

Restrictive Practices & Reportable incident

Policy and Procedure

1.Scope

The Participant's Service Delivery Manager holds the responsibility of ensuring that any restrictive practice outlined in a Behaviour Support Plan or Interim Behaviour Support Plan adheres to the legislative requirements set forth by the NDIS Commission and the Tasmanian State Government.

It is incumbent upon TassieCare Services to ensure that its practitioners diligently follow the guidelines stipulated by the NDIS Commission and the Department of Communities when seeking authorization to implement any restrictive practices. This commitment to compliance is essential in upholding the rights and well-being of individuals receiving support services from TassieCare.

2.Purpose

TassieCare Services is dedicated to providing effective strategies and Behaviour Support Plans aimed at preventing or mitigating behaviours of concern that pose potential harm or risk to the participant. Our primary focus is on ensuring that participants who exhibit such behaviours receive appropriate support within a safe environment, while also acknowledging and respecting their rights and individual needs.

Our team members are acutely aware that participants on occasion require the implementation of a regulated restrictive practice due to the nature of their challenging behaviours. However, we approach the implementation of such practices with the utmost care and consideration for the participant's well-being.

In line with our commitment to participant-centred care, we actively engage participants, their support networks (with the participant's consent or that of their representative), and other relevant stakeholders in the execution of strategies outlined in a Behaviour Support Plan or Interim Behaviour Support Plan.

This collaborative approach ensures that interventions are tailored to the unique needs of each participant and are implemented with the goal of minimizing risk and promoting their overall safety and well-being.

3.Policy

Under the supervision of the Director and/or Behaviour Support Practitioner, TassieCare Services oversees the development of Behaviour Support Plans and Interim Behaviour Support Plans, ensuring that participants and all relevant stakeholders are consulted throughout the process. The Service Delivery Manager holds responsibility for ensuring that Behaviour Support Plans are adhered to and updated in accordance with the outlined policies and procedures, including those related to Functional Behaviour Assessments.

Restrictive practices must only be implemented in line with an approved Behaviour Support Plan and in accordance with the NDIS Restrictive Practices and Behaviour Support Rules 2018 when there is an imminent risk of harm to the participant or others. **Any such practices included in the Behaviour Support Plan adhere to best practice guidelines, which mandate:**

- Utilising the least restrictive option available
- Employing the practice for the shortest duration feasible
- Reserving the use of restrictive practices solely to prevent harm.

- Employing restrictive practices as a last resort
- Ensuring they are not employed as punitive measures.
- Avoiding their use for staff convenience

Consent from the participant or their representative is obtained regarding the inclusion of restrictive practices in a Behaviour Support Plan.

During ongoing monitoring of the participant's Behaviour Support Plan, our practitioners collaborate with the participant and relevant stakeholders to:

- Explore alternatives to restrictive practices.
- Assess the effectiveness of implementation strategies.
- Evaluate current approaches using data to reduce or eliminate the need for restrictive practices.
- Our practitioners are committed to ongoing professional development to maintain an understanding of restrictive practices and associated risks, as outlined in the NDIS (Restrictive Practices and Behaviour Support) Rule 2018, as well as meeting Tasmanian legislation requirements for authorized use.

To minimise and eliminate the need for restrictive practices, TassieCare Services plans to:

- Foster a positive, safe, and collaborative organizational culture.
- Implement significant changes in service design, policies, practices, training, and tools.
- Enhance interdisciplinary collaboration between service providers and sectors.
- Promote cultural competence and awareness among staff.
- Facilitate closer and more informed relationships between service providers, participants, families, and carers.

4.Procedure

TassieCare Services conducts periodic audits to review the use of restrictive practices within our service delivery framework. The primary objective of these audits is to identify any instances of restrictive practices employed in serving our participants and to ensure that all practices adhere to the legislative guidelines set forth by the Tasmanian Department of Communities and the NDIS Commission.

Any identified restrictive practices are documented and recorded in our Restrictive Practice Register, and relevant details are noted on the participant's file. This meticulous process helps us maintain transparency, accountability, and compliance with regulatory requirements while prioritizing the well-being and rights of our participants.

