



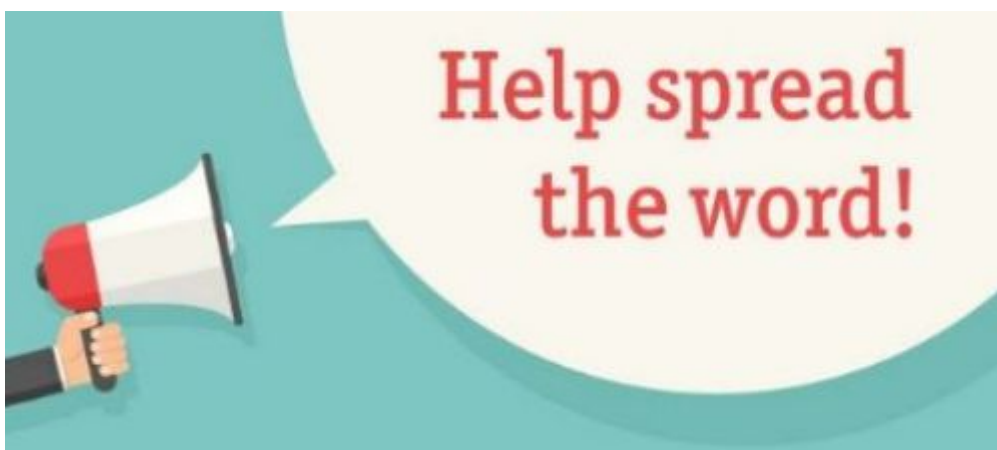
Restrictive Practices Authorisation (RPA) News

RPA Newsletter - February 2020

In this Issue

Welcome to our February issue of the RPA Newsletter. In this issue we will be discussing:

- RPA Panels and releasing submission forms in the NSW RPA System
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We encourage you to help spread the word and forward the monthly RPA Newsletter on to

your colleagues. Help us keep the NSW disability sector informed about restrictive practice authorisation in NSW .

RPA Panels and releasing submission forms in the NSW RPA System



The Department of Communities and Justice (DCJ) has recently conducted some audits of the RPA System and it is apparent that there are situations where [RPA Panels are being conducted](#):

- [before](#) submissions have been completed in the NSW RPA System, and
- [before](#) supporting documentation has been uploaded in to the NSW RPA System.

This means that on the day of the RPA Panel the submission has not been 'released' to the Panel. As a result, the Panels' ability to effectively review and consider the evidence for providing approval for the RPA submission is compromised and an outcome summary cannot be started.

Due to this issue, some NDIS providers are requesting DCJ's support to release RPA submissions and/or retrofit outcome summary dates after the panel has occurred. Please note DCJ is unable to release submissions nor retrofit outcome summary dates after the panel has occurred.

It is important to remember that if information has not been provided to panel members, then there is likely insufficient information on which to base a reasonable decision to authorise or decline a restrictive practice.

We have separately advised the contracted DCJ Independent Specialists that they are under no obligation to participate in any RPA Panel if information has not been previously made available to them, and to advise providers that the RPA Panel should not proceed.

The provider's RPA Panel must have the essential information in order to make a reasoned decision to approve or decline authorisation. RPA submissions are completed using the RPA System and supporting documents are uploaded and released well before the RPA Panel occurs.

There are a range of resources available on the [Restrictive Practices Authorisation web page](#) which have been designed to assist NDIS providers and practitioners navigate their way through the RPA System. Some of these resources include [best practice examples of](#)

an [RPA submission form](#) and an [outcome summary](#). We strongly encourage you to use these resources.

If you have any further questions you can email the Central Restrictive Practices Team at RestrictivePracticesAuthorisation@facss.nsw.gov.au.

Behaviour Support: Resources from the Quality and Safeguards Commission



**NDIS Quality
and Safeguards
Commission**

The NDIS Quality and Safeguards Commission (NDIS Commission) has a range of useful resources available on its web site. Below are a few examples.

Behaviour Support

Behaviour support focuses on person-centred interventions to address the underlying causes of behaviours of concern, while safeguarding the dignity and quality of life of people with disability who require specialist behaviour support.

Both Behaviour Support Practitioners, and providers who use regulated restrictive practices (implementing providers), are required to meet the requirements outlined in the *National Disability Insurance Scheme (Restrictive Practices and Behaviour Support) Rules 2018*. These requirements are also outlined in the following two videos which are available on the NDIS Commission web page:

This video covers the requirements for Behaviour Support Practitioners who develop behaviour support plans for NDIS participants.

- **For Practitioners: Behaviour Support in the NDIS Commission** - This video covers the requirements for Behaviour Support Practitioners who develop behaviour support plans for NDIS participants.
- **For Providers: Behaviour Support in the NDIS Commission** - This video provides an overview of the requirements for implementing providers of behaviour support

To view these videos please [click here](#).

