

<b>Process</b>	<b>G4SPD10</b>
<b>Positive Behaviour Support and Elimination of Restrictive Practices</b>	
<i>Creation Date: 6 June 2018</i>	<i>Review: 6 May 2019</i>

## 1. Purpose

Guides 4 Sight provide 'one to one' assistance services to people with disability, aged care and people with short term assistance needs to improve or maintain independence. We specialise in assistance services for people who have vision loss or vision and hearing loss.

This process is to clarify the responsibilities of, and to, the employees and volunteers who assist Guides 4 Sight clients in regards to Positive behaviour Support and elimination of restrictive practices.

## 2. Scope

This process applies to all our clients and those services for the purposes of reporting, funded by the Disability Services Commission and includes the business, its internal and external processes.

Guides 4 Sight make a commitment that the utmost effort will be made to ensure a 'good fit' between clients and assistive supports to create the best possible environment to achieve individual goals.

## 3. Legislation

Voluntary Code of Practice for the Elimination of Restrictive Practices  
See References Point 8.

## 4. Definitions

**Positive Behaviour Support:** addresses issues within the home and community, work, recreational and educational environments and a person's overall quality of life so that families, carers and support staff understand the person and why they may engage in challenging ways. Behaviour support require Allied Health professional assessments, planning and intervention directed towards supporting the person's needs.

**Person centred approach:** focuses on a person's needs and goals. It explores choices in how a person may participate meaningfully in their community so they develop social relationships. Consideration must be given to a person's unique preferences and needs.

**Challenging behaviour:** "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

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facilities’ (Emerson, E. 1995. Cited in Emerson, Eric, 2001.”Challenging behaviour: Analysis and Intervention in People with Severe Learning Disabilities”, Cambridge University Press, p3.)

**Restrictive Practices:** the kind of support that might be hurtful or harmful or does not respect the rights of a person. Such as trying to stop or help challenging behaviour, by using touch or changing the environment around that person that limits the rights or freedom of movement of a person with disability.

**Behaviour Support Plan:** outlines a plan to support a person, their family and support network to address unmet need and develop positive changes in a person’s behaviour. Restrictive practices must be reduced and eliminated wherever possible. Safeguards are for exceptional instances where third parties safety may be at risk.

**A Positive Behaviour Support Consultant:** a mentor or primary coordinator who foster collaboration, evidence based practice and transparency in organisation around responding to people with disability who may demonstrate challenging behaviours.

**Restrictive Practices:** Behaviour Support Panel must receive a submission to enact restrictive practices outlining the minimal restrictive intervention sought to address identified risk and needs. It must confirm all less restrictive practices have been evaluated and cannot be applied and have considered the impact on such intervention on others who cohabitate with the person concerned.

**Capacity:** The Office of Public Advocate defines this as ‘the extent to which a person is capable of making reasonable judgements about their personal welfare and treatment.’

## 5. Process

Guides 4 Sight assist people to cultivate valued and respected roles in the community. Our strategies seek to reduce exclusion, social and cultural isolation, physical injury, abuse and neglect. This is to increase a person’s dignity, their access to mainstream support services and improve quality of life.

We are committed to empowering our clients to be full citizens of society, enjoy a good life and enhance their quality of life which involves economic, social and cultural participation as the person chooses. Assistive Services are designed to support a person to develop skills and interests to do this.

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Guides 4 Sight staff are to recognise and encourage the client, their formal and informal networks to be involved and assist people to understand using a variety of communication methods including Auslan, picture schedules etc.

Our services should at all times support 'rights' based principles for our clients;

- Listening to our clients and respect our clients right to 'the dignity of risk'.
- Our clients have the right in making their own decisions based on personal experiences

However where it is considered the clients decision puts themselves or staff in personal danger, assistance staff should use negotiation and discussion to realise the danger and highlight safer options to ensure each other's safety at all times. Situation that arise must be recorded on the internal incident register, raised with the Director of Guides 4 sight and noted on clients personal file.

Where a situation seems appears to be happening with frequency it is to be raised with management team and/or the Director of Guides 4 Sight for consideration of discussion with Client, family and support network in regards discussing the behaviour, carry out further investigation or discuss the suggestion of a functional assessment.

#### **4.1 Functional Assessment**

A functional assessment by an Allied Health Professional may be used to explore what is influencing the behaviour and how this may be modified.

- This could involve adjusting or changing a person's environment so that the challenging behaviour is no longer necessary and the person has meaningful and positive relationships with those around them.
- It may consider: when and where the behaviour occurs; any signs apparent before the behaviour alters; how the behaviour is communicated; how other people observe the behaviour; what the behaviour may signify; and the positive support strategies that might address any unmet need(s).

