

Restrictive Practices Policy

Policy area	Behaviour Support
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Applicable to	Compass Care Group Pty Ltd
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Related policies	<p>Specialist Behaviour Support — Developing Behaviour Support Plans Policy Specialist Behaviour Support — Implementing Behaviour Support Plans Policy Surveillance Technology Policy Duty of Care Policy Safeguarding Against Violence, Abuse, Neglect, Exploitation and Discrimination Policy Emergency and Disaster Management Policy Incident Management Policy Client Receiving Personal Care from a Sole Worker Policy Consent Policy Client Advocacy Policy Support Planning Policy Service Access and Exit Policy Service Delivery Policy Manual Handling Policy Human Resources Management Policy Privacy Policy</p>
Authority	<p>NDIS Act 2013 NDIS Practice Standards and Quality Indicators NDIS Code of Conduct NDIS (Restrictive Practices and Behaviour Support) Rules 2018 NDIS Regulated Restrictive Practices Guide 2020 NDIS (Provider Registration and Practice Standards) Rules 2018 NDIS (Incident Management and Reportable Incidents) Rules 2018 Department of Social Services: National Framework for Reducing and Eliminating the Use of Restrictive Practices in the Disability Sector Australian Human Rights Commission Act 1986 UN Convention on the Rights of Persons with Disabilities Aged Care Act 1997 Aged Care Quality and Safety Standards Aged Care Code of Conduct Quality of Care Amendment (Restrictive Practices) Principles 2022</p>

PURPOSE

The purpose of this policy is to explain our organisation’s commitment and approach to the use of regulated restrictive practices.

SCOPE

This policy applies to all our workers (employees, contractors and volunteers).

DEFINITIONS

Term	Definition
Behaviours of Concern	Behaviours of such intensity, frequency or duration that the physical safety of the person or others is likely to be placed in serious jeopardy, or behaviour which is likely to seriously limit the use of, or result in, the person being denied access to ordinary community facilities.
Behaviour Support	This combines a range of proactive strategies to identify and address the underlying causes of behaviours of concern through an individual functional behavioural assessment and development of a behaviour support plan. Positive behaviour support strategies should include implementing changes to the environment and other targeted positive strategies based on the function of the behaviour.
Behaviour Support Plan	A document prepared in consultation with the client and family/alternate decision-maker/advocate and other service providers that address the needs of the person identified as having complex behaviours of concern. The behaviour support plan contains evidence-informed strategies and seeks to improve the person's quality of life.
Least Restrictive Alternative	A practice which is demonstrated to be the least restrictive or invasive to prevent likely physical harm and is only applied for the time necessary to manage the risk of physical harm.
Regulated Restrictive Practice	Any practice or intervention that has the effect of restricting the rights or freedom of movement of a care recipient (either disability or aged care). There are five types of restrictive practice that are regulated by the NDIS Commission and the Aged Care Quality and Safety Commission: chemical restraint; mechanical restraint; physical restraint; environmental restraint; and seclusion. These are each defined below.
Chemical Restraint	<p>The use of medication or chemical substance for the primary purpose of influencing a person's behaviour. This includes administration of prescribed, PRN and over-the-counter medication. It does not include:</p> <ul style="list-style-type: none"> ● the use of medication prescribed by a medical practitioner for the treatment of a diagnosed mental disorder, a physical illness or a physical condition; or ● end of life care.
Environmental Restraint	<p>The restriction of a person's free access to all parts of their environment, including items or activities, for the primary purpose of influencing a person's behaviour. This includes:</p> <ul style="list-style-type: none"> ● locking a door, cupboard or fridge; ● placing restrictions on when a person can engage in an activity (watching TV, cooking); ● preventing access to a certain area (backyard, kitchen); ● restricting access to the community (only allowing a trip out in community with worker supervision, removing wheelie walker or wheelchair); ● restrictive access to hazardous items, sharps and chemicals (toiletries, cutlery).

<p>Mechanical Restraint</p>	<p>The use of a device to prevent, restrict, or subdue a person's movement for the primary purpose of influencing a person's behaviour. This includes:</p> <ul style="list-style-type: none"> ● splints, gloves or a helmet to prevent a person from self-harming; ● restrictive clothing to prevent a person from accessing a part of their body (bodysuit, overalls 'onesies'); ● use of strap to restrain any part of the body to stop a behaviour of concern ● lap belts and bed rails to restrict movement. <p>It does not include the use of devices for therapeutic or non-behavioural purpose.</p>
<p>Physical Restraint</p>	<p>The use or action of physical force to prevent, restrict or subdue movement of a person's body, or part of their body, for the primary purpose of influencing their behaviour. It includes:</p> <ul style="list-style-type: none"> ● holding a person's hand down to prevent them hitting themselves; ● holding down any part of the body to address a behaviour of concern; ● physically holding a person in a specific position to force personal care activities (showering, administration of medication, feeding); ● physically moving a person away to stop them going to a specified area where they want to go; ● taking the person's hand and pulling them in a direction they do not want to go. <p>It does not include:</p> <ul style="list-style-type: none"> ● the use of a hands-on technique in a reflexive way to guide or redirect a person away from potential harm/injury; ● physically assisting a person to dress, shave or brush their teeth; ● helping a person to learn a new skill (physically guiding their hand to use a knife when preparing food); ● physically guiding a person in a swimming pool if they are not able to swim independently; ● physically supporting a person with their physiotherapy program; ● physically guiding a person away from a busy road or an unsafe situation (moving their hand away from a hot plate). <p>Note: The level of physical force is a key consideration as to whether a practice is physical restraint.</p>
<p>Seclusion</p>	<p>Sole confinement of a person 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, for the primary purpose of influencing their behaviour. This includes:</p> <ul style="list-style-type: none"> ● 'time out' alone in a room or area where the person is unable to leave; ● a person alone in a room or physical space with a barrier, where they cannot leave; ● a person sent to their room to calm down and told they cannot come out until they have 'calmed down';