4.1 Risk Management

TassieCare Services implements the principles outlined in our Risk Management Policy and Procedure to ensure any restrictive practices included in Behaviour Support Plans maintain the safety of both the participant and other parties. **To this end, our team manages risk by:**

- Consulting and collaborating with the participant, their support network (with participant consent), Implementing Providers, and any other relevant stakeholders regarding: the need for restrictive practices risks involved in restrictive practice use.
- promoting alternatives to the use of restrictive practices
- seeking approval from the participant to use any restrictive practice.
- ensuring practices are proportional to the risk of harm to the participant or others o completing documents (e.g. Risk Evaluation Form – Behaviour Support Management)

- devising risk management strategies and training Implementing Provider staff
- providing Implementing Providers with an Individual Response Plan to inform and reduce risks.

TassieCare Services is committed to implementing robust risk management practices, as outlined in our Risk Management Policy and Procedure, to ensure that any restrictive practices included in Behaviour Support Plans prioritize the safety of both the participant and other involved parties. To achieve this, our team adheres to the following principles:

1. **Consultation and Collaboration:** We engage in open communication and collaboration with the participant, their support network (with participant consent), Implementing Providers, and other relevant stakeholders. This includes discussing the necessity of restrictive practices, the associated risks, promoting alternatives, and seeking approval from the participant before implementing any restrictive practice.
2. **Proportionality:** We ensure that the use of restrictive practices is proportionate to the level of risk posed to the participant or others. This means carefully evaluating the situation and selecting the least restrictive intervention necessary to manage the identified risks effectively.
3. **Documentation:** We maintain thorough documentation of our risk management processes, including completing documents such as the Risk Evaluation Form - Behaviour Support Management. This documentation serves as a record of the decision-making process and helps ensure accountability and transparency.
4. **Risk Management Strategies:** We devise comprehensive risk management strategies tailored to the specific needs and circumstances of the participant. These strategies are designed to mitigate risks associated with restrictive practices while promoting the participant's safety and well-being.
5. **Staff Training:** We provide ongoing training to Implementing Provider staff to ensure they are equipped with the knowledge and skills necessary to implement restrictive practices safely and effectively. This training emphasizes the importance of adhering to established protocols and guidelines while prioritizing the dignity and rights of the participant.
6. **Individual Response Plan:** We develop an Individual Response Plan for each participant, which outlines specific strategies and interventions to address and reduce risks effectively. This plan serves as a proactive approach to managing challenging behaviours and minimizing the need for restrictive practices whenever possible.

By adhering to these principles and practices, TassieCare Services strives to ensure that the use of restrictive practices is conducted in a manner that prioritizes the safety, dignity, and rights of our participants while maintaining compliance with regulatory requirements.

4.2 Restricted practice implementation

The implementation of a restrictive practice agreed upon by TassieCare Services and key stakeholders must adhere to the following guidelines:

1. **Informed Consent:** The implementation of the restrictive practice requires the informed consent of the participant, or if the participant lacks the capacity to provide consent, the consent of their advocate or guardian. This ensures that the participant's rights and preferences are respected throughout the process.
2. **Shortest Possible Time:** The restrictive practice should only be implemented for the shortest possible duration necessary, while efforts are made to develop a more appropriate support arrangement. This approach prioritizes the participant's well-being and aims to minimize the duration of any restrictive interventions.
3. **Supervision:** The implementation of the restrictive practice must be conducted under the supervision of a designated, experienced Implementing Provider staff member who is on duty at the time. This ensures that the practice is carried out safely, effectively, and in accordance with established protocols and guidelines.

4. **Inclusion in Behaviour Support Plan:** The restrictive practice must be included as part of the participant's Behaviour Support Plan. This ensures that the practice is justified within the context of the participant's individual needs and circumstances and is implemented in a manner consistent with their overall support plan.