#### **4.2 Behaviour Support Plan**

A behaviour support plan needs to address how a person's life may be improved so they can better connect with family, friends, support staff and the wider community in a stimulating way that is agreeable to the person.

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The strategies may be divided into primary, prevention, acting on early signs of behaviours or reactive. The goal is to build on the person's strengths and develop their life skills.

Support Plans need to be agreed by all parties to work together in a holistic manner, supporting each other, the client and their formal and informal supports.

Decisions must be transparent and evidence based so they can be reviewed in a timely manner.

- a) The person must consent to the restrictive practices, using Guides 4 Sight's procedure for identifying capacity to consent. If this is determined not possible, seek permission from the person authorised to make such decisions. (e.g. Guardian with relevant authority).
  - b) Any restriction must be of minimal duration whilst a more appropriate arrangement is organised.
  - c) Clearly document the circumstances leading to restriction to reduce any risk of reoccurrence.
  - d) Advise the person's family or guardian at the earliest of the restriction. If no family, carer or other friends are involved in the person's life then see the advice and guidance from the Office of the Public Advocate (for adults), or the Department of Child Protection and Family Support (for children under 18 years of age.)
  - e) Depending on the severity of the situation, notify the Disability Services Commission within 7 days of the incident.
6. **Medication (Restrictive Practices)** - Medication does not immediately constitute a restrictive practice.

A qualified psychiatrist or general practitioner may prescribe medication that is reviewed annually.

Should a Guides 4 Sight employee attend a medical appointment with a client where medication is prescribed that may impair or affect the clients function or behaviours it must

- be reported to the Director of Guides 4 Sight and
- be included on that clients personal file notes,
- have a updated Service Agreement - Health Document requested by the Client or Clients representative to be held on the clients personal file

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**NOTE:** Under no circumstances do Guides 4 Sight staff or management administer medication.

**Supported medication Assistance:** Guides for Sight staff may be required to assist vision impaired clients to identify their medication, the client is fully aware of their medication, dosage, description of tablets etc and administration however due to unforeseen circumstances the medication has been 'mixed up' or 'dropped' – assistance is needed to confirm colour, shape, numbers of individual tablets to ensure the vision impaired client has been able to find or collect the appropriate number of tablets to be self-administered properly.

## 7. Complaints

If you would like to register a complaint whether you're a provider, a participant or a client, we appreciate an opportunity to work through what is happening so we can make the situation better where we can. You can register a complaint by discussing this with your Guides 4 Sight Assistant, if you feel comfortable doing this?

Or contact Christine Tinley, Director, Guides 4 Sight, on her mobile 0438 599 956 or via email to [christine@guides4sight.com.au](mailto:christine@guides4sight.com.au) or if you prefer in writing by mail to: 14 Horseshoe Circuit, Henley Brook 6055.

As an alternative, an independent Mediation service may be approached to assist in mediating a satisfactory outcome where a situation cannot be resolved.

Information can be found at Health and Disability Services Complaints Office (HaDSCO) which is an independent Statutory Authority providing impartial dispute resolution for complaints relating to health, disability and mental health services provided in Western Australia and the Indian Ocean Territories

Independent advocacy is also available through 'People With disability WA' (PWdWA) or Ethnic Disability Advocacy Centre (EDAC). Health Consumers Council or Midland Debt Information and Advocacy Services (MIDLAS).

## 8. References

- DSC, July 2012. Positive Behaviour Support: Information for Disability Sector organisations
- DSC, November 2014. Code of Practice for the Elimination of Restrictive Practices
- Convention on the rights of the Child 1990
- Disability Discrimination Act 1992

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- National Framework for reducing and Eliminating the use of Restrictive Practices in the Disability Services Sector 2014
- Children and Community Services Act 2004
- Guardianship and Administration Act 1990
- National Standards for Disability Services (2013): specifically Standard 1: 'The service promotes individual rights to freedom of expression, self-determination, decision making and actively prevent abuse, harm, neglect and violence.'
- Universal Declaration of Human Rights
- United Nations Convention on the Rights of Persons with Disabilities
- Equal Opportunity Act 1984 (WA)
- Carers Recognition Act 2004
- Positive Behaviour Framework: Effective Service Design 2010

<b>Confidentiality Statement: New Employee</b>		<b>G4SPD10</b>
<b>Date</b>	<b>Changes</b>	<b>Authorised</b>
6/6/2018	Created document	CMT
10/6/2018	Completion of document	CMT