

POLICY

Restrictive Practices Children

1. Policy Statement:

Breakaway Toowoomba Inc. is committed to ensuring children who require specialist behaviour support and/or require the use of restrictive practices receive services and support in a safe environment that recognises their rights and needs, is the least restrictive and incorporates evidenced-based practices and complies with legislative requirements. The aim is to prevent or reduce the behaviour that causes harm through supporting the child to engage in their community and activities of interest, learn new skills and develop relationships.

This policy only applies to children. The *National Disability Insurance Scheme (Restrictive Practices and Behaviour Support) Rules 2018* applies to this policy in relation to mandatory notification and reporting to the NDIS Commission and the requirement to use a NDIS registered Behaviour Support Practitioner for assessment and the development of Positive Behaviour Support Plans for restrictive practices.

2. Objectives:

The objectives of this policy are to:

- ensure the development and implementation of Positive Behaviour Support Plans and the use of restrictive practices are least restrictive to the child and comply with legislative requirements; and
- identify the roles and responsibilities of staff including mandatory reporting requirements.

3. Definitions:

Child: a person under 18 years of age.

Restrictive Practice: means any practice or intervention that has the effect of restricting the rights or freedom of movement of a person with disability.

Contain: means physically prevent the free exit of the child from premises where the child receives disability services, other than by secluding the child, in response to the child's behaviour that causes harm to the child or others.

Seclusion: is the sole confinement of a child in a room or a physical space at any hour of the day or night where voluntary exit is prevented, or not facilitated, or it is implied that voluntary exit is not permitted.

Chemical restraint: is the use of medication or chemical substance for the primary purpose of influencing a child's behaviour. It does not include the use of medication prescribed by a medical practitioner for the treatment of, or to enable treatment of, a diagnosed mental disorder, a physical illness or a physical condition.

Mechanical restraint: is the use of a device to prevent, restrict, or subdue a child's movement for the primary purpose of influencing a child's behaviour but does not include the use of devices for therapeutic or non-behavioural purposes.

Physical restraint: is the use or action of physical force to prevent, restrict or subdue movement of a child's body, or part of their body, for the primary purpose of influencing their behaviour. Physical restraint does not include the use of a hands-on technique in a reflexive way to guide or redirect a child away from potential harm/injury, consistent with what could reasonably be considered as the exercise of care towards a person.

Environmental restraint: restriction of a child's free access to all parts of their environment, including items and activities.

Reportable Incident: unauthorised use of a restrictive practice in relation to a child with a disability.

Behaviour Support Practitioner: is a person who is registered with the NDIS to undertake behaviour support assessments (including functional behavioural assessments) and to develop positive behaviour support plans that may contain the use of restrictive practices.

Positive Behaviour Support Plan: any child who is subjected to a restrictive practice must have an approved Positive Behaviour Support Plan. The Positive Behaviour Support Plan describes how to support the child and demonstrates how restrictive interventions will only be used as a last resort and are the least restrictive option.

Visitable site: is a place, other than a private dwelling house, where a child lives or receives services and that is prescribed under a regulation.

4. Use of Restrictive Practices to Manage Behaviour that Causes Harm:

If restrictive practices are considered to be the least restrictive alternative to ensure the safety of the child and others in response to the behaviour of the child with an intellectual or cognitive disability, they should only be used in a way that:

- has regard to the human rights of the child
- safeguards the child or others from harm
- maximises the opportunity for positive outcomes for the child and aims to reduce or eliminate the need to use restrictive practices; and
- ensures transparency and accountability in the use of restrictive practices.

5. Principles:

The following guiding principles underpin the delivery of services and support the use of restrictive practices:

- full and equal enjoyment of all human rights and fundamental freedoms by children with disability without discrimination of any kind
- promotes the child's development and well-being, supports the child to meet their goals and increases opportunities for participation and inclusion in the community
- inclusion of the child and their family or guardian and significant others in the development of strategies
- addressing the child's needs whilst aiming to improve the quality of life of the child by reducing or eliminating the need for a restrictive practice
- recognises that restrictive practices should not be used punitively or in response to behaviour that does not cause harm to the child or others
- restrictive practices should only be used in limited and specific circumstances, as the last option and for the shortest possible time and be in proportion to the potential negative consequence or risk of harm
- restrictive practices should be person-centred, the least restrictive option and used only to protect the rights and safety of the child or others

- transparency and accountability in the use of restrictive practices
- monitoring and evaluating the use of restrictive practices and proactively reviewing Positive Behaviour Support Plans
- using evidenced-based practices which include strategies to produce behavioural change, focus on skills development and environmental design
- collaborating with other service providers who also support the child; and
- staff are knowledgeable and skilled in the use of Positive Behaviour Support Plans, restrictive practices and the legislative and regulatory requirements.

6. Scope:

This policy applies to all Breakaway Toowoomba Inc. clients who are **children** with an intellectual or cognitive disability whose behaviour either causes harm to the child or others or represents a serious risk of harm to the child or others ('behaviour that causes harm').

