

Interchange Policy & Procedure Manual

Policy 2.10 Restrictive Practice Policy

DATE OF BOARD ENDORSEMENT	OCTOBER 2015
LAST REVIEW DATE	OCTOBER 2015
NEXT REVIEW DATE	OCTOBER 2017
CURRENT VERSION	V1.0

Reference Documents

- National Standards for Disability Services
- Code of Practice for the Elimination of Restricted Practices, DSC
- Positive Behaviour Support Information for Disability Sector Support Organisations, DSC
- Positive Behaviour Framework - Effective Service Design, DSC
- Serious Incident Reporting Guidelines, DSC
- Serious Incident Report (SIR) Form, DSC
- Guiding Principles of the UN Convention of Protection of Human Rights for People with Disabilities
- Guardianship and Administration Act 1990 (WA)
- Disability Discrimination Act 1993 (WA)
- Interchange Policies – Positive Behaviour Support, Occupational Health and Safety, Protecting Customer’s Human Rights and Critical Incidents

Policy Statement

Interchange is committed to ensuring that customers who exhibit challenging behaviour are supported in ways that ensure a safe environment that recognises the person’s rights and needs. Interchange continuously works towards elimination and reduction of the use of restrictive practices within its services. However, Interchange recognises that from time to time customers may be subjected to restrictive practices in response to risk of serious harm to themselves or others due to challenging behaviour.

Any restrictive practice used at Interchange will meet best practice requirements, including:

- of being the least restrictive option;
- for the least possible time;
- used as a last resort;
- necessary to prevent harm to the customer or others;
- should not be used as a punishment for the person;
- should not be used for staff convenience; and
- the benefits of the restricted practice must outweigh the possible negative effects of its use.

Restrictive practices will be reviewed regularly, and be part of a positive behaviour support plan that has been developed by a person with sufficient expertise in the area of behaviour support and in consultation with the person, family, staff and any other relevant parties.

Interchange intends to be compliant with the DSC Code of Practice for the Elimination of Restricted Practices and the National Standards for Disability Services.

Interchange Policy & Procedure Manual

This policy applies to volunteers, students, staff and executives of Interchange or any individuals acting for Interchange.

Definitions

Restrictive Intervention

A “restrictive intervention” is any intervention and/or practice that is used to restrict the rights or freedom of movement of a person with disability including:

- Seclusion
“Seclusion” means the sole confinement of a person with disability in a room or physical space at any hour of the day or night where voluntary exit is prevented.
- Chemical restraint
A “chemical restraint” means the use of medication or chemical substance for the primary purpose of controlling a person’s behaviour. It does not include the use of medication prescribed by a medical practitioner for the treatment of, or to enable treatment of, a diagnosed mental illness, a physical illness or physical condition.
- Mechanical restraint
A “mechanical restraint” means the use of a device to prevent, restrict or subdue a person’s movement or to control a person’s behaviour but does not include the use of devices for therapeutic purposes.
- Physical restraint
A “physical restraint” means 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 controlling a person’s behaviour. Physical restraint does not include physical assistance or support related to duty of care or in activities of daily living.
- Environmental restraint
An “environmental restraint” restricts a person’s free access to all parts of their environment. Examples of environmental restraints include, but are not limited to:
 - barriers that prevent access to a kitchen, locked refrigerators, restriction of access to personal items such as a TV in a person’s bedroom
 - locks that are designed and placed so that a person has difficulty in accessing or operating them and
 - restrictions to the person’s capacity to engage in social activities through not providing the necessary supports that they require to do so.
- Psycho-social restraint
“Psycho-social restraint” is the use of “power-control” strategies. Examples of psycho-social restraints include but are not limited to:
 - requiring a person to stay in one area of the house until told they can leave
 - directing a person to stay in a unlocked room, corner of an area or stay in a specific space until requested to leave (also known as “exclusionary time-out”)
 - directing a person to remain in a particular physical position, (eg laying down) until told to discontinue
 - “over-correction” responses (eg requiring a person who has spilled coffee to clean up not only the spilled coffee but the entire kitchen)

Interchange Policy & Procedure Manual

- ignoring and
- withdrawing “privileges” or otherwise punishing, as a consequence of non-cooperation.