By adhering to these guidelines, TassieCare Services ensures that the implementation of restrictive practices is conducted in a manner that upholds the rights, safety, and dignity of the participant, while also promoting transparency, accountability, and compliance with regulatory requirements.

4.3 Behaviour Support Plan Strategies

The development of the Behaviour Support Plan at TassieCare Services is guided by several key principles and strategies to ensure the well-being and safety of the participant while promoting positive outcomes. These include:

1. **Evidence Gathering:** Information about the participant is gathered from various sources such as health practitioners, families, or others living with the participant to inform the development of the plan.
2. **Person-Centred Approach:** The participant is placed at the centre of the plan, ensuring that it is tailored to their individual needs, preferences, and goals.
3. **Proactive Action:** The plan is designed to be proactive, addressing potential issues before they escalate into challenging behaviours.
4. **Addressing Needs and Functions of Behaviour:** The plan addresses the specific needs of the participant and identifies the functions of their behaviour, seeking to understand why certain behaviours occur.
5. **Positive and Proactive Strategies:** Strategies are developed to promote positive approaches to behaviour support, including reducing or eliminating the use of restrictive practices. These may include managing triggers effectively, creating supportive environments, teaching new skills, and providing alternative behaviours.
6. **Incident Management:** Plans include actions for staff to undertake during incidents to ensure the safety of all parties involved, as well as processes for reporting and debriefing after incidents occur.
7. **Staff Training and Supervision:** Implementing Provider staff are trained and supervised in escalation awareness, ensuring they are equipped to respond effectively to challenging behaviours.
8. **Approval and Review:** Any restrictive practice used must be approved by a NDIS Implementing Provider as per the participant's Behaviour Support Plan, which is reviewed at least every 12 months or as needed.
9. **Withdrawal of Unused Practices:** Restrictive practices not used within the 12-month audit period are automatically withdrawn and considered eliminated from use.
10. **Monitoring and Communication:** Service Delivery Managers monitor participants with Behaviour Support Plans to ensure all staff and stakeholders are informed of any changes or requirements. Meetings with key stakeholders are held to discuss new plan requirements or adjustments, with documentation kept in the participant's file.
11. **Prohibited Practices:** TassieCare Services prohibits practices that are considered abusive, unethical, or unlawful and ensures compliance with relevant legislation, policies, and procedures.
12. **Cultural Considerations:** Cultural requirements are incorporated into the Behaviour Support Plan, with staff trained in implementing strategies to meet the participant's cultural needs.

By adhering to these principles and strategies, TassieCare Services aims to provide effective and compassionate support to participants while upholding their rights and promoting their well-being.

4.4 Collaboration

Collaboration plays a crucial role in the reduction and elimination of restrictive practices within TassieCare Services' Behaviour Support Plans. To ensure compliance with the NDIS (Restrictive Practices and Behaviours Support) Rules 2018 and to develop appropriate, relevant, and person-centred plans, we actively engage with all support networks, including Implementing Providers. Our collaboration process involves the following key steps:

1. **Arranging and Attending Meetings:** We organize and participate in relevant meetings with all stakeholders involved in the participant's support network. These meetings provide an opportunity to discuss the participant's needs, gather input, and develop comprehensive plans collaboratively.
2. **Evidence Gathering:** We collect evidence from various sources to inform our practice and decision-making process. This may include input from health practitioners, families, or others closely involved with the participant.
3. **Completing Reports and Forms:** We ensure that all necessary reports and relevant forms are completed accurately and in a timely manner. This documentation is essential for maintaining transparency and compliance with regulatory requirements.
4. **Actioning Meeting Items:** We take proactive steps to action items identified during meetings, ensuring that plans are implemented effectively and in line with agreed-upon strategies.
5. **Staff Training:** We provide training to staff members on any required changes to ensure that they are equipped with the knowledge and skills necessary to implement the Behaviour Support Plans effectively.
6. **Input into Participant Database:** We provide input into the participant database to ensure that all relevant information is accurately recorded and accessible to authorized personnel.
7. **Annual Reviews:** We conduct annual reviews of Behaviour Support Plans to assess their effectiveness and make any necessary adjustments to meet the participant's evolving needs.
8. **Reviews as Required:** We conduct reviews as required to address any changes in the participant's circumstances or to ensure that their current needs are being met effectively.

