



# National Disability Insurance Scheme Behaviour Support Plans for Regulated Restrictive Practices in Aged Care Procedure

## 1. Purpose

WA Country Health Service (WACHS) is registered as a National Disability Insurance Scheme (NDIS) provider for residential aged care. WACHS is subject to the requirements of the *NDIS Act 2013* (Cwlth) and must comply with the [NDIS Practice Standards and Quality Indicators](#), module 2A Implementing behaviour support plans.

Compliance with module 2A is regulated by the NDIS Quality and Safeguards Commission (NDIS Commission) which is a Commonwealth statutory body established under the *NDIS Act 2013* (Cwlth).

## 2. Procedure

The Department of Communities [Procedure Guidelines for Authorisation of Restrictive Practices in NDIS Funded Disability Services stage two](#) should be read in conjunction with the following policies:

- [Restraint Minimisation Policy](#), which seeks for all WACHS health services to eliminate or minimise where possible the use of restrictive practices.
- The Western Australia Department of Communities [Authorisation of Restrictive Practices in Funded Disability Services Policy](#), which establishes the requirements for authorisation of restrictive practices for people who receive disability services through the NDIS or the State Government.

### 2.1 Identify the need for use of a regulated restrictive practice for a NDIS resident

The Registered nurse (RN) identifies the need for the use of a regulated restrictive practice and follows the [Restraint Minimisation Policy](#) and assesses the need using the:

- [RC13 WACHS Behaviour Assessment and Support Plan](#)
- [RC43 WACHS Restraint assessment](#)

Each restrictive practice for NDIS residents requires authorisation prior to use (excluding emergency situations) in accordance with the [Department of Communities Authorisation of Restrictive Practices in Funded Disability Services Policy](#).

**Note:** The five categories of regulated restrictive practices for NDIS residents are the same as for aged care residents: seclusion, chemical restraint, physical restraint, mechanical restraint and environmental restraint. However, a restrictive practice can only be used with a NDIS resident with prior authorisation from the Quality Assurance Panel.

### 2.2 Process for restrictive practice authorisation

Before using the restrictive practice, the RN should determine if the restrictive practice has been authorised by the Quality Assurance Panel (see [Appendix A](#)). The RN should read

[Appendix A](#) which details the requirements for the panel and the authorisation process for a restrictive practice. The RN can determine if authorisation of the restrictive practice has been approved by reviewing:

- [RC7 WACHS Resident Care Plan](#)
- [RC13 WACHS Behaviour Assessment and Support Plan](#)
- [RC43 WACHS Restraint assessment](#)

If a behaviour support plan is documented and authorisation from the Quality Assurance Panel is in place the restrictive practice can be used. It must be reported monthly by the clinical nurse manager / nominated senior staff member to the NDIS Commission portal.

If there is no authorisation in place by the Quality Assurance Panel the following actions should occur:

- Within 5 days report every individual use of the unauthorised regulated restrictive practice as a reportable incident through the NDIS Commission portal.
- Check the resident has funding for behaviour support in the NDIS plan and if the resident does not have funding for behaviour support, then discuss with the resident/family/substitute decision maker/carer and with consent contact the NDIS planner to seek funding for behaviour support.
- Facilitate the development of an **interim behaviour support plan** with the NDIS specialist behaviour support provider within 1 month of first using the regulated restrictive practice (see [Appendix A](#)). Noting the consent of the resident or substitute decision maker is required to liaise with the behaviour support practitioner.
- Facilitate the development of a **comprehensive interim behaviour support plan** with the NDIS specialist behaviour support provider within 6 months of first using the regulated restrictive practice (see [Appendix A](#)).
- Report monthly on the use of the restricted practice once the new behaviour support plan is lodged with the NDIS Commission.