7. Approval or Consent to Use a Restrictive Practice:

Approval or consent to use a restrictive practice must be obtained from the parent or the guardian of the child.

8. Assessment of a Child:

Behaviour that causes harm occurs for a reason. Gaining an understanding of the child and the purpose or function of their behaviour is an essential component in the development of appropriate support strategies. A positive and proactive approach to behaviour support should be implemented. A positive approach involves the development of multi-element Positive Behaviour Support Plans that support the child to live a full and active life and learn new skills.

9. Use of a Restrictive Practice:

A restrictive practice should only be used:

- where necessary to prevent harm to the child or others; and
- where it is the least restrictive way of ensuring the safety of the child or others.

Services to the child should be provided in a way that:

- promotes the child's physical, mental and social development and increase opportunities for participation and inclusion in the community
- responds to the child's needs and goals
- ensures the child and their family or guardian are given an opportunity to participate in the development of strategies for the care and support of the child
- involves positive behaviour support planning informed by evidenced-based best practice which includes the implementation of strategies to produce behavioural change, focused on skills development and environmental design
- ensures transparency and accountability in the use of restrictive practices
- recognises that restrictive practices should not be used to punish a child or in response to behaviour that does not cause harm to the child or others
- aims to reduce the intensity, frequency and duration of the child's behaviour that causes harm to the child or others
- aims to reduce or eliminate the need for the restrictive practice
- Positive Behaviour Support Plan and the use of restrictive practices are reviewed when circumstances change and at least once per year; and

- ensures adequate standards of staff skills and knowledge both in terms of the legislative and regulatory requirements and the proportionate, safe and responsible use of a restrictive practice.

10. Interim Plan (where there is an immediate and serious risk of harm):

At times it may be necessary to respond to a child's behaviour that causes harm. An immediate response may be required, and a restrictive practice used in order to prevent a serious risk of harm to the child or another person.

If consideration is being given to the ongoing use for a restrictive practice a Behaviour Support Practitioner must be engaged, and an Interim Plan must be developed. The Interim Plan is to provide protocols for the safe use of the restrictive practice whilst the Behaviour Support Practitioner undertakes a functional behaviour assessment and develops a comprehensive Positive Behaviour Support Plan.

The Behaviour Support Practitioner must:

- develop an interim behaviour support plan that covers the use of the restrictive practice **within 1 month** after the first use of the restrictive practice
- take all reasonable steps to develop a comprehensive Positive Behaviour Support Plan for the child that covers the use of the restrictive practice **within 6 months** after the first use of the restrictive practice; and
- train staff in the implementation of the Interim Behaviour Support Plan strategies.

11. Reportable Incidents:

Under the *National Disability Insurance Scheme (Restrictive Practices and Behaviour Support) Rules 2018* the unauthorised use of a restrictive practice in relation to a person with a disability is a reportable incident and must be reported to the NDIS Commissioner. Refer also to the *Reportable Incident (Unauthorised use of Restrictive Practices) Policy* and *Reportable Incident (Unauthorised use of Restrictive Practices) Procedure*.

12. Notifying:

Public Guardian

The Public Guardian must be notified:

- **within 21 days** if a restrictive practice is in use at a visitable site; and
- **within 14 days** when any of the above information changes.

NDIS Commission:

The Behaviour Support Practitioner is responsible for lodging the Positive Behaviour Support Plan for a restrictive practice as soon as practicable after the Positive Behaviour Support Plan has been developed.

The NDIS Commission must also be notified when the Positive Behaviour Support Plan stops having effect or ceases.

13. Reporting:

NDIS Commission

It is a mandatory requirement to report to the NDIS Commission via the NDIS Commission Portal:

- monthly on the use or non use (Nil return) of restrictive practices.

Unauthorised use of a restrictive practice is a **reportable incident** and must be reported **within 5 business days** of becoming aware of the use of a restrictive practice.

14. Record Keeping:

The following written information relating to the use of restrictive practices must be kept:

- a description of the use of the restrictive practice, including:
 - the impact on the child or another person
 - any injury to the child or another person
 - whether the use of the restrictive practice was a reportable incident; and
 - why the restrictive practice was used
- a description of the behaviour of the child that led to the use of the restrictive practice
- the time, date and place at which the use of the restrictive practice started and ended
- the names and contact details of the persons involved in the use of the restrictive practice
- the names and contact details of any witnesses to the use of the restrictive practice
- the actions taken in response to the use of the restrictive practice
- what other less restrictive options were considered or used before using the restrictive practice; and
- the actions taken leading up to the use of the restrictive practice, including any strategies used to prevent the need for the use of the practice.

A record of this information must be kept for seven years from the day the record is made.

