

Advice for providers to prepare for NDIS Quality and Safeguarding Framework:

Thinking about restrictive interventions

From July 2019, Tasmanian service providers will be expected to meet requirements under the NDIS Quality and Safeguarding Framework. National Disability Services and the Tasmanian Office of the Senior Practitioner are working together to support services to prepare for this.

Specifically, we want to draw attention to activities service providers can be doing now to prepare for the new requirements relating to the use of restrictive interventions.

The Quality and Safeguarding Framework identifies six core strategies from the [National Framework for Reducing and Eliminating the use of Restrictive Practices in the Disability Service Sector](https://www.dss.gov.au/our-responsibilities/disability-and-carers/publications-articles/policy-research/national-framework-for-reducing-and-eliminating-the-use-of-restrictive-practices-in-the-disability-service-sector) (<https://www.dss.gov.au/our-responsibilities/disability-and-carers/publications-articles/policy-research/national-framework-for-reducing-and-eliminating-the-use-of-restrictive-practices-in-the-disability-service-sector>):

1. Leadership towards organisational change
2. A person-centred focus
3. Use of data to inform practice
4. Workforce development
5. The use of restraint and seclusion reduction tools
6. Debriefing and practice review

The following information and resources will support staff at all levels of organisations to work towards these strategies. The aim is to provide you with ideas to strengthen organisational culture that is needed to support the expectations of the new Quality and Safeguarding Framework.

1. Leadership towards organisational change

Get to know the new Framework

Visit the dedicated Quality and Safeguarding section of the [DSS website](https://www.dss.gov.au/disability-and-carers/programs-services/for-people-with-disability/ndis-quality-and-safeguarding-framework) (<https://www.dss.gov.au/disability-and-carers/programs-services/for-people-with-disability/ndis-quality-and-safeguarding-framework>). This includes the Framework, a summary, and factsheets for providers and NDIS participants. Identify and discuss the specific requirements around Restrictive Interventions.

Get to know the NDIS Rules

The Rules are now available for providers to read. The Rules specifically related to this area are: National Disability Insurance Scheme (Provider Registration and Practice Standards) Rules 2018 (<https://www.legislation.gov.au/Details/F2018L00631>) National Disability Insurance Scheme (Restrictive Practices and Behaviour Support) Rules 2018 (<https://www.legislation.gov.au/Details/F2018L00632>)

Remain alert for advice from DHHS and NDIA about specialised registration, verification and certification.

Get the board on board

Put human rights on the agenda at your next board meeting, and include as a standing item. Watch the NDS 'Adopting a Human Rights Based Approach - Advice for Boards of Disability Services' (<https://www.youtube.com/watch?v=u98PzbCzPI0&feature=youtu.be>) short films and distribute copies of the Zero Tolerance 'Safeguarding for Boards' (https://www.nds.org.au/images/zt/NDS_Zero_Tolerance_Safeguarding_for_Boards_v2.pdf) guide which contains practical steps and strategies for boards, including on reducing and eliminating restrictions.

Put forward a motion to include in the organisation's next strategic plan something like, "Work with all the people we support to identify, reduce and eliminate the use of restrictive practices".

Get your people and culture people to help out

Arrange for your people and culture team and all the operations managers to work through the Zero Tolerance Framework (https://www.nds.org.au/images/resources/resource-files/Nat_Zero_Tolerance_framework1.pdf) and recommended actions. Are there any gaps in your policy and practice?

Support team leaders to use person-centred people management (<https://www.nds.org.au/resources/person-centred-people-management-resources>) strategies. Workers will find it much easier to provide person-centred services, if they are managed in person-centred ways.

Arrange for all staff in your organisation to systematically work through the Zero Tolerance learning resources (<https://www.nds.org.au/resources/zero-tolerance>) in staff meetings or professional development sessions. It's important that these are presented in an environment where everyone can discuss the materials and agree as a team about the culture you'd like to see.

