



The Scope Family Centre is a centre providing opportunities for children and their families to spend quality supervised time together in a safe and secure setting.

Based in Nerang and within close proximity of the M1 and public transport, the centre is easily accessible and provides families with a nurturing environment to build and maintain relationships.

The Scope Family Centre is also a centre allowing families who are dealing with difficulties in their lives to access holistic services to support families through the early stages of parenting and through the ever changing stages of children's development. If you require supervised time for your family or guidance and education in parenting, we have services for you at affordable prices.

We are here to help.

Click on our website to download our form take the time to fill them out then email them to info@scopefamilycentre.com.au or call our centre direct on

(07) 5596 2602

Contact

The centre is open to support children and parents spend quality supervised time together. Situated at 6 Nerang, Street Nerang, this centre is designed to allow children to develop and maintain relationships with those important in their lives. The centre has designated play areas and a fully functional kitchen for families to cook and prepare meals and snacks for the children.

Contact services include fully supervised time with qualified staff and observation notes of the contact time are available and included in the costing. The centre also allows there to be a progression of supervised time to semi supervised time to unsupervised time with changeovers also facilitated for parents who need an independent venue for this to occur.

The centre staff are happy to assist families maintain relationships and all are qualified and have Blue Cards for working with children. The Scope Family Centre focuses on a collaborative approach of working with families within the Family Court jurisdiction to minimise the impact of separation on parents and children.

Fees

Contact fees are based on an hourly rate and include written observation notes from each visit. Rates Monday to Friday are \$60 per hour plus GST and weekends and public holidays are \$80 per hour plus GST. Changeovers for contact between parents are also facilitated at \$40 plus GST per parent. Intake interviews are conducted at \$50 plus GST for each parent.

Getting Started

The Scope Family Centre is now taking bookings for supervised time and parents simply fill in the intake and agreement sheets, sign and return these to the email address provided. An intake interview will then be booked for each parent and bookings discussed with suitable times for both the centre and the family.

Intake and agreement forms are available by accessing the website at www.scopeconsultancy.com.au or by emailing info@scopeconsultancy.com.au

Professional Services

The Scope Family Centre can provide intensive in home support. Education can be provided to families in crisis to assist and assess the parent's capacity to meet the children's needs. Full reports are provided with recommendations to support the family.

The Scope Family Centre will also be providing access to other professional services such as DV counselling and counselling for children. Courses will be offered regarding the impact of violence on children and the importance of positive communication during the separation period.

Denise is also available to complete Child Inclusive Mediation for parents mediating to avoid the court and to understand the needs and views of their child through separation.







| Your name: | | | |
|---------------|-------------|--|--|
| Name of chile | d/children: | | |

- Contact between children and their parents shall be child focused and there will be no discussion regarding the current issues before the court.
- Parents will not attend contact under the influence of alcohol or drugs and if they do contact supervisors
 may terminate the contact session and the parent will forfeit the fees for that session. Future sessions may
 be placed in doubt if the parents were observed to be under the influence of a substance.
- Parents will speak positively about the other parent at all times.
- There will be no smoking during the contact period.
- Parents are reminded to refrain from receiving and making telephone calls during the contact period.
- There are to be no unauthorised persons attend contact unless this is by written consent of all parties and the contact service is advised 24 hours prior to contact occurring.
- Parents are to attend contact punctually and if they are unable to attend 24 hours notice must be provided or a cancellation fee will be charged.
- If parents are 30 minutes late to contact, contact will be cancelled and the children returned to the parent they live with.
- Children are to be dropped to contact 10 minutes prior to contact starting and they will be collected 10 minutes after the contact finishes.
- Copies of any court orders including domestic violence orders should be provided to the contact service before the commencement of contact.
- Payment for contact is encouraged to be by direct bank transfer and must be made at least 48 business hours in advance to ensure all money has cleared.
- Receipts for contact will be provided on request.
- If payment cannot be made by direct deposit, payment arrangements must be discussed prior to contact commencing.
- Contact services are also subject to GST.
- In the event of an emergency I give approval for the staff from Scope Family Centre to contact an ambulance and for the child/ren to be transported by ambulance to seek medical attention. In the event of an emergency, both parents will be contacted as soon as practicable.
- Observation notes will be forwarded directly to the ICL by email.

| Signed: | Commonwealth Bank |
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| | Scope Family Centre |
| | BSB: 064 237 |
| Date: | Account: 1006 6930 |
| | Please use your name as the reference. |



