1. **PURPOSE**

The purpose of this policy is to ensure that The Junction understands its obligations in accordance with the *Disability Act 2006* regarding Restrictive Practices and to ensure it provides a safe environment for members and others at the workplace.

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| **Related documents** |
| Related policies and procedures, how-to task lists, forms, registers or other organisational documents of The Junction | * Risk Management Policy
* My Junction Plan
* Behaviour Support Plan
* Positive Behaviour Support Policy
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| Other standards | * National Mental Health Standards
* NDIS Practice Standards
* NDIS Quality and Safeguarding Framework
* Human Services Quality Standards
 |
| Legislation or other requirements | * National Disability Insurance Scheme Act 2013
* Restrictive Practices and Behaviour Support Rules 2018
* [Restrictive Practice Identification Tool](https://www.dsdsatsip.qld.gov.au/our-work/disability-services/disability-connect-queensland/positive-behaviour-support-restrictive-practices/publications-resources)
* QLD Disability Services Act 2006
* Human Rights Act 2019 (QLD)
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1. **Scope**

This policy applies to all employees, members, contractors, volunteers, and visitors involved in the operations of The Junction Clubhouse Cairns Ltd.

1. **Policy Statement**

The Junction is committed to delivering support services and activities that respond to the individual behaviours, needs and strengths of its members, their families and communities. We want members to be confident that their individual behaviours, needs and issues have been understood, that there is a clear plan regarding the support services they will receive, and that there is assistance available to build relationships with other agencies within the community as appropriate.

The Junction recognises that there is a small proportion of people with an intellectual or cognitive disability who may require additional supports to address behaviours of concern that are of such intensity, frequency, or duration that the safety of the person or others is placed in jeopardy or may cause a risk of harm more broadly.

In these circumstances, the focus is on supporting the individual, family, and carers to understand the underlying functions of the behaviours of concern and implement strategies to assist the individual to decrease the concerning behaviours, by identifying more proactive ways for the individual to have their needs met.

Depending on the needs of the individual, a range of supports and environmental adjustments may be able to improve their quality of life, including the opportunity to build social skills, participate in activities and develop social and communication skills.

The Junction recognises that in limited circumstances (and as a last resort), a restrictive practice may need to be used. Chapter 10A of the *Disability Services Act 2006* and Chapter 5B of the *Guardianship and Administration Act 2000* establish measures so that restrictive practices are used in Queensland only when they are necessary.

1. **Definitions**

**Restrictive Practice**

The Queensland *Disability Services Act 2006* (the Act) defines restrictive practice as:

* Containing or secluding an adult with an intellectual or cognitive disability
* Using chemical, mechanical, or physical restraints on an adult with an intellectual or cognitive disability
* Restricting access (of objects) to an adult with an intellectual or cognitive disability

These terms are further defined in the Act as follows:

* **Containing** an adult means physically preventing their free exit from the place where the adult receives disability services. This does not include secluding the adult. If the adult has a skills deficit and the gates, doors or windows of the premises are locked to prevent the adult from exiting, this is not containment.
* **Seclusion** means physically confining the adult alone where they cannot leave the premises, at any time of day or night, in a room or area.
* **Chemical restraint** means using medication for the main purpose of controlling the adult’s behaviour. Using medication to treat a diagnosed mental illness or physical condition is not chemical restraint. An intellectual or cognitive disability is not a physical condition.
* **Mechanical restraint** means using a device to restrict movement of the adult, or preventing or reducing the adult injuring themselves, for the main purpose of controlling the adult’s behaviour. The following actions are not mechanical restraint: using a device to enable safe transport of the adult; using a device for postural support; using a device to prevent injury from involuntary bodily movements such as seizures; using a surgical or medical device for treatment of a physical condition; or using bed rails or guards to prevent injury while the adult is asleep.
* **Physical restraint** means using any part of another person’s body to restrict the adult’s movement, for the main purpose of controlling the adult’s behaviour.
* **Restricting access** means restricting the adult’s access to an object to prevent the adult using the object to cause themselves or others harm

**Use of a Restrictive Practice**

A restrictive practice should only be used:

* Where necessary to prevent harm to a person, and
* Where it is the least restrictive way of ensuring the safety of all persons.

Service Providers should offer disability services in a way that:

* Promotes the individual’s development and physical, mental, emotional, social, and vocational abilities, and increases opportunities for participation and inclusion in the community
* Responds to the individual’s needs and goals
* Ensures the individual, their family, friends, and relevant stakeholders are able to participate in the development of strategies for the care and support of the adult
* Involves positive behaviour support planning informed by evidence-based best practice, which includes the implementation of strategies to produce positive behavioural change
* Ensures transparency and accountability in the use of restrictive practices
* Recognises that restrictive practices should not be used to punish an individual, nor in response to behaviour that does not cause harm to the adult or other people
* Aims to reduce or eliminate the need for restrictive practices, and
* Ensures restrictive practices are only used as prescribed in the approved individual’s positive behaviour support plan or respite community access plan
1. **Procedure details**

The Junction recognises that when working with adults with an intellectual or cognitive disability, there may be occasions where engagement occurs with an individual who has a positive support plan in place from another provider, or the implementation of a restrictive practice strategy to manage the individual’s challenging behaviours could be necessary.