Compendium of Resources for Positive Behaviour Support

A compendium of resources is available on the NDIS Commission web site which provides Behaviour Support Practitioners with a comprehensive list of assessment tools that can be used for the purposes of behaviour support assessment, planning, intervention, monitoring and review. A list of national and international internet resources are also included which cover a range of areas of practice in relation to behaviour support.

To access the Compendium of Resources for Positive Behaviour Support please [click here](#).

The Positive Behaviour Support Capability Framework

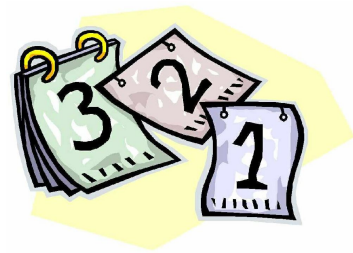
The PBS Capability Framework provides a pathway for recognition and professional progression for practitioners. It has been designed to support providers, practitioners and organisations to acquire capabilities at incremental levels, building a highly skilled and capable workforce that focuses on improving the well-being and quality of life of people with disability who require behaviour support services.

Assessment against the PBS Capability Framework will form the basis for determining suitability as an NDIS Behaviour Support Practitioner. Practitioners who have been considered 'provisionally suitable' to deliver behaviour support will be notified by the NDIS Commission when they are required to go through the assessment process.

To access the Positive Behaviour Support Capability Framework please [click here](#).

If you would like to explore the NDIS Commission web site further, please [click here](#).

Save the Date: Upcoming RPA Information Sessions



DCJ will be hosting a series of information sessions across three locations on the south coast of NSW.

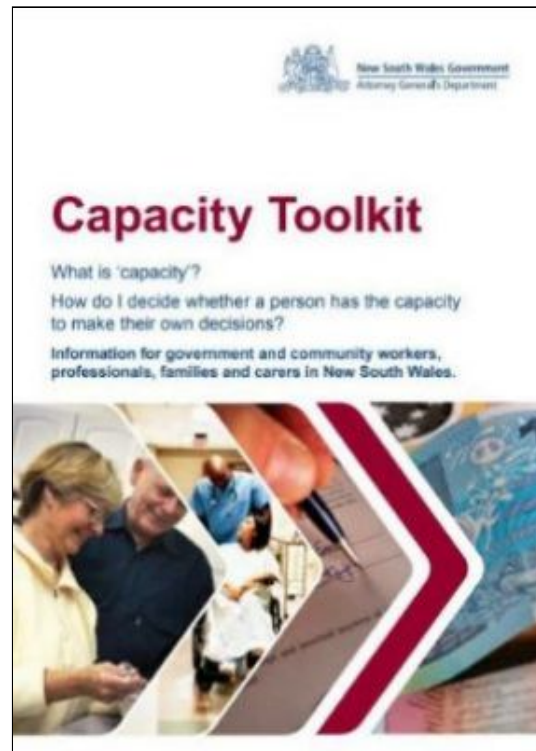
- Batemans Bay: 17 March 2020, 11:00 am to 1:00 pm
- Eden: 18 March 2020, 11:00 am to 1:00 pm
- Wollongong: 19 March 2020, 11:00 am to 1:00 pm

Focusing on restrictive practice authorisation, these sessions will provide an overview of the requirements and processes in NSW, including case studies and scenarios which will highlight good practice.

Further information about these sessions will be available on the [Information Sessions tab](#) on the Restrictive Practices Authorisation web page. Please register your attendance with Eventbrite.

NCAT Capacity Toolkit

The NSW Restrictive Practices Authorisation (RPA) Policy states consent is needed to use a restrictive practice as a component of an overall behaviour support plan and evidence of consent must be provided to the RPA Panel in order to obtain authorisation. Consent refers to the permission given by the NDIS participant or legally appointed guardian (with authority to consent to restrictive practices). For consent to be valid it must be voluntary, informed, specific and current.



While a person can give consent, if they do not understand what they are consenting to the consent provided is not informed consent. To have informed consent:

- The person who is giving consent must have the intellectual capacity and maturity to understand the situation they are consenting to, the choices that are available and the actual or likely consequences of their decisions, i.e. the likely risks and benefits.
- In order for a person to provide informed consent, a person must be given appropriate and accurate information about the matter or procedure, and that information must be presented in such a way that a person can fully understand it.
- Any consent provided must be freely given and must not be obtained by force, threat, deception or undue influence. A person may be able to make decisions and give informed consent in some areas of their life but not in others depending on their skills and experience.

The NSW Civil and Administrative Tribunal (NCAT) has a Capacity Toolkit which can assist implementing providers in correctly assessing and identifying whether a person with disability has the capacity to make their own legal, medical, financial and personal decisions.