Get your planning people on board

Use the Zero Tolerance Recognising Restrictive Practices (<https://www.nds.org.au/zero-tolerance-framework/considering-additional-risk>) films with your staff to identify the use of restrictive interventions in your workplace. Work with the Senior Practitioner to review the person's Behaviour Support Plan, including input from support staff. Use information from the Office of the Senior Practitioner in Tasmania (http://www.dhhs.tas.gov.au/disability/senior_practitioner).

Ensure that your Service Agreement requires the participant/participant's representative to inform you if a Positive Behaviour Plan is in place, or is to be introduced.

Ensure that your Service Agreement states that, where you must implement Positive Behaviour Support Plans, you will charge for any work required to comply with the relevant Practice

Standards. For example, time required to:

- collaborate with specialist practitioners and other service providers,
- implement the Positive Behaviour Support Plan, and/or
- report in relation to the use of restrictive practices

Encourage people with Behaviour Support Plans, to request time in their plans for support staff to work as part of the team of people who develop, implement, monitor and review the person's behaviour support plan. Providers can ask for this while they are developing their service agreement with the person seeking to access their services. In a Supported

Independent Living service, it may be included in the overall cost of service provision provided in your quote.

Practice leadership

Disability service providers are encouraged to consider identifying practice lead roles internally, or contracted externally. These positions will be able to lead evidence-based practice within the service. There have been a number of studies that have found that better outcomes

for people with disability are achieved if practice leaders run team meetings, engage in 1:1 supervision with their staff, focus on quality of life outcomes, allocate and organise shifts, and, importantly, provide modelling and coaching to staff during shifts. For an example, see Deveau and McGill (2016)¹.

The Specialist and Professional Service job family, described in the [Disability Workforce Capability Framework \(https://www.carecareers.com.au/page/workforce-capability-framework-resources\)](https://www.carecareers.com.au/page/workforce-capability-framework-resources), might be useful in describing this role.

2. A person-centred focus

Behaviour support planning will be the responsibility of registered behaviour support practitioners. These people will have been deemed suitable to provide behaviour support services by the NDIS Commissioner through a process of 'certification'. A competency framework will be released shortly. The behaviour support practitioner will work with people, their carers, providers and support staff to develop a person-centred, pro-active behaviour support plan. The plan will improve the person's quality of life, constructively address behaviours of concern, and reduce the need for restrictive practices.

The following resources are all free to access. Some will be useful to use across all levels of the organisation.

¹ "Practice leadership in the frontline in supporting people with ID and challenging behaviour". Journal of Applied Research in Intellectual Disabilities. 29, 266-277.

Zero Tolerance Human Rights and the Zero Tolerance Empowerment Circle

Do your staff understand the link between human rights and abuse and neglect? Use the free and accessible [Human Rights and You and Understanding Abuse \(https://www.nds.org.au/zero-tolerance-framework/understanding-abuse\)](https://www.nds.org.au/zero-tolerance-framework/understanding-abuse) eLearning and films. Training is based around the Zero Tolerance Empowerment Circle which encourages all workers to support best practice and empowerment across all parts of people's lives.

Choice and Control

The [It's My Choice! Toolkit \(http://inclusion.melbourne/resources/choice/\)](http://inclusion.melbourne/resources/choice/) provides five resources to help workers and the people they support to think about choice in easy ways by setting out key principles. It includes guides and film resources to help you bed choice into everyday contexts.

Active Support

The [Every Moment has Potential \(http://www.activesupportresource.net.au/\)](http://www.activesupportresource.net.au/) resource provides online modularised training about active support. It includes a breadth of videos that will strengthen managers' and workers' understanding of what person-centred active support can really look like.

Dignity in Care

The [Dignity in Care site \(https://www.scie.org.uk/publications/guides/guide15/\)](https://www.scie.org.uk/publications/guides/guide15/) links to many relevant resources that support high quality service delivery that are as relevant in Australia as in the UK, where it was developed. The site's resources are grouped around eight evidence-based factors that contribute to a person's sense of self-respect. These are choice and control; communication; eating and nutritional care; pain management; personal hygiene; practical assistance; privacy; and social inclusion.