Following are the steps that The Junction will take, thereby ensuring organisational and legal requirements for the use of a restrictive practice are met:

**Step 1 – Identify any restrictive practice/s in use**

Identification and assessment of any restrictive practice in use at The Junction is to be undertaken by the Director of Operations (or delegate), utilising the Queensland Department of Seniors, Disability Services and Aboriginal and Torres Strait Islander Partnerships (DSDSATSIP) [Restrictive Practice Identification Tool](https://www.dsdsatsip.qld.gov.au/our-work/disability-services/disability-connect-queensland/positive-behaviour-support-restrictive-practices/publications-resources).

If any restrictive practices are identified, the following questions are to be answered:

* Does the individual experiencing restrictive practice fit the target group (as outlined in the tool) for the legislation?
* Is the restrictive practice being used to prevent the individual’s behaviour from causing harm to themselves or other persons?
* Is the restrictive practice being carried out safely and appropriately?
* Can any immediate action be taken to support the individual and keep everyone safe which is not a restrictive practice?

If the Director of Operations (or delegate) believes a restrictive practice is still required, they must proceed to Step 2.

*Note: all completed* [*Restrictive Practice Identification Tool*](https://www.dsdsatsip.qld.gov.au/our-work/disability-services/disability-connect-queensland/positive-behaviour-support-restrictive-practices/publications-resources) *documentation is the sole responsibility of the Director of Operations, and must be stored securely.*

**Step 2 – Developing a Positive Behaviour Support Plan (PBSP)**

The *Disability Services Act 2006* outlines the need for a positive behaviour support approach, not solely where restrictive practices are required. Central to this approach is a positive behaviour support plan (PBSP), which is informed by an assessment and:

* Outlines strategies that respond to a person’s needs and the causes of any challenging behaviour
* Reduces or eliminates the use of restrictive practices, and
* Improves the person’s quality of life

Any members with challenging behaviours should have a PBSP, which should be developed before considering or applying for approval for the use of restrictive practices.

The Junction is committed to positive behaviour support using an evidence-based approach with members who exhibit challenging behaviour. Positive behaviour support techniques will seek to both improve the individual’s quality of life and reduce the person’s challenging behaviour. Positive behaviour support is not solely focused on eliminating challenging behaviour, rather, it seeks to improve quality of life by understanding why the individual behaves that way, and then addressing the individual’s needs.

To enable positive behaviour support at The Junction, three elements are required:

* A professional Functional Behaviour Assessment to better understand why the person engages in challenging behaviours must be conducted
* Investigating, modifying and/or eliminating environmental causes for challenging behaviours
* Teaching the individual new skills to meet their needs without having to resort to challenging behaviours

When a person’s behaviour indicates that they may need a PBSP, the Director of Operations (or delegate) will convene a panel, usually consisting of the Director of Operations and the individual’s Recovery Facilitator and/or Support Coordinator. Other panel members may be involved (e.g., other service providers). The panel will undertake the assessment and planning phase of a PBSP, which will then form part of the individual’s ‘My Junction Plan’ (contained within The Junction’s case management system SRS).

As members of The Junction generally receive support from more than one service, it is best practice for whichever service provides the most hours of support to coordinate the assessment and planning activities of the PBSP and gain authorisation from the individual. In situations where primary responsibility is difficult to ascertain, or by mutual agreement between service providers, this arrangement may vary.

The PBSP will summarise the three elements above and use them to describe practical ways of more effectively supporting the individual. A PBSP is explicitly targeted at achieving an improved quality of life for, and reducing the challenging behaviours of, the individual.

The PBSP will clearly describe:

* Why the person uses challenging behaviours
* How the environment must be changed to reduce and/or eliminate the behaviours
* Specific approaches to teaching the person new skills to have their needs met
* What the plan objectives are, and
* How all people involved in the care and support of the adult will implement the plan

The behaviour support panel must ensure that all engagement with the individual and any planning or assessment takes into consideration the cultural beliefs and practices of individuals from culturally and linguistically diverse backgrounds.

**Step 3 – Providing a statement about the use of restrictive practice/s**

When considering the use of a restrictive practice, the Director of Operations must provide a statement about the use to the adult (in a format that person is most likely to understand) and other key stakeholders.

The statement must explain:

* Why The Junction is considering using restrictive practices
* How the person and relevant stakeholders can be involved, and express their views in relation to, the use of the restrictive practice/s
* Who decides whether restrictive practices will be used, and
* How information can be sought, or complaints made about the use of restrictive practices

The statement must be explained both in the language or format that the adult is most likely to understand, and in a way that that appropriately regards the individual’s age, culture/diversity, disability, and communication abilities.