The Toolkit can be used by government employees, community workers, professionals, families and carers to provide guidance in issues relating to capacity and capacity assessment, ensuring the rights of the person with disability are upheld. This is important as an incorrect capacity assessment can result in the denial of a fundamental human right - the right to autonomous decision-making or 'self-determination'.

Topics covered by the Capacity Toolkit include:

- What is capacity?

- Capacity assessment principles
- Tips on assessing capacity in the areas of personal life, health, and money and property
- Assisted decision-making

NCAT can provide the Capacity Toolkit free of charge to people within NSW.

To access the Capacity Toolkit please [click here](#).

For further information about involving the person with disability in the RPA process or consent please read the [NSW Restrictive Practices Authorisation Policy](#) and the [NSW Restrictive Practices Authorisation Procedural Guide](#).

Coming Soon! NSW RPA System video tutorials



The Central Restrictive Practices Team will be launching a series of RPA System video tutorials over the coming month. These short videos will provide step by step guides on how to use the NSW RPA System. These will complement the existing resources available on the NSW Restrictive Practices Authorisation web page.

These videos will be available soon on the [User Guide tab](#) on the NSW Restrictive Practices Authorisation web page.



Behaviours of concern

James is a 29 year old man who lives with three other males. He has a moderate

intellectual disability with Borderline Personality Disorder, has a history of poor impulse control and will interpret negative feedback as others not liking him, picking on him and will feel emotionally vulnerable and threatened. When he is distressed he has difficulty regulating his emotions and has been overheard in his room arguing and replying to someone when no one else was there.

James' psychiatrist has prescribed him Tegretol to stabilise his moods (anticonvulsant). Two years ago, James was also prescribed Zyprexa morning and night by his psychiatrist. The doses of Zyprexa have gradually increased and Seroquel has recently been added as a PRN dose (both medications are antipsychotics).

Proposed restrictive practice

James' NDIS provider had previously submitted and has approved an Interim application for RPA. As this interim authorisation is due to expire soon, James' provider has submitted an application for the planned authorisation of the use of chemical restraint through the NSW RPA System.

James' provider has submitted a comprehensive behaviour support plan which includes the daily dose of medications to manage James's moods and for the use of medication as a PRN dose. They have also submitted a functional behavioural analysis, one page profile, treatment sheets, medication charts and psychiatric reports.

Considerations for the RPA Panel members

Key issues to be assessed by the RPA Panel members:

- Are the medications being used to manage a behaviour or are they being prescribed for a medical reason?
- Is this the least restrictive option available to ensure James' safety and the support workers safety? Have any other strategies been attempted to manage the behaviour of concern?
- Is James going to be receiving any skills and training to allow the medications to be reduced and faded out, particularly given the dosages and numbers of medications appear to be increasing over time?
- Has a response strategy been developed for James' support personnel indicating what actions should be implemented prior to and post the use of the PRN medication, to end the incident as quickly and safely as possible?
- Have the support staff received appropriate training in regards to administering the medication to James?
- Are all documents submitted with the restrictive practice application within date and not expired?
- Are the proposed restricted practices referred to in James' Behaviour Support Plan?

Recommendations made by the RPA Panel

In this instance the RPA Panel has authorised the use of chemical restraint for a period of

12 months with a review date set for three months' time. The RPA Panel has requested a review of the restricted practice in three months' time so that a response strategy for support workers can be developed and staff can be trained in how to safely and appropriately administer James his medications. The Panel has also requested James participate in some skill development to see if the Provider can reduce the amount of medication he takes.

Have you got a real case example of where fading the use of a restrictive practice led to positive outcomes for a person you support? Let us know by emailing

RestrictivePracticesAuthorisation@facs.nsw.gov.au and we can share your story through our newsletter!

New Resources: Easy Read Guides



The Central Restrictive Practices Team recently partnered with the NSW Council of Intellectual Disability in developing two new Easy Read guides for NDIS participants which are now on the [NSW Restrictive Practices Authorisation web page](#). The two new resources include:

What is a Restrictive Practice?

This short guide explains the five types of restrictive practice are (chemical, environmental, mechanical, physical and seclusion), why someone may need one, the impact it may have on them, how authorisation is provided and how to make a complaint.

Going to a Restrictive Practice Authorisation Panel Meeting

This guide provides an explanation as to what happens at an RPA Panel meeting. It describes who will be there, what will be discussed, and how person can contribute to the meeting. It also provides an explanation of consent and explains how a person can make a complaint.

So what is Easy Read?

Easy Read is a method of presenting information in a way that is easy to read and understand. Typically it uses clear everyday language, images and symbols.

To access these Easy Read guides please click on the [Resources tab](#) on the NSW Restrictive Practices Authorisation web page.