By engaging in a collaborative approach that involves all stakeholders and adhering to these steps, TassieCare Services aims to develop and implement Behaviour Support Plans that prioritize the participant's well-being while promoting the reduction and elimination of restrictive practices.

4.5 Review of Behaviour Support Plans containing regulated restrictive practices

The review of Behaviour Support Plans containing regulated restrictive practices at TassieCare Services is conducted in accordance with specific guidelines to ensure ongoing effectiveness and compliance. Here's an overview of the review process:

1. **Review by Specialist Behaviour Support Practitioner:** A Comprehensive Behaviour Support Plan containing a regulated restrictive practice is reviewed by a TassieCare Services Specialist Behaviour Support Practitioner. This review is prompted by changes in circumstances requiring plan amendments or at least every 12 months while the plan is in force. Only practitioners who have been deemed suitable under the NDIS Behaviour Support Practitioner Capability Framework and are registered as Specialist Practitioners with the NDIS Commission are authorised to develop and lodge support plans containing regulated restrictive practices.
2. **Plan Lodging with NDIS Commissioner:** Behaviour Support Plans containing regulated restrictive practices are lodged by the Behaviour Support Practitioner with the NDIS Commissioner promptly after their development. All Behaviour Support Plans that contain regulated restrictive practice must be lodged with the NDIS Commission within one month of implantation.
3. **Outcomes/Closure Report Development:** The review process involves the development of an outcomes/closure report, such as the BSP Review - Outcomes Report. This report is based on several key factors:

- **Achievement of Goals:** Assessing whether the goals outlined in the Behaviour Support Plan have been achieved.
- **Results of Behaviour Support:** Evaluating the effectiveness of behaviour support interventions in managing challenging behaviours.
- **Reduction or Elimination:** Documenting any reduction or elimination of restrictive practices and their impact on the participant's behaviour and well-being.
- **Improvement of Quality of Life:** Examining whether the participant's quality of life has improved as a result of the behaviour support interventions.
- **Impact on NDIS Plan:** Considering the outcomes of the Behaviour Support Plan in the context of the participant's NDIS plan for the following year.

The outcomes/closure report provides a comprehensive overview of the effectiveness of the Behaviour Support Plan and serves as a basis for future planning and intervention strategies.

By following these review procedures, TassieCare Services aims to ensure that Behaviour Support Plans are regularly assessed, modified as necessary, and contribute to the overall well-being and quality of life of participants while complying with regulatory requirements.

4.6 Recordkeeping and reporting

Record-keeping and reporting are essential components of TassieCare Services' commitment to ensuring compliance, transparency, and the well-being of participants. Here's an overview of the record-keeping and reporting procedures:

1. **Documentation of Compliance and Reduction of Restrictive Practices:**
 - Records should document compliance in the use of regulated restrictive practices, ensuring that these practices are implemented in accordance with established guidelines and regulatory requirements.
 - Additionally, records should reflect efforts made towards the reduction and minimization of regulated restrictive practices, including the exploration and implementation of alternative strategies whenever possible.
2. **Contents of Records:**
 - Authorized and proposed Behaviour Support Plans, along with decisions to approve, reject, or modify these plans, should be documented.
 - Records of the use of regulated restrictive practices should include detailed information such as:
 - Description of the practice's use, including its impact and any resulting injuries.
 - Description of the participant's behaviour leading to the practice's use.
 - Time, date, and place of the practice's initiation and conclusion.
 - Names and contact details of individuals involved and any witnesses.
 - Actions taken in response to the practice's use.
 - Details of less restrictive options considered or used before resorting to the practice.
 - Actions taken leading up to the practice's use, including preventive strategies employed.
 - Documentation should also indicate whether the use of the restrictive practice was a reportable incident and the reasons for its use.
3. **Retention Period:** Records will be maintained for seven years from the date they were created.
4. **Monitoring of Implementing Providers:**
 - TassieCare Services will oversee Implementing Providers to ensure compliance with the reporting requirements set by the NDIS Commission.
 - This monitoring includes:

- Providing a monthly report detailing the use of regulated restrictive practices, including instances of nil use.
- Providing a fortnightly report (every two weeks) when approval has been granted for the short-term use of a regulated restrictive practice and while the approval remains valid.