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| | <ul style="list-style-type: none">● workers and other residents moving to an office/secure room/backyard while the person is restricted to another area of the house and unable to leave, or they believe they are unable to leave. |
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CONTEXT

Our organisation recognises that a client may, at times, be subjected to restrictive practices due to behaviours of concern. We will adopt an approach that:

- only uses restrictive practices as a last resort to prevent harm to the client and others;
- uses the least restrictive alternative for the shortest period of time to prevent harm to the client and others;
- seeks to reduce or eliminate the use of restrictive practices;
- safeguards the client against violence, abuse, neglect and exploitation;
- is within a positive behaviour support framework that includes collaborative, person-centred and evidence-informed interventions;
- is culturally safe and communicated in a language, mode and method that the client is most likely to understand;
- ensures the client's privacy and dignity;
- escalates issues, concerns and risks promptly as required; and
- complies with relevant federal and state/territory legislative and regulatory requirements.

POLICY STATEMENT

1. Compliance

- We will comply with regulatory rules and standards in relation to the use of regulated restrictive practices.
- We will obtain the required state/territory authorisation and consent to use regulated restrictive practices.
- We will comply with this policy and other relevant policies in relation to the use of restrictive practices.

2. Behaviour Support and the Use of Regulated Restrictive Practices

- We will detail the use of a regulated restrictive practice in the client's behaviour support plan.
- We will only use restrictive practices as detailed in the client's behaviour support plan to prevent harm to the client and others. Refer to the Specialist Behaviour Support — Developing Behaviour Support Plans Policy.

- We will not use restrictive practices as a form of punishment towards a client, or for the convenience of a worker.
- We will prioritise the client's needs, circumstances, preferences (including cultural preferences) and goals when developing restrictive practice strategies and approaches.
- We will proactively identify opportunities for the client to participate in community activities and develop new skills that can reduce or eliminate the need for regulated restrictive practices in the future.
- We will include contemporary, evidence-based, behavioural strategies that use environmental adjustments to constructively reduce behaviours of concern.

3. Collaboration and Consent

- We will collaborate with the client, family/alternate decision-maker/advocate and other service providers to ensure the best interests of the client and to safeguard their human and legal rights.
- We will obtain written consent from the client or family/alternate decision-maker/advocate to include the use of a restrictive practice in the behaviour support plan and we will not use the restrictive practice until we have this written consent.

4. Risk Management and Incident Reporting

- We will maintain processes to effectively identify, manage, report and monitor risks in relation to the use of restrictive practices.
- We will ensure the use of restrictive practices are proportional to the risk of harm to the client and others.
- We will complete internal and external reporting in required timeframes and formats. Refer to the Reportable Incident Management Procedure.

5. Monitoring and Review

- We will proactively seek to identify alternatives to the use of restrictive practices.
- We will regularly evaluate the restrictive practice strategy in the behaviour support plan to ensure it is the least restrictive alternative and the best way to prevent harm to the client and others.
- We will monitor the effectiveness of the strategy in eliminating or reducing the use of restrictive practices.
- We will keep a register of all restrictive practices used.
- We will review behaviour support plans which contain regulated restrictive practices annually, or more often if required.

- We will undertake audits to ensure compliance with legislative, regulatory and organisational restrictive practice requirements.

5. Information and Record-keeping

- We will ensure information and records are accurate and up to date.
- We will ensure the client has provided us with all required written consents.
- We will store the information securely to ensure client privacy, dignity and confidentiality and make sure it is accessible to the client and only other stakeholders authorised to access it.

6. Worker Training and Supervision

- We will maintain a skilled and trained workforce which is aware of clients' legal and human rights and understands their obligations in relation to the use of restrictive practices.
- We will maintain processes to adequately monitor and supervise workers.

SUPPORTING DOCUMENTS

Related procedures and forms include:

- 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
- Behaviours of Concern Submission Form
- Behaviour Assessment Report
- 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
- Individual Risk Profile Assessment

- Participant Safe Environment Risk Assessment
- Behaviour Support Plan and Functional Behavioural Assessment Procedure
- Surveillance Technology Procedure
- Safeguarding Against Violence, Abuse, Neglect, Exploitation and Discrimination Procedure
- Client Advocacy Procedure
- Emergency and Disaster Management Procedure
- Client Living Alone and Receiving Personal Care from a Sole Worker Procedure
- Support Planning Procedure
- Service Access and Exit Procedure
- Service Delivery Procedure
- Incident Management Procedure
- Reportable Incident Management Procedure
- Manual Handling Procedure

RESPONSIBILITIES

Community Services Manager is responsible for:

- maintaining this policy, its related procedures and associated documents;
- ensuring the policy is effectively implemented across the service;
- monitoring worker compliance with the requirements of this policy; and
- ensuring training and information is provided to workers to carry out this policy.

All workers are responsible for complying with the requirements of this policy.

COMPLIANCE

Deliberate breaches of this policy will be dealt with under our misconduct provisions, as stated in the Code of Conduct Agreement.