Therapeutic Device

Therapeutic devices are used when people’s ability to participate and be independent is reduced as a result of their disability. They are used to promote function and hygiene, reduce pain, the risk of injury and reduce the risk of distortion of body shape. Examples include but are not limited to:

- postural support such as seating inserts in wheelchairs
- chest and pelvic straps for postural support and/or safety in wheelchairs,
- commodes and vehicles splints to minimise muscle contractures and reduce pain
- splints for short term use to allow wound healing and tissue repair and
- night time positioning to reduce the risk of body shape distortions

A suitably qualified person needs to have prescribed the therapeutic device.

Least restrictive alternative

The least restrictive alternative refers to the right of a person to live in an environment which is the most supportive, and the least restrictive, of his/her freedom. In the context of the use of a restrictive practice it requires that Commission staff engage in actions that:

- a) ensure the safety and wellbeing of the person and all others who share their environment; and
- b) having regard to (a) above, impose the minimum limits on the freedom of the person as is practicable in the circumstances.

Informed consent

Informed consent means a person:

- is provided with appropriate and adequate information
- is capable of understanding the nature of the information and the consequences of a decision made in relation to this information and
- can freely decide for him or herself without unfair pressure or influence from others.

Substantive equality

Substantive equality recognises that:

- rights, entitlements, opportunities and access are not necessarily distributed equally throughout society
- equal or the same application of rules to unequal groups can have unequal results
- where service delivery agencies cater to the dominant, majority group, then people who are not part of the majority group and who have different needs might miss out on essential services.

Hence, it may be necessary to provide different service types and approaches to people with disability and their families who are members of minority groups.

Positive Behaviour Support

Positive Behaviour Support (PBS) is an evidence-based model and applied science that has evolved from applied behavioural analysis and person-centred, values-based approaches. The key identified components of PBS are: assessment-based interventions; reduction of punishment approaches; inclusion of all relevant stakeholders; a long-term focus; prevention through education, skill building, environmental redesign, enhanced opportunities for choice, staff development, resource allocation, provision of incentives, systems change; improved quality of life involving robust and significant person-centred outcomes for the individual, their families and other stakeholders; ecological and social validity and contextual fit.

Interchange Policy & Procedure Manual

Prohibited Practices are those *restricted* practices that are not authorised. Some practices will never be authorised as they are considered abusive, unlawful or unethical. Some examples might be electric shock, verbal abuse, and physical punishment.

Duty of Care refers to the circumstance where a risk to the person exists due to the person's potential or predictable actions (eg a lack of road skills and impulsivity can predictably imply risk when around traffic) as well as unpredictable occurrences. Duty of Care therefore requires a planned response to manage the identified "risk" for a person's potential or predictable actions.

Challenging behaviour is defined as 'culturally abnormal behaviour(s) of such intensity, frequency or duration that the physical safety of the person or others is placed in serious jeopardy, or behaviour which is likely to seriously limit or deny access to the use of ordinary community facilities.'

Serious Incident: A serious incident means one or more of the following:

- a) the death of a person with a disability;
- b) serious physical injury or psychological harm suffered by a person with disability;
- c) abuse including physical, emotional, sexual, psychological, financial and neglect of a person with disability;
- d) the person is judged as posing a serious risk to the health, safety or welfare of themselves or others;
- e) exploitation or unjustified restrictive practices used with a person with disability; and/or
- f) an assault on staff or a visitor to the service by a person with disability.