15. Roles and Responsibilities:

Chief Executive Officer is responsible for:

- being familiar with and complying with the legislative requirements on the use of restrictive practices as described in the *NDIS Act 2013* and the *NDIS (Restrictive Practices and Behaviour Support) Rules 2018*
- ensuring staff have sufficient knowledge of the requirements for the lawful use of a restrictive practice
- ensuring staff have the skills and knowledge required to use the restrictive practice appropriately and lawfully
- monitoring the use of a restrictive practice to safeguard against abuse, neglect or exploitation
- ensuring compliance with the conditions of a restrictive practice approval
- ensuring the development of Positive Behaviour Support Plans are completed within the specified timeframe
- ensuring all mandatory reporting requirements are met
- ensuring all reportable incidents are reported to the NDIS Commission
- commencing performance management processes where staff are not implementing Positive Behaviour Management Plans appropriately; and
- ensuring compliance with this policy by all staff.

Operations Manager, Accommodation Manager and Respite Manager are responsible for:

- being familiar with and complying with the legislative requirements on the use of restrictive practices as described in the *NDIS Act 2013* and the *NDIS (Restrictive Practices and Behaviour Support) Rules 2018*
- ensuring staff have sufficient knowledge of the requirements for the lawful use of a restrictive practice
- ensuring staff have the skills and knowledge required to use the restrictive practice appropriately and lawfully
- monitoring the use of a restrictive practice to safeguard against abuse, neglect or exploitation
- managing risk and assisting staff in identifying the need for the planned use of a restrictive practice
- ensuring compliance with the conditions of a restrictive practice approval
- ensuring the development of Positive Behaviour Support Plans are completed within the specified timeframe
- monitoring the use and effectiveness of the restrictive practice through data collection, team meetings and feedback from the child, family or guardian and staff
- analysing incident data and trends to identify strategies to safely eliminate the use of restrictive practices
- reviewing the Positive Behaviour Support Plan (restrictive practices) regularly, when circumstances change and formally at least once per year
- ensuring all reportable incidents are reported to the Chief Executive Officer and mandatory reporting requirements are met
- ensuring all reportable incidents are reported to the NDIS Commission
- commencing performance management processes where staff are not implementing Positive Behaviour Management Plans appropriately; and
- ensuring compliance with this policy by all staff.

Client Liaison Officers are responsible for:

- ensuring staff have sufficient knowledge of the requirements for the lawful use of a restrictive practice
- assisting staff in identifying the need for the planned use of a restrictive practice
- supporting and collaborating with the Behaviour Support Practitioner in the development of a Positive Behaviour Support Plan
- ensuring each Positive Behaviour Support Plan has strategies that are person-centred and the least restrictive
- ensuring a documented Positive Behaviour Support Plan is in place for each child who has a restrictive practice
- ensuring all staff are trained in the use of Positive Behaviour Support Plans and have the skills and knowledge required to use the restrictive practice appropriately
- ensuring compliance with the conditions of a restrictive practice approval
- monitoring the use of a restrictive practice to safeguard against abuse, neglect or exploitation
- monitoring the use and effectiveness of the restrictive practice through data collection, team meetings and feedback from the child, family or guardian and staff
- analysing incident data and trends to identify strategies to safely eliminate the use of restrictive practices
- reviewing the Positive Behaviour Support Plan (restrictive practices) regularly, when circumstances change and formally at least once per year

- ensuring all reportable incidents are reported to the Line Manager and mandatory reporting requirements are met
- being familiar with and complying with the legislative requirements on the use of restrictive practices as described in the *NDIS Act 2013* and the *NDIS (Restrictive Practices and Behaviour Support) Rules 2018*
- commencing performance management processes where staff are not implementing Positive Behaviour Management Plans appropriately
- upholding and complying with this policy; and
- ensuring staff uphold and comply with this policy.

Support Workers are responsible for:

- ensuring the safety and well-being of the child
- being familiar with and complying with the legislative requirements on the use of restrictive practices as described in the *NDIS Act 2013* and the *NDIS (Restrictive Practices and Behaviour Support) Rules 2018*
- attending training relating to the use of restrictive practices
- collaborating with the Behaviour Support Practitioner in the development of a Positive Behaviour Support Plan
- implementing and using restrictive practices appropriately and lawfully as outlined in the child's Positive Behaviour Support Plan
- accurately documenting and reporting reportable incidents to the Line Manager
- documenting and reporting the use of the restrictive practice and providing feedback on its use to the Line Manager and at team meetings
- participating in reviews relating to the use of restrictive practices for a child; and
- upholding and complying with this policy.

16. Authority:

National Disability Insurance Scheme Act 2013

National Disability Insurance Scheme (Restrictive Practices and Behaviour Support) Rules 2018

17. Related Legislation, Procedures, Guidelines:

Restrictive Practices Children Policy

Reportable Incidents (Unauthorised use of Restrictive Practices) Policy

Reportable Incidents (Unauthorised use of Restrictive Practices) Procedure

Note: If there is any inconsistency between the policy and related procedure and the *NDIS Act 2013* or *NDIS (Restrictive Practices and Behaviour Support) Rules 2018*, the provision in the *NDIS Act 2013* or *NDIS (Restrictive Practices and Behaviour Support) Rules 2018* applies to the extent of the inconsistency.

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