A flowchart of this process for residential aged care providers is available; [Residential aged care providers: Behaviour support and restrictive practice requirements](#)<sup>4</sup>

A flowchart of the process for the resident (individual/family), the implementing provider (WACHS) and the (NDIS) behaviour support practitioner is available in [Procedure Guidelines for Authorisation of Restrictive Practices in NDIS Funded Disability Services stage two](#), Appendix 1: Regulated restrictive practices flow.

### 3. Roles and Responsibilities

**Regional Directors** are responsible for assurance and compliance with the NDIS Practice Standards and Quality Indicators.

**Regional Aged Care Managers** are responsible for ensuring procedure implementation and compliance across their region.

**Senior Clinicians** are responsible for:

- complying with the Department of Communities [Procedure Guidelines for Authorisation of Restrictive Practices in NDIS Funded Disability Services stage two](#)
- facilitating, participating and meeting Quality Assurance Panel requirements
- reporting restrictive practices to the NDIS Commission.

**All staff** are required to work within policies and guidelines to make sure that WACHS is a safe, equitable and positive place to be. Staff should deliver a culturally safe and responsive service, ensuring the rights, views, values, and expectations of Aboriginal people are recognised and respected and met where possible.

## 4. Monitoring and Evaluation

### 4.1 Monitoring

Monitoring of this procedure will be undertaken by:

- the Aged Care Directorate to ensure compliance with the [Procedure Guidelines for Authorisation of Restrictive Practices in NDIS Funded Disability Services stage two](#)
- the Aged Care Quality and Performance meeting
- each region engaging in site specific monitoring.

### 4.2 Evaluation

Three monthly auditing should occur at a site level by the manager or coordinator of nursing for the authorisation of restrictive practices for NDIS residents.

The WACHS Aged Care Directorate will conduct regular audits of the Quality Assurance Panel process.

## 5. Compliance

This procedure is a mandatory requirement under the NDIS (Incident Management and Reportable Incidents) Rules 208 and the Western Australia Department of Communities [Authorisation of Restrictive Practices in Funded Disability Services Policy](#).

Failure to comply with this procedure may constitute a breach of the WA Health Code of Conduct (Code). The Code is part of the [Integrity Policy Framework](#) issued pursuant to Section 26 of the [Health Services Act 2016](#) and is binding on all WACHS staff which for this purpose includes trainees, students, volunteers, researchers, contractors for service (including all visiting health professionals and agency staff) and persons delivering training or education within WACHS.

## 6. References

1. Government of Western Australia [Internet] [Authorisation of Restrictive Practices in Funded Disability Services Policy](#). Perth WA: Department of Communities; 2021 [cited 06 July 2023] [Accessed 21 July 2023]
2. Government of Western Australia [Internet] [Procedure guidelines for authorisation of restrictive practices in NDIS funded disability services-stage two](#). Perth WA: Department of Communities; 2021 [cited 06 July 2023] [Accessed 21 July 2023]
3. Australian Government [Internet] Penrith NSW: [NDIS Quality and Safeguards Commission.2023](#) [Accessed 21 July 2023]
4. Australian Government [Internet] Penrith NSW: [Residential aged care providers: Behaviour support and restrictive practice requirements](#). National Disability Insurance Scheme Quality and Safeguards Commission [cited 06 July 2023] [Accessed 21 July 2023]

