

38. Managing Challenging Behaviours Policy and Procedure

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Purpose

Skymac will use all reasonable efforts to manage challenging behaviours of our residents as and when appropriate and in doing so use all reasonable efforts to:

- a) ensure the resident lives their life with dignity;
- b) consider the safety of the resident, other residents and staff; and
- c) use restrictive practices only when necessary in the interests of safety and as a last resort. Prior to the use of restraint we will collate documented evidence of challenging behaviour and strictly follow the Implementing Behaviour Support Policy.

Scope

This policy and procedure applies to all staff (including contracted agency staff), and residents of our residential facilities with impaired capacity who exhibit Challenging Behaviours.

Policy

The purpose of this policy and procedure is to:

- a) increase the capacity of our residential care facilities to provide appropriate assessment and care to residents with Challenging Behaviours including prevention, management and exploration of alternative strategies before resorting to authorised restrictive practice.
- b) comply with our duty to uphold residents' rights including the right to live in a safe, secure and homelike environment;
- c) provide assistance to staff to meet their legal and ethical responsibilities while caring for residents with Challenging Behaviours;
- d) provide a restraint minimisation and elimination framework based on our legislative obligations and best practice.

Legislative obligations

We will take all reasonable steps to comply with the obligations (including reporting obligations) imposed on us under State and Commonwealth law including *National Disability Insurance Scheme (Restrictive Practices and Behaviour Support) Rules 2018* and the *Disability Services Act 2006 (Qld)*.

Challenging behaviour

Challenging Behaviour is ‘culturally abnormal behaviour(s) of such an 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 a person being denied access to, ordinary community facilities.’

Common types of Challenging Behaviour include, but are not limited to:

- self-injurious behaviour:
 - hitting
 - head-butting
 - biting
- aggressive behaviour:
 - hitting others
 - screaming
 - spitting
 - kicking
- inappropriate sexualised behaviour:
 - public masturbation
 - groping
- behaviour directed at property:
 - throwing objects
 - stealing
- stereotyped behaviours:
 - repetitive rocking
 - echolalia
 - palilalia

Support Plans vs. Behaviour Support Plans

A Support Plan is used to guide quality and safe person-centred support for a person in multiple areas of their life such as living skills, recreation, employment and day programs.

Support Plans are developed for all clients, including those with no, or infrequent challenging behaviour.

Behaviour Support Plan is a document prepared in consultation with the person with disability, their family, carers, and other support people that addresses 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. As a last resort, this plan may include the use of Regulated Restrictive Practices.

Behaviour Support Plans are developed for only those clients with chronic and harmful challenging behaviour.

It is important to note that disability support providers who use Behaviour Support Plans **MUST** be certified to do so under national legislation. They are known as Implementing Providers.

Skymac is not certified as an Implementing Provider.

For clients displaying chronic and harmful challenging behaviour, and for whom it is deemed a Behaviour Support Plan would improve their quality of life, Skymac staff will consult external support providers certified as Implementing Providers.

Restrictive Practice

'Restrictive practice' means any practice or intervention that has the effect of restricting the rights or freedom of movement of a person with disability, with the primary purpose of protecting the person or others from harm. They are categorised as:

- Seclusion - the sole confinement of a person with disability 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.
- Chemical restraint - the use of medication or chemical substance for the primary purpose of influencing 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 disorder, a physical illness or a physical condition.

- Mechanical restraint - the use of a device to prevent, restrict, or subdue a person's movement for the primary purpose of influencing a person's behaviour but does not include the use of devices for therapeutic or non-behavioural purposes.
- Physical restraint - 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. Physical restraint does not include the use of a hands-on technique in a reflexive way to guide or redirect a person away from potential harm/injury, consistent with what could reasonably be considered the exercise of care towards a person.
- Environmental restraint - which restrict a person's free access to all parts of their environment, including items or activities.

The use of Restrictive Practices is regulated under state and national law. Use of restrictive practices that are not detailed in a behaviour support plan or do not have the required authorisation and consent may constitute a reportable incident under the NDIS (Incident Management and Reportable Incidents) Rules 2018.

Procedure

To appropriately and effectively manage challenging behaviour, Skymac will:

- Investigate and follow up on reports of challenging behaviours from other clients, employees, volunteers, family members, other stakeholders (i.e. teachers) or the general public including;
- Making a written record of the reported incident. Records must include a description of the challenging behaviour, the time and location it occurred, the antecedents (events leading up to the behaviour) and the consequences (the impact of the behaviour on the client and others).
- Involve the client, employees, key family members (where appropriate) and behavioural consultants (where required) in the development of an individual support plan aimed at ameliorating the challenging behaviour. This plan should include a thorough analysis of the problem situation, an agreed model for intervening and measurable behavioural goals for the client.
- Documenting the individual support plan and providing a copy to all parties involved in its development.
- Appoint an external consultant if required to coordinate the development and implementation of the individual support plan.

- Allocate necessary resources to the individual support plan, which may include specific skills training for the staff, environmental restructuring, higher staffing levels during the intervention period, or support from external professionals.

Skymac will undertake a formal review of the individual support plan and include all of the parties who were involved in the construction of the initial plan.

Skymac will advise the funding body if the organisation considers it lacks the resources or expertise to manage the behaviours or if challenging behaviours persist in a way that compromises the organisation's duty of care obligations to its clients, its staff and the general public.

Related documents

- Implementing Behaviour Supports Policy
- Support Plan
- Behaviour Support Plan
- Incident Report

References

- [National Disability Insurance Scheme \(Restrictive Practices and Behaviour Support\) Rules 2018](#)
- [National Disability Insurance Scheme Act 2013](#)
- [Disability Services Act 2006](#)