% of enrolments must meet the criteria for LAFHAS and AIC. i.e. students' homes are at least 16km from the nearest state school with the required year level and at least 4.5km from a transport service. If less than 4.5km to a transport service, students must travel more than 56km to school via the transport service or travel for at least 3 hours each day via the transport service*

2.3	Does the hostel have an open enrolment policy which is clearly stated in a prospectus?	YES / NO *Open enrolment means students are accepted regardless of race, religion, disability or the school they attend* *Please provide a copy of your prospectus*
2.4	When was the prospectus last updated?	Date: *Hostels are required to update the prospective every three years*
2.5	How and when is the prospectus distributed?	
2.6	What are the projected enrolment numbers for the next two years?	Coming Year: ___ Following Year: ____ *NB the Department of Education reserves the right to examine a hostel's financial records for the purposes of viability if so required*
3.	**MANAGEMENT INFORMATION**	
3.1	Who is the hostel operated by?	☐ A local government authority ☐ A non-profit body which has demonstrated to the satisfaction of the Director-General of Education that it is a responsible organisation suitable to operate a student hostel If a not-for-profit organisation, when was approval received from the DG Education? Date: _____
3.2	Have details of the membership of the governing body been provided?	YES / NO If yes, list names of committee
3.3	How often does the hostel governing body meet?	
3.4	Public Liability insurance (min. $20 million)	Please provide the Public Liability Insurance details

4.	CHILD SAFETY	
4.1	Have all employees and volunteers commencing association with the hostel undergone a *"Working with Children and Young People"* check and hold a positive Blue Card?	☐ YES Please provide copies of all Blue Cards ☐ NO, *this is a legislative requirement*
4.2	Does your hostel have a Child and Youth Risk Management Strategy (required under the Blue Card System)?	☐ YES Please provide a copy _____ ☐ NO, *this is a legislative requirement*
4.3	Do you have at least one employee with a valid Senior First Aid Certificate	YES, please provide evidence NO, what action is being taken
4.4	Does the hostel have a Student Hostel Reporting Framework for reporting harm against children and operators (physical, emotional, sexual)	Suitable Framework been adopted YES / NO Documentary evidence provided YES / NO Written policy / framework YES / NO Evidence of annual communication with students, staff and parents YES / NO Documentation of incidents YES / NO
4.5	Are all of the policies and processes readily accessible by parents, staff and students? How are the parents, staff and students made aware of the policies and processes?	☐ YES Please provide evidence ☐ NO What action is being taken Parents, staff and students are made aware of the policies and processes by:
4.6	Is the operator on site at all times when children are present? Is there a backup in an emergency, e.g. another child needs to go to hospital, or an adult receives an injury	☐ YES, please provide evidence ☐ NO, what action is being taken ☐ YES, please provide evidence ☐ NO, what action is being taken

5.	**STUDENT HOSTEL SUPPORT SCHEME FUNDING**	
5.1	Has an application been made under the SHSS for a Capital Grant in the last 3 years?	<u>Capital Grant</u> YES / NO Value: $ Purpose: Copy of receipts for purchases on file YES / NO
5.2	Have funds been approved and/ or expended as per the application?	YES / NO:
5.3	Are pastoral care services provided?	YES / NO: Details:

6.	**LEASE INFORMATION**	
6.1	If the hostel is built on leased land, what is the current lease expiry date? Name of the lessor?	
6.2	If the hostel building is leased, what is the current lease expiry date?	
6.3	What options exist for lease renewal?	Comments:

7.	**INSPECTION HISTORY**	
7.1	On what date was the last Fire Safety Management Plan (FSMP) inspection carried out?	Date:
7.2	Who carried out the FSMP inspection?	Organisation: *Inspections should be carried out by a relevant authority* *www.qfes.qld.gov.au*
7.3	Is a written report available to verify the FSMP inspection?	YES / NO Comments:
7.4	Have all actions identified in the report been undertaken?	YES / NO Comments:

		Proposed maintenance schedules for prescribed fire safety installations in the building (under the FSMP).	*For each fire safety installations in the building, a record must be kept of testing and maintenance procedures carried out. A receipt/tax invoice is not sufficient. A log book is suggested to record the maintenance, and kept with the FSMP*
7.5	On what date was the last inspection held for: - Smoke alarm system		**Smoke alarm system**: Date of inspection: Name of inspector: Organisation: Details entered into logbook: YES / NO Copy of report on file: YES / NO
7.6	On what date was the last inspection held for: - Fire extinguishers		**Fire extinguishers:** Date of inspection: Name of inspector: Organisation: Details entered into logbook: YES / NO Copy of report on file: YES / NO
7.7	On what date was the last inspection held for: - Emergency lighting system		**Emergency lighting system** Date of inspection: _____ Name of inspector: Organisation: Details entered into logbook: YES / NO Copy of report on file: YES / NO
7.8	On what date was the last inspection for structural purposes?		Date: *Triennial inspections are required from relevant authorities – Private certifier or local council*
7.9	Was the inspection carried out by a registered builder or engineer?		Name: Licence Number: *Inspections should be carried out by a Registered Builder or Engineer*
7.10	Is a written report available to verify the inspection?		YES / NO
7.11	What was the result of the inspection and what action was / will be taken?		Comments:

DEPARTMENT OF EDUCATION
STUDENT HOSTEL SUPPORT SCHEME (SHSS)