The Director of Operations is to utilise the [Statement on the use of restrictive practices for an adult with cognitive/intellectual disability](https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fwww.dsdsatsip.qld.gov.au%2Fresources%2Fdsdsatsip%2Fdisability%2Fservice-providers%2Fcentre-excellence%2Fstatement-intellectual-cognitive-disability.doc&wdOrigin=BROWSELINK) (Section 191 of the *Disability Services Act 2006*). It should be provided to the individual and discussed with them to explain how the information can be individualised to their needs. The statement may need to be discussed over several conversations.

**Step 4 – Making a short-term approval application**

Where there is an immediate and serious risk of harm to an adult (or others) the Director of Operations can apply for a short-term approval to affect the use of a restrictive practice for a limited time (up to six months).

The NDIS Quality and Safeguards Commission (NDIS Commission) commenced in Queensland on 1 July 2019 and Service Providers must report on the ***use*** of restrictive practices to the NDIS Commission. The Queensland Government remains responsible for ***authorising*** the use of restrictive practices for adults with an intellectual or cognitive disability in Queensland.

A short-term approval (STA) to use a restrictive practice is limited to situations where:

* The adult has impaired capacity for making decisions about the use of restrictive practices
* There is an immediate and serious risk that, without the approval, the individual’s behaviour will cause harm to themselves or others
* The use of the restrictive practice is the least restrictive way of ensuring the safety of the individual or others

For **containment and seclusion**, the [Office of the Public Guardian](https://www.publicguardian.qld.gov.au/restrictive-practices/restrictive-practices-approval) will decide whether to approve a short-term application. For **all other restrictive practices**, a delegate of the Chief Executive will decide whether to approve a short-term application.

To commence the process, the Director of Operations will contact one of the above and discuss the person’s behaviour and reasons why a restrictive practice is being considered. To assist with preparation for this discussion, the [Short-term approval: a guide for service providers](https://www.dsdsatsip.qld.gov.au/resources/dsdsatsip/disability/service-providers/centre-excellence/short-term-approval-guide-for-service-providers.pdf) resource should be referred to.

The Office of the Public Guardian or Chief Executive delegate will give notice of their decision of approval or otherwise. Depending on the decision, the following must be adhered to:

* **Not approved**: use of the Restrictive Practice is to be stopped immediately
* **Approved**: The conditions outlined in the short-term approval must be met, and The Junction must submit a Form 6-4 to [notify the DSDSATSIP](https://odc.disability.qld.gov.au/help_resources/Documents/How%20to%20notify%20the%20department%20of%20a%20Restrictive%20Practice%20Approval%20%28Form%206-4%29.pdf) of the short-term approval.

For support with authorisations and the authorisation process (including recording authorisations in ODC) please contact the [Positive Behaviour Support & Restrictive Practices team](https://www.dsdsatsip.qld.gov.au/our-work/disability-services/disability-connect-queensland/positive-behaviour-support-restrictive-practices/contact-information). If urgent, you can contact via telephone: 1800 902 006.

**Step 5 – Seeking approval, implementation, and review of the plan**

In the case where a positive behaviour support plan (PBSP) has been developed to support a person with challenging behaviours without the use of a restrictive practice, the Director of Operations will ensure the following steps are adhered to:

* Implementation: all stakeholders identified in the plan are part of implementation
* Review: the plan will be reviewed on an ongoing basis to ensure it remains relevant to the person’s needs and has been implemented as intended
* Communicate: communication occurs regularly with the required stakeholders about the plan and the implementation of plan strategies

Where a PBSP has been developed in relation to an approved short-term restrictive practice, the Director of Operations must:

* Seek full approval from the *relevant authority*
* Implement the PBSP
* Review the PBSP on an ongoing basis to ensure it remains relevant to the person’s needs and has been implemented as intended
* Communicate regularly with the *approving authority* about the use of the restrictive practice/s and the implementation of plan strategies, and
* Formally review the plan with the *approving authority* (per required intervals) and seek additional approval/s where necessary

**Longer term** use of a restrictive practice requires approval or consent to be provided. The Queensland Civil Administrations Tribunal (QCAT) approves the use of restrictive practices that include *containment and seclusion*. A guardian for restrictive practice (appointed by QCAT) or a relevant decision maker can provide consent for use of *other restrictive practices* (that do not include containment or seclusion), following the development of a Positive Behaviour Support Plan.

**Step 6 – Recording and reporting on the use of all restrictive practices**

The Director of Operations (or delegate) must notify the Department of a restrictive practice approval using a Form 6-4 via the [Online Data Collection](https://odc.disability.qld.gov.au/help_resources/resources_ext.aspx) tool. A new form must be submitted when approval to use a restrictive practice is obtained. Lodging the form creates a restrictive practices client profile linked to the Service Provider. The Director of Operations must report via the ODC to record every instance of the use of a restrictive practice.