## 7. Definitions

Term	Definition
<b>Aboriginal</b>	Within Western Australia, the term Aboriginal is used in preference to Aboriginal and Torres Strait Islander, in recognition that Aboriginal people are the original inhabitants of Western Australia. No disrespect is intended to our Torres Strait Islander colleagues and community ( <a href="#">WACHS Aboriginal Health Strategy 2019-24</a> )
<b>National Disability Insurance Scheme</b>	National Disability Insurance Scheme (NDIS) supports people with a permanent and significant disability that affects their ability to take part in everyday activities. Detailed information is available from <a href="#">National Disability Insurance Scheme</a>
<b>National Disability Insurance Scheme Behaviour support plan</b>	A document that contains individualised strategies, evidence-based strategies to address the needs of a person identified as having behaviours of concern.
<b>National Disability Insurance Scheme Specialist behaviour support practitioner</b>	Person employed by a registered specialist behaviour support provider or self-registered with the NDIS Commission, who the Commission deems suitable to undertake behaviour support assessments and to develop behaviour support plans.
<b>Quality Assurance Panel</b>	Consists of a senior manager from WACHS, a NDIS behaviour support practitioner who is not the author of the behaviour support plan and a member of the Aged Care Directorate. The panel reviews each regulated restrictive practice that is recommended in the behaviour support plan.
<b>Regulated Restrictive practice</b>	Any practice or intervention that has the effect of restricting the rights or freedom of movement of a person with disability. The five categories of regulated restrictive practices are seclusion, chemical restraint, physical restraint, mechanical restraint and environmental restraint.

## 8. Document Summary

<b>Coverage</b>	WACHS wide
<b>Audience</b>	Residential Aged Care Staff working with NDIS participants
<b>Records Management</b>	Corporate <a href="#">Recordkeeping Compliance Policy</a> <a href="#">Health Record Management Policy</a>
<b>Related Legislation</b>	<ul style="list-style-type: none"> <li>• <a href="#">National Disability Insurance Scheme Act 2013</a> (Cth)</li> <li>• <a href="#">Health Services Act 2016</a> (WA)</li> <li>• <a href="#">Disability Services Act 1993</a> (WA)</li> </ul>
<b>Related Mandatory Policies / Frameworks</b>	<ul style="list-style-type: none"> <li>• <a href="#">Clinical Governance Safety and Quality Framework</a></li> </ul>
<b>Related WACHS Policy Documents</b>	<ul style="list-style-type: none"> <li>• <a href="#">Adults with Impaired Decision Making Capacity Procedure</a></li> <li>• <a href="#">Engaging Consumer and Carer Representative Policy</a></li> <li>• <a href="#">Restraint Minimisation Policy</a></li> </ul>
<b>Other Related Documents</b>	<ul style="list-style-type: none"> <li>• <a href="#">Authorisation of Restrictive Practices in Funded Disability Services Policy</a></li> <li>• <a href="#">National Disability Insurance Scheme Practice Standards</a></li> <li>• <a href="#">National Framework for Reducing and Eliminating the Use of Restricted Practices in the Disability service sector</a></li> <li>• <a href="#">Procedure Guidelines for Authorisation of Restrictive Practices in NDIS Funded Disability Services stage two</a></li> <li>• <a href="#">Quality Assurance Panel Outcomes Summary Report</a></li> </ul>
<b>Related Forms</b>	<ul style="list-style-type: none"> <li>• <a href="#">RC6 WACHS Specific Care Plan</a></li> <li>• <a href="#">RC7 WACHS Resident Care Plan</a></li> <li>• <a href="#">RC13 WACHS Behaviour Assessment and Support Plan</a></li> <li>• <a href="#">RC43 WACHS Restraint Assessment</a></li> <li>• <a href="#">RC44 WACHS Restraint Chart</a></li> </ul>
<b>Related Training Packages</b>	Nil
<b>Aboriginal Health Impact Statement Declaration (ISD)</b>	ISD Record ID: 2382
<b>National Safety and Quality Health Service (NSQHS) Standards</b>	1.10, 2.06, 5.33,5.35,5.36, 6.02, 6.04, 6.11
<b>Aged Care Quality Standards</b>	Standard 1 and 8
<b>National Standards for Mental Health Services</b>	Nil

## 9. Document Control

Version	Published date	Current from	Summary of changes
1.00	14 Sept 2023	14 Sept 2023	New procedure
1.01	2 February 2024	14 Sept 2023	<ul style="list-style-type: none"> <li>fixed broken link - Procedure Guidelines for Authorisation of Restrictive Practices in NDIS Funded Disability Services stage two.</li> <li>amended title of Consumer and Carer Engagement Policy, now Engaging Consumer and Carer Representatives Policy.</li> </ul>
1.02	17 July 2024	14 Sept 2023	<ul style="list-style-type: none"> <li>fixed broken links</li> <li>changed panel membership from three to two</li> <li>added the Aged Care directorate as chair for the panel.</li> </ul>