By adhering to these record-keeping and reporting procedures, TassieCare Services aims to uphold regulatory standards, promote transparency, and ensure the well-being and safety of all participants.

4.7 Regulated restrictive practices as reportable incidents

Any use of an unauthorised restrictive practice, defined as a regulated practice implemented without the appropriate authorisation or submission to the NDIS Commission must be treated as a reportable incident. Non-therapeutic or prohibited practices, including any use of restraint for convenience or punishment, are strictly forbidden and constitute a breach of the NDIS Code of Conduct

In the event of an unauthorised restrictive practice occurring, it is classified as a reportable incident and must be promptly reported to the NDIS Commissioner. While TassieCare Services will initiate the reportable incident reporting process if one of its practitioners is involved in developing the Behaviour Support Plan or Interim Behaviour Support Plan, it is more probable that the Implementing Provider will be the reporting organisation.

This is because Implementing Providers are primarily responsible for implementing behaviour supports and are likely to be directly involved in any incidents related to their implementation.

The reportable incident reporting process typically involves the following steps:

1. **Identification of Incident:** Any occurrence of an unauthorised restrictive practice or other reportable incident is identified by the involved parties or through internal monitoring processes.
2. **Documentation:** Detailed documentation of the incident is prepared, including relevant information such as the nature of the incident, individuals involved, date, time, and location.
3. **Notification:** The incident is promptly reported to the NDIS Commissioner in accordance with regulatory requirements. This notification typically includes a summary of the incident and any immediate actions taken.
4. **Investigation:** An investigation into the incident is conducted to determine its root causes, contributing factors, and any necessary corrective actions.
5. **Corrective Actions:** Based on the findings of the investigation, appropriate corrective actions are implemented to address any deficiencies or risks identified and prevent recurrence.
6. **Follow-Up:** Ongoing monitoring and follow-up are conducted to ensure that the corrective actions are effective and that similar incidents are prevented in the future.

By following this reportable incident reporting process, TassieCare Services and Implementing Providers can effectively address and mitigate the impact of unauthorised restrictive practices and uphold the safety and well-being of participants.

4.8 Immediate notification – report within 24 hours

In the event that a TassieCare Services staff member is involved in a reportable incident as outlined by the NDIS Commission, immediate notification procedures must be followed. Here's a summary of the process:

1. **Completion of Incident Report:** The TassieCare Services staff member involved in the incident completes a detailed Incident Report and Behaviour Analysis form. These documents provide essential information about the incident, including the nature of the event, individuals involved, and any relevant details.
2. **Compliance Teams Action:** The completed Incident Report and Behaviour Analysis form are submitted to the Reporting Officer within TassieCare Services. This officer is responsible for overseeing the reporting process and ensuring compliance with regulatory requirements.
3. **Completion of Immediate Notification Form:** The Compliance team completes an Immediate Notification online form via the NDIS Commission Provider Portal. This form must be submitted within 24 hours of TassieCare Services becoming aware of the reportable incident.
4. **Nature of Reportable Incidents:** The Immediate Notification form is used to report specific types of incidents involving NDIS participants, including but not limited to:
 - Death of a NDIS participant
 - Serious injury of a NDIS participant
 - Abuse or neglect of a NDIS participant
 - Unlawful sexual or physical contact with or assault of a NDIS participant
 - Sexual misconduct committed against or in the presence of a NDIS participant, including grooming for sexual activity.
5. **Prompt Reporting:** It's crucial to adhere to the 24-hour reporting timeline to ensure timely communication with the NDIS Commission and prompt investigation and response to the incident.

