



Coronavirus (COVID-19): Behaviour support and restrictive practices

This information is to assist NDIS providers to better understand behaviour support and restrictive practices due to COVID-19.

We are here to help. Contact us if you need direction or clarification on your responsibilities.

Key points:

- Current advice from the Commonwealth Chief Medical Officer is that people confirmed as having COVID-19 must be isolated.
- Everyone must adhere to the measures limiting public gatherings. Information on this can be found on the [Australian Government Coronavirus \(COVID-19\)](#) webpage.
- Isolating an NDIS participant based on **medical advice that is consistent with the Commonwealth Chief Medical Officer**, and/or preventing that person from public gatherings that are currently limited, is **NOT** considered an NDIS Commission regulated restrictive practice.
- Any practice that is inconsistent with the Australian Government Chief Medical Officer's advice or directions from state and territory governments regarding COVID-19 may be an environmental restraint or seclusion.
- If you are implementing a new restrictive practice, you must facilitate steps to engage an NDIS Behaviour Support practitioner to obtain an interim behaviour support plan.

Briefing NDIS participants about changes to their day-day activity plans

To allow the person to **exercise choice and control** over decisions that affect them:

- Speak to them about COVID-19 and seek their input about sudden changes to their activities due to the measures being implemented.
- Provide them with the right information and seek their views, as this will help you develop different strategies and approaches.
- Share information about adjustments and changes that may happen because of medical isolation and/or due to the closure of services.

Medical isolation

If a medical practitioner directs a person to isolate or be quarantined in line with the Australian Government Chief Medical Officer's advice then it is **NOT** considered an NDIS Commission regulated restrictive practice.



Practical guidance for NDIS participants with behaviour support needs

- In the case of a medically directed need for isolation, **review the person's behaviour support plan** (if they have one) for any recommendations for managing their behaviours of concern as well as the common triggers for their behaviour.
- Many community access services will be affected by the measures limiting public gatherings. **Activate a business continuity plan**, such as providing alternative community access that complies with state or territory requirements, or at-home activities.
- Identify the **person's preferred modes of communication**, as effective communication can help to reduce their anxiety about any changes that need to happen.
- If the person you support wishes to attend public gatherings that they typically participate in, and those gatherings are currently limited, it is critical that you **gently explain to them why they cannot** participate during this period. Refer to their behaviour support plan (if they have one) for any recommendations before doing so.
- If the person does not have a behaviour support plan, draw on your existing **understanding of their interaction and communication preferences**. Or ask someone who knows them well, what those preferences are.
- Consider known **triggers for the person's behaviour of concern** and put in place strategies to mitigate these. Some common triggers are boredom, sudden changes to routines, missing friends or families, and communication difficulties.
- Take into account the **person's preferences** when preparing activities or indoor recreational activities that may be used for time in isolation at home. Ask what they wish to do or offer alternatives that are not inconsistent with the Commonwealth Chief Medical Officer's advice. For example, cooking or baking together at home, fun recreational activities that adhere to social distancing requirements at the home, or going for walks.
- Implementing social distancing amongst between the people you support and your workers may be challenging in certain environments. It is useful to **explain to everyone the need for and importance of social distancing** and ask them what activities they wish to do. For example, some may prefer to do activities on their own or where they do not need to be in close proximity with others. These activities may include a social story-telling activity, individual art or craft, spending time in one's own room to play computer games, read a book or write a journal, individual dance (e.g. "silent disco") or sing-along sessions.
- Maintaining the **person's social and family network** through telephone, social media or videoconferencing facilities are helpful in ensuring connectedness to friends and families during this period of COVID-19 isolation. Some activity ideas include sharing news or stories using video-phone links or sending photos of themselves doing an activity or sharing news via the telephone.
- Consider rostering **support staff with whom the person is familiar** or gets along well with.



Behaviours of concern after risk mitigation strategies are implemented

- Any requirements to self-isolate or quarantine (as set out in state or territory Public Health Orders) may, at times, lead to the subsequent use of restrictive practices. For example, if the health order to self-isolate leads to a person being confused or angry about being in 'isolation', which then leads to behaviours of concern (such as leaving their home unsupported placing the person at risk), you may need to apply an environmental restraint, such as locking the doors for this period. **It is not a reportable incident if it is within the required period for self-isolation** as directed by the Commonwealth Chief Medical Officer to the whole community.
- However, if a physical restraint is used to prevent a person leaving the home, **then it is a regulated restrictive practice and its use is reportable**. If the physical restraint is not part of the person's existing behaviour support plan then it is a reportable incident.
- To prevent resorting to the use of physical restraint, it is important to speak to the person about why self-isolation and social distancing are needed. During this difficult time, it is more important to focus on **comforting and reassuring** the person, and providing them with a level of safe choice and control. The use of physical restraint should be the last resort of intervention.
- Staff supporting a person who is in isolation need to follow appropriate universal **infection control precautions**.
- Contact the person's **specialist behaviour support practitioner** or any other behaviour support practitioner in your organisation that may be able to assist.

Implementing a new regulated restrictive practice to support an NDIS participant

The following NDIS provider requirements apply when using regulated restrictive practices.

If a new restrictive practice for an NDIS participant is identified as needed, you must facilitate steps to engage an NDIS Behaviour Support practitioner to obtain an **interim behaviour support plan and a comprehensive behaviour support plan** for that person. This may require an NDIS plan review or locating an appropriate service providers. The list of service providers can be found on the NDIS 'myplace provider portal' under the service provider finder. Search for providers by their name, profession or support category. Where appropriate and available behaviour support plans can be done over the phone.

If this restrictive practice is not in accordance with a behaviour support plan and does not have current authorisation from your state or territory, it is a reportable incident to the NDIS Commission as an unauthorised restrictive practice.

Using restrictive practices as a 'precaution'

If you isolate an NDIS participant because you are concerned about their health but there is no directive from a medical practitioner that is in line with the Commonwealth Chief Medical Officer's advice, then this could be a regulated restrictive practice. You should follow the Australian Government's advice on COVID-19 symptoms and always seek medical advice where a person's health presents a concern.

Your workers should never make assumptions about the nature of the person's health issue, or disregard symptoms that may relate to COVID-19.

It is **not a regulated restrictive practice** if there is a self-isolation order or any other direction to the community as a whole that is issued by the Australian Government Chief Medical Officer or as directed by state and territory Chief Health Officers.



If your decision causes an NDIS participant to have more restricted access to the community than they would normally have, within the current limits on public gatherings, then it may be an **environmental restraint or seclusion**. For example, a person normally visits their friend over the weekend. The friend is not sick. It is a regulated restrictive practice if you prevent the person from visiting the friend who is not sick.

The NDIS Commission recognises that this advice needs to be considered in the context of community movement restrictions, which may be progressively put in place across Australia.

Definitions

Under the NDIS (Restrictive Practice and Behaviour Support) Rules 2018:

- **Environmental restraint** is defined as ‘restrict a person’s free access to all parts of their environment, including items or activities’.
- **Seclusion** is defined as ‘Seclusion, which is the sole confinement of a person with disability 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.’

Further information, alerts and resources

The [Coronavirus \(COVID-19\) information webpage](#) on the NDIS Commission website contains links to updates, training, alerts and other resources.

Contact Us

Call: 1800 035 544 (free call from landlines). Our contact centre is open 9.00am to 4.30pm in the NT, 9.00am to 5.00pm in the ACT, NSW, QLD, SA, TAS and VIC Monday to Friday, excluding public holidays.

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