## 10. Approval

<b>Policy Owner</b>	Chief Operating Officer
<b>Co-approver</b>	Executive Director Clinical Excellence Executive Director Nursing and Midwifery
<b>Contact</b>	Senior Project Officer Aged Care
<b>Business Unit</b>	Health Program – Aged Care
<b>EDRMS #</b>	ED-CO-23-303359
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**This document can be made available in alternative formats on request.**

## Appendix A: Quality Assurance Process (QAP) for authorising restrictive practices

The following information is a summary of the QAP process from the Department of Communities [Procedure Guidelines for Authorisation of Restrictive Practices in NDIS Funded Disability Services stage two](#).<sup>2</sup>

The use of a restrictive practice requires authorisation (excluding emergency situations), documentation in the behaviour support plan and review by a Quality Assurance Panel. Resident consent should be documented to share information between WACHS and the NDIS behaviour support practitioner.

The Quality Assurance Panel consists of at least two members with a decision-making role:

- a clinical nurse manager or (other senior staff member) from WACHS with operational knowledge and relevant experience in behaviour support.
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- a NDIS Behaviour Support Practitioner (BSP) who is not the BSP author and not employed by the Implementing Provider

The panel can agree to meet in a format that suits, such as face to face or video conferencing. If the resident has more than one NDIS provider and they need to implement the restrictive practice, then that provider should be part of the panel.

WACHS is responsible for:

- appointing a member of the WACHS Aged Care Directorate as the Chair for the Quality Assurance Panel
- convening or accessing Panel meetings
- arranging administrative support to the Panel
- ensuring the NDIS authorisation process reporting requirements are met.

The panel is responsible for reviewing the restrictive practices in the behaviour support plan against the principles of use;

The restrictive practice must:

- be clearly identified in the BSP
- be used only as a last resort in response to a risk of harm to the person with disability and/or others, and after WACHS has explored and applied other evidence-based, person-centred and proactive strategies
- be the least restrictive response possible in the circumstances to ensure the safety of the person and/or others:
  - when considering whether a restrictive practice is the least restrictive, it should be considered within a context of other alternatives that have an evidence base for being effective in addressing the presenting behaviour of concern.
- reduce the risk of harm to the person with disability and/or others
- be in proportion to the potential negative consequence or risk of harm
- be used for the shortest possible time to ensure the safety of the person with disability and/or others.

The panel should decide if the restrictive practice meets these principles and approve/or not approve the use of the restrictive practice. If the panel approves the regulated restricted practice it must:

- be supported by all panel members
- state the duration of the authorisation and must not exceed 12 months
- state any conditions that they decide to impose as part of the restrictive practice(s)
- documented in the [Quality Assurance Panel Outcomes Summary Report](#) and signed by Panel members.

The following documentation is required by the Panel:

- a BSP which includes information about the proposed regulated restrictive practice, including a description of how it will be implemented and the expected outcome
- evidence of less restrictive options having been attempted
- the responsibilities of those implementing the practice
- evidence that the restrictive practice can be implemented in the way specified by the BSP
- information about previous and current use of any regulated restrictive practice
- adequate governance arrangements in place within WACHS, such as for reporting, supervision and practice monitoring and regular reviews.

The WACHS panel member is responsible for:

- providing a copy of the Outcomes Summary Report to the behaviour support practitioner, the individual/family and other agreed stakeholders
- approving the behaviour support plan in the NDIS commission portal
- implementing the behaviour support plan
- reporting monthly to the NDIS commission
- trigger review
- updating the RC13 to identify a restrictive practice is in use
- updating the RC43 to note the outcome of the QAP.