INTAKE INFORMATION

Please return completed form to info@scopeconsultancy.com.au

| Guardian comp | leting this fo | rm | | | |
|------------------------------------|----------------|------|-------|-------|-------|
| Name | | | | | Date: |
| Address | | | | | |
| Phone number | Mobile: | | | Work: | |
| Email | | | | | |
| Cultural informa | ation | | | | |
| Language spoken at home | | | | | |
| Your relationship to the child/ren | | | | | |
| Additional Infor | mation | • | | | |
| | | | | | |
| | | | | | |
| Emergency cont | tact for yours | self | | | |
| Name | | | Phone | ! | |
| | | , | | 1 | |
| Other Parent's | details | | | | |
| Name | | | | | |
| Address | | | | | |
| Phone number | Mobile: | | | Work: | |
| Email | | | | | |
| Relationship to t | he child/ren | | | | |
| Their legal repre | sentative | | | | |
| Additional Inform | nation | | | | |
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| Child/ren details | | | | |
|---------------------------------|----------------------------|---------|------------------|--------|
| Name | | Age | Date of Birth | Gender |
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| Medicare Number/s | | | Ехр: | |
| Health care card number | | | | |
| Does the child/ren have a | ny special needs? | | | |
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| Does the child/ren have a | ny allergies? | | | |
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| Is the child diagnosed with | any medical condition? | | | |
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| Is the child diagnosed with | n and behavioral and/or mo | ental h | nealth concerns? | |
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| Child/ren's current addres | :5 | | | |
| oma, ren a carrent dadres | | | | |
| Emergency Contact for th | e children | | | |
| Name | | Phon | e: | |
| Relationship to the child | | | | |
| Additional Information | | | | |
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| Preferred contact | times | | | | | | |
|--------------------------|----------------|----------|-----------|-----------|---------|------------------------------|-----------|
| Preferred days | | | | | | | |
| Preferred time | | | | | | | |
| Frequency | | | | | | | |
| Duration | | | | | | | |
| Additional Inform | ation | | | | | | |
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| Legal and Court is | nformation- | Dlease a | ittach (| anv rele | vant C | ourt Orders including DVO's, | Parentina |
| Agreements etc. | | reuse u | ittucii (| arry rere | .vant C | ourt orders including DVO 3, | rurenting |
| Family Court Orde | ers | No | | Yes | | If yes, please attach | |
| Domestic Violence | e Orders | No | | Yes | | If yes, please attach | |
| Legal Representa | tive/Solicitor | 's Nam | e & Leg | gal Firm | | | |
| Name | | | | | | | |
| Phone | | | | | | | |
| | | | | | | | |
| Email | | | | | | | |
| Postal address | | | | | | | |
| Independent Chil | dren's Lawye | r | | | | | |
| Name | uron o zamye | ·• | | | | | |
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| Phone | | | | | | | |
| Email | | | | | | | |
| Postal address | | | | | | | |
| Additional Inform | ation | | | | | | |
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| Background information | | | | | |
|--|---|--|--|--|--|
| History of previo | us contact arrangements | | | | |
| Have you previou | sly used a supervised contact centre? If yes, please provide the following: | | | | |
| Name of center | | | | | |
| Phone | | | | | |
| Duration | | | | | |
| Reason for discor | ntinuation / issues | | | | |
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| When did the chi | ld/ren last spend time with the parent face to face? | | | | |
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| What concerns de | o you have in relation to contact? | | | | |
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| Does the child ha | ve phone contact? If so, how often? | | | | |
| The state of the s | , | | | | |
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| Do you have any | diagnosed mental health concerns? If yes, please provide details | | | | |
| 50 you have any | and provide details | | | | |
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| Do you have any | current of previous substance abuse history? If yes, please provide details | | | | |
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| Do you have any domestic violence and/or criminal history? If yes, please provide details. |
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| Have you had any involvement with Dept. Child Safety? If yes, please provide details. |
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| Have there been previous threats to abscond with the child? If yes, please provide details |
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| Do you have any concerns for your personal safety? If yes, please provide details |
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| Please provide any additional information you feel may be relevant. |
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| Intake |
| Once the Scope Family Centre have received the signed and completed forms from both parties, an intake |
| interview will be scheduled. Ideally, the intake interview should be conducted at the Scope Family Centre |
| located at 6 Nerang Street, Nerang. Please provide your preferred days and time to attend an intake interview below. |
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| All fees will need to be transferred to the bank account details below before an intake interview or supervised |
| contact is conducted. |
| Account Name: Scope Family Centre (Commonwealth Bank) |
| BSB: 064 237 Account Number: 1006 6930 |
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| To the best of my knowledge, the information provided is accurate and no relevant information has been knowing |
| withheld. Sign: Please return completed forms to info@scenesonsultansy.com au |
| Sign: Please return completed forms to info@scopeconsultancy.com.au |
| Date: |
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