By following these immediate notification procedures, TassieCare Services demonstrates its commitment to transparency, accountability, and the safety and well-being of NDIS participants.

4.9 5-day notification

In cases where a TassieCare Services staff member is involved in a reportable incident, including instances where a participant discloses a past incident, specific procedures must be followed to ensure appropriate reporting and response. Here's an overview:

1. **Completion of Incident Report:** The staff member involved in the incident, or who receives disclosure from a participant, completes a Behaviour Analysis form and Incident Report. These documents provide detailed information about the incident or disclosure, including date, time, location, individuals involved, and any relevant details.
2. **Reporting to the Compliance Team:** The completed Incident Report and Behaviour Analysis form are sent to the Compliance team within TassieCare Services. This officer is responsible for overseeing compliance with reporting requirements and ensuring that incidents are reported appropriately.
3. **Notification Process:** The Compliance Team follows the procedures outlined in the Reportable Incident, Accident, and Emergency Policy and Procedure. This may involve submitting a report to the NDIS Commission within a specified timeframe, such as the 5-day notification requirement.
4. **Treatment of Past Incidents:** If a participant discloses a past incident, it is treated the same way as any other reportable incident. However, the immediate response may differ based on the nature of the disclosure and whether the incident presents an ongoing risk to the participant or others.
5. **Further Details:** For more information on reporting incidents to the NDIS Commission and related procedures, staff members are directed to consult the Reportable Incident, Accident, and Emergency Policy and Procedure for comprehensive guidelines and instructions.

By following these procedures, TassieCare Services ensures that reportable incidents are promptly reported, investigated, and addressed in accordance with regulatory requirements, safeguarding the well-being and safety of NDIS participants.

4.10 Minimum requirements for the use of regulated restrictive practices

The minimum requirements for the use of regulated restrictive practices within TassieCare Services are stringent and aim to prioritize the safety and well-being of participants while promoting the reduction and eventual elimination of such practices. Here's an overview of these requirements:

1. **Inclusion in Behaviour Support Plan:** The regulated restrictive practice must be clearly identified and documented within the participant's Behaviour Support Plan. This ensures transparency and accountability in its implementation.
2. **Authorisation:** The use of the regulated restrictive practice must be authorized following Senior Practitioner processes and in accordance with the NDIS (Restrictive Practices and Behaviour Support) Rules 2018. This ensures that the practice is justified and meets regulatory standards.
3. **Last Resort:** The regulated restrictive practice should only be used as a last resort, in response to the risk of harm to the participant or others, after exploring and applying evidence-based, person-centred, and proactive strategies. This emphasizes the importance of exhaustively exploring alternative approaches before resorting to restrictive practices.
4. **Least Restrictive Response:** The practice must be the least restrictive response possible in the circumstances, ensuring that it minimizes limitations on the participant's freedom and autonomy while still effectively managing risks.
5. **Risk Reduction:** The practice should only be used to reduce the risk of harm to the participant or others, with the primary goal being the safety and well-being of all parties involved.
6. **Proportionality:** The use of the practice should be proportionate to the potential negative consequence or risk of harm, ensuring that it is not overly restrictive or disproportionate to the situation at hand.
7. **Duration:** The practice should only be used for the shortest possible time necessary to ensure the safety of the participant or others. This emphasizes the temporary nature of restrictive practices and the need to actively work towards alternative solutions.

Additionally, participants to whom Behaviour Support Plans apply must be given opportunities to participate in community activities and develop new skills that can reduce or eliminate the need for regulated restrictive practices in the future. This highlights the importance of holistic support and empowerment in promoting positive outcomes for participants.

By adhering to these minimum requirements, TassieCare Services aims to ensure ethical, responsible, and person-centred use of regulated restrictive practices, while also promoting the overall well-being and independence of participants.

4.11 Use of emergency Restrictive practice

If an RRP is to be used in an emergency, and is not written into the BSP plan, while it is required to be reported it is not always necessary to write the singular use of the RRP into the plan right away.