Trauma Informed Care and Practice (TICP)

Websites and information on disability and trauma are few and far between. While there remains a lot of work to do in developing key resources and evidence-based practices, it is important for service providers to have an understanding of:

- TICP in the home
- The impact of trauma
- Creating trauma informed provider organisations
- Evidence-based treatments addressing trauma

The following resources will be useful to service providers in this endeavour.

- DHHS Victoria, [Attachment and trauma in people with an intellectual disability \(http://providers.dhhs.vic.gov.au/trauma\)](http://providers.dhhs.vic.gov.au/trauma)
- The Georgetown University Center for Child and Human Development, [Trauma Informed Care: Perspectives and Resources \(https://gucchdtacenter.georgetown.edu/TraumaInformedCare/\)](https://gucchdtacenter.georgetown.edu/TraumaInformedCare/)

3. Data to inform practice

Behaviour support planning needs to be evidence-based. Planning, implementation and evaluation/review need to draw on both existing peer-reviewed literature, and specific data pertaining to how a person's behaviour support plan is working for them. Workers and clinicians need to have a suitable system with enabling procedures to compile person-centred data about how well the strategies in a person's plan are working for them. It is as important for the team to know what works well as it is for them to know what isn't working as well. Systems must allow staff to record and access meaningful, data to inform reviews of the person's plan. A Client Management System (CMS) that is designed for use in a person-centred service delivery model can help support staff and clinicians to record and report on such data. NDS supports the iplanit CMS.

Both Centre for Applied Disability Research (<https://www.cadr.org.au/>) and Australasian Society for Intellectual Disability (<https://www.asid.asn.au/>) are useful sites to access current peer-reviewed research.

4. Workforce development

Check-out the NDS Workforce Hub (<https://www.nds.org.au/workforce-hub/developing-your-workforce>) for information to support you to develop the capability of your workforce. Here you'll find links to NDS Learn and Develop, National Disability Practitioners and training resources that you can use in-house.

5. The use of restraint and seclusion reduction tools

In situations where behaviours of concern are occurring regularly, it is important to make sure steps are taken to use evidence-based risk assessment tools to plan for non-restrictive responses to the behaviour. It is also important to develop reactive strategies that employ a number of non-restrictive strategies and are used as a first option.

More proactively, the Tasmanian Office of the Senior Practitioner is working on a digital tool to help workers identify the use of restrictive interventions that need authorisation. The tool is called the Restrictive Intervention Self-Evaluation Tool (or RISE-TAS) and is available at the link below.



Access practice resources and restrictive intervention information via RISE-TAS online: [RISE-Tas Link – \(http://www.surveygizmo.com/s3/4271753/98578e0c4f52\)](http://www.surveygizmo.com/s3/4271753/98578e0c4f52)

6. Debriefing and practice review

Being able to reflect on your work practice and ask 'Is there a better way of doing things?' is a crucial part of improving the quality of your support. Ways to achieve this include:

- Formal supervision and support with a senior colleague or manager
- Group reflection at team meetings
- Setting up a human rights or restrictive practices advice group

The following is a list of useful resources to support and encourage reflective practice.

- National Disability Services, Person-centred practice across cultures - Reflective practice: Why different points of view matter (download pdf)
(<https://www.nds.org.au/images/resources/person-centred/Reflective-Practice.pdf>)
- Gowrie, NSW Government, Team meeting package: Reflecting on practice (download pdf)
(<https://gowriensw.com.au/images/pdf/TeamMeetingIntroductiontoreflectivepractice.pdf>)
- Flinders University, Tools for reflective practice (download pdf)
(<http://ehlt.flinders.edu.au/education/reflectivepractice/reflect/Tools%20for%20reflective%20practice.pdf>)
- Victorian Education Department, Evidence Paper: Reflective Practice
(<http://www.education.vic.gov.au/Documents/childhood/providers/edcare/evirefprac.pdf>)



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