Procedures

1. A restrictive practice audit will periodically be completed at Interchange. The audit will aim to identify any restrictive practices used in service delivery. In addition, restrictive practice use by staff will be reported using the incident management form. All identified restrictive practices will be put onto a Restrictive Practice Register that will be maintained by the Operations Manager.
2. A Restrictive Practices Panel will be convened, comprised of representatives from the management of Interchange and a representative external to Interchange. This panel will be responsible for the monitoring, agreement or non-agreement for restrictive practice use, documentation and review of any restrictive practices used at Interchange. The panel will assess the quality of any associated behaviour support plans, and recommend referral to the Disability Services Commission's Behaviour Support Service when required. The aim of the panel will be to reduce or eliminate the use of restrictive practices at Interchange, and protect the human rights of the customers of Interchange.
3. Restricted practices will only be used as part of a comprehensive positive behaviour support plan developed by an appropriate individual. A PBS plan will include the following:
 - A description of the behaviour
 - Managing triggers and setting events
 - Detail a replacement behaviour that will be developed for the customer
 - Detail the strategies to be used by staff if the person engages in behaviours of concern
 - Detail the methods of reporting any incidents and debrief of any staff involved in incidents
 - Data collection strategies to ensure that information regarding behaviour is recorded on an ongoing basis.

Interchange Policy & Procedure Manual

4. It is recognised that from time to time an incident may occur where the use of an unplanned restrictive practice may occur (ie not detailed in a positive behaviour support plan), in response to an incident that involves a risk of serious harm either to the customer or another person. This action may be taken under the staff member's duty of care to the customer, self or another person. Any staff member who uses a restrictive practice that has not been previously placed on a behaviour support plan is required to report its use within 24 hours using an incident form. This will include notification to their Service Centre Manager.

If the incident involving an unplanned restrictive practice meets the criteria for a serious incident as per the Disability Service Commission then a Serious Incident Report (SIR) must be completed within seven days and forwarded to the Commission, as per the Serious Incident Reporting Guidelines.

5. Service Centre Managers will apply to the Restrictive Practice Panel for agreement to use a restrictive practice with a customer. The panel will consider the application, along with the appropriate supporting documentation and will decide through consensus decision if the restrictive practice can be agreed for use on an interim or permanent basis, or it will not agree with its use.
6. Any restrictive practice agreed for use on a permanent or interim basis will be reviewed at least every twelve months by the restrictive practice panel. Any restrictive practice not used for at least twelve months will be automatically considered eliminated from use. This is to guard against practices being on the register even when the evidence demonstrates that it is not in use.
7. The Restrictive Practice Panel only has authority to agree the use of the restrictive practice at Interchange. The responsibility for consenting to a restrictive practice lies with the individual themselves or an authorised alternative decision maker – for adults, a legally appointed guardian; for a child, their parents or another legally appointed guardian. When there is uncertainty about the person's capacity for informed consent, there is an absence of engaged family, carers, friends or advocates to assist with decision making or there are conflicts about what decisions are in the person's best interests, in line with the Disability Service Commission Code of Practice, Interchange will seek advice and guidance from the Office of Public Advocate for adults, and the Department for Child Protection and Family Support for children.
8. Therapeutic devices such as postural supports are not considered restrictive practices under this policy.
9. Some practices will be considered prohibited and will never be approved. These include any practice will would be considered to be unlawful, unethical or abusive. These are covered in the Interchange policy "Protecting Customer's Human Rights".

Equity and Access Considerations

Interchange is committed to ensuring fair and equal access to physical environments, information, communication and services. For the communication and implementation of this policy, this may include:

- Considering the suitability of physical environments
- The use of augmentative and alternative communication methods to supplement or replace speech or writing for those with impairments in the production or comprehension of spoken or written language. These methods include the display of text, large print, tactile communication, easy English, accessible multimedia and accessible information and communications technology.

Interchange Policy & Procedure Manual

Cultural Diversity

Employees are to ensure that services are provided with sensitivity to and an awareness of the cultural beliefs and practices of clients from culturally and linguistically diverse backgrounds. This includes an awareness of the needs of Aboriginal and Torres Strait Islander people, their families and communities.

Communication about this policy should be done in a way that suits each individual with regard to their cultural background e.g. if required, the use of an interpreter or easy English documents.

Interchange will develop connections with culturally appropriate organisations and groups to influence the meaningful participation of people with disability.

Where relevant, when attempting to strengthen relationships with people from Aboriginal and Torres Strait Islander backgrounds, Interchange will firstly utilise the advice and influence of key community members and organisations.