This could be because of consideration of the antecedent and behaviour context:

- Is this a sudden change in circumstance for the individual?; and
- Is this the first time or an extremely rare occurrence that they have elicited this behaviour?
- If these questions are asked and the answer is yes, and they have otherwise not shown the required use of an RRP before, then it may be considered a "one off instance" and it is not necessary to be written into the plan for its singular and only use. Which may well otherwise be historic if they do not demonstrate the behaviour again.

This follows the commissions' goal to reduce and eliminate the unnecessary implementation of restrictive practices. Noting sections 11,1; 12,1; & 13,1 of National Disability Insurance Scheme (Restrictive Practices and Behaviour Support) Rules 2018:

This section applies if:

- a. a registered NDIS provider uses a regulated restrictive practice in relation to a person with disability (the first use); and
- b. the use is not in accordance with a behaviour support plan for the person with disability; and
- c. an authorisation (however described) is required by the State or Territory in which the use occurs; and
- d. the use of the restrictive practice is not authorised in accordance with the authorisation process; and
- e. the use (the ongoing use of the regulated restrictive practice in relation to the person with the disability will or is likely to continue.

However, If the “emergency RRP” is having to be utilised regularly and it appears this will be continual then it must be written in a behaviour support plan.

This process would be as follows:

- If the participant has not had a restrictive practice applied to them before then an interim plan must be developed within one month of engagement, and a following comprehensive within six months of engagement. This is regardless of a comprehensive plan being previously completed, if one has been created.
- If there is a comprehensive plan in place with RRP’s then this plan must be reviewed and adjusted ASAP.
- This follows what is written in sections 11,1; 12,1; & 13,1 of the National Disability Insurance Scheme (Restrictive Practices and Behaviour Support) Rules 2018:

The registration of the registered NDIS provider is subject to the condition that the provider must:

- take all reasonable steps to facilitate the development of an interim behaviour support plan for the person with disability by a specialist behaviour support provider that covers the use of the practice within 1 month after the first use of the regulated restrictive practice; and
- take all reasonable steps to facilitate the development of a comprehensive behaviour support plan for the person with disability by a specialist behaviour support provider that covers the use of the practice within 6 months after the first use of the regulated restrictive practice.

5.Related documents

- NDIS Comprehensive Behaviour Support Plan template
- NDIS Interim Behaviour Support Plan template
- Support Plan and Functional Behaviour Assessment
- Risk Evaluation Form – Behaviour Support Plan
- Debriefing Form – Staff
- Debriefing Form – Participant
- Behaviour Management Meeting Minutes
- Individual Response Plan
- Consent Form Restrictive Practice – General
- Consent Form Restrictive Practice - Submission
- Easy Read Consent Form – Behaviour Support Plans and Restrictive Practices
- Restrictive Practice Schedule and Elimination Plan (Chemical Restraint)
- Restrictive Practice Schedule and Elimination Plan (Other)
- Restrictive Practices Register
- Restrictive Practices Audit Tool

- BSP Review - Outcomes Report
- Medication Risk Assessment
- PRN Protocols – Restrictive Practices
- Team Member Training Record
- Team Member Training Plan
- Training Attendance Register - In-house training
- Telephone Order for Medical Practitioner See 'Appendix 2 – Forms'
 - Reportable Incident–Immediate Notification
 - Reportable Incident–5-day Notification

6. References

- Disability Services Act 2011 (TAS)
- Mental Health Act 2013 (TAS)
- NDIS (Provider Registration and Practice Standards) Rules 2018
- NDIS (Restrictive Practices and Behaviours Support) Rules 2018
- NDIS (Quality Indicators) Guidelines 2018
- NDIS Practice Standards and Quality Indicators 2021
- NDIS (Incident Management and Reportable Incidents) Rules 2018
- NDIS (NDIS Behaviour Support Practitioner Application) Guidelines 2020
- Child and Youth Safe organisations Act 2023 (TAS)
- Disability Rights, Inclusion and Safeguarding Act 2024 (TAS)

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