Spotlight On

Monique Peisley

*Senior Behaviour Support Practitioner/Psychologist,
Real Therapy Solutions
DCJ Independent Specialist*



How did you get to where you are today?

I completed my undergraduate degree at the University of Sydney and during this time I needed to gain experience in the sector. An opportunity came up to become a therapist for children with Autism Spectrum Disorder so I completed training and began work with children under the age of five. I was a therapist for a few years and during this period of time some of the children I was working with were transitioning to primary school. Subsequently an opportunity came up for myself to work as a school shadow at a primary school in Sydney supporting a variety of children with disabilities. I continued to work as a therapist and shadow for approximately two years. At the same time, I began my Masters in Applied Psychology, with a specialisation in behaviour analysis. This program was based in New Zealand (completed by correspondence) as at the time there were no Australian programs offering this course. This program provided in-depth training and supervision in behaviour analysis and it provided the foundational knowledge that I continue to use today.

Following completion of my Masters I made the decision to continue studying to further my qualifications and experience in the sector. I moved to New Zealand to complete my Post Graduate Diploma in the Practice of Psychology and began my psychology internship with a large organisation called Explore Specialist Advice. Explore provide behaviour support under the Ministry of Health across New Zealand. This opportunity allowed me to travel the country whilst supporting individuals and their families. I gained significant experience with a range of clients (age 2-65 years) across a number of settings including group homes, family homes, schools and pre-schools. In particular I gained knowledge in restricted practice use in New Zealand which differs significantly to Australia. I also accrued hours toward my registration as a psychologist and a board certified behaviour analyst (BCBA) during my time at Explore. Working at Explore enabled me to work with experienced behaviour support practitioners, psychologists, occupational therapists and speech therapists – the supervision provided and experience gained was invaluable and supported me to become the practitioner I am today.

After almost two years in New Zealand and completing my registration as a psychologist and passing the board exam, the decision was made to come back to Australia to settle and begin work in the disability sector again. This transition was challenging as the NDIS had begun to roll out and as with most practitioners, I was used to a block funded system that had minimal funding restrictions when it came to providing clients with behaviour support. I began work with Interaction Disability Services as a Psychologist and following

12 months in this role and completing external supervisory activities for candidates for board certification, it was time to move on to a more challenging role. I began work with Real Therapy Solutions as the Senior Behaviour Support Practitioner/Psychologist and I am currently still in this role. This role enables me to complete project work within the organisation focusing on client work, systems and quality of support and supervising practitioners.

My current passions are working with clients with complex support needs and focusing on skill development and ensuring my clients participate as active members in the community.

What do you see are the benefits of having a DCJ Independent Specialist participating on RPA Panels?

The introduction of DCJ Independent Specialists allows organisations access to a variety of practitioners within the disability sector. It is important to have experienced practitioners in the field sit on panels to ensure the right decisions are made when it comes to the clients and restricted practices implementation within the sector. In addition, Independent Specialists provide another level of scrutiny to restricted practices submissions and evaluate all aspects of a case. I think a current challenge remaining is consistency among specialists when providing decisions on panels with specialists interpreting the restricted practices for clients in different ways. Although this is a challenge, without the DCJ Independent Specialists, there would be a reduction in panels being convened by those experienced in the sector.

Do you have any advice for any providers and practitioners conducting or involved in RPA Panels?

For any practitioners that are sitting/would like to sit on panels the main advice would be preparation. When sitting on a panel you have to ensure you are up to date with all of the changes being made in regards to Quality and Safeguards Commissions and restricted practices requirements. In addition, you have to ensure you have read all document pertinent to the panel so that the correct approvals/decisions are made.

Test your knowledge!



Question 1. What is the maximum amount of time the RPA Panel can approve a comprehensive and planned restrictive practice for?

Question 2. What does PRN stand for?

Question 3. What is the status of the Outcome Summary in the NSW RPA System when everything has been finalised?

Get in contact!



RPA News will be published monthly on the Department of Communities and Justice [Restrictive Practices Authorisation web page](#). If you would like to suggest a colleague or service to be included in *Spotlight On...* or *Provider in Focus*, or if you have any questions about restrictive practices authorisation or this newsletter, please email:

RestrictivePracticesAuthorisation@fac.s.nsw.gov.au.

Test Your Knowledge Answers

Question 1. The RPA Panel can authorise the use of a restrictive practice for no more than 12 months.

Question 2. PRN is an abbreviation for the Latin term, "pro re nata" which loosely translates to "as needed."

Question 3. The status of the Outcome Summary will be "Completed" when everything is finalised. This status will only appear when the "complete" button is clicked on the outcome form.

Our mailing address is:

RestrictivePracticesAuthorisation@fac.s.nsw.gov.au

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