What are restrictive practices?

Restrictive practices are things that limit the rights of a person using behaviours of concern. For example, people using a locked door to stop a person from moving around their house freely.

Restrictive Practice is used to stop a person from doing behaviours of concern. For example, a behaviour of concern might be a behaviour when a person is:

- hurting themselves or hurting another person or
- feeling angry and breaking furniture or
- running away from people who help them.

There are a lot of laws that talk about different parts of Restrictive Practice.

- There is a special law in the ACT called the Humans Right Act 2004.
- The ACT now has a new law called the Senior Practitioner Act 2018

The Senior Practitioner is in charge of the rules for Restrictive Practice. The Senior Practitioner in ACT is Mandy Donley.
What does the Senior Practitioner Act say?

The new Senior Practitioner Act talks about Restrictive Practices.

All Restrictive Practices affect a person’s Human Rights.

Restrictive Practices can only be used if:
- there is a risk to a person’s or someone else’s safety right at that time.
- it is the last option.

The type of Restricted Practice used must be:
- the least restrictive way.
- only used for the least amount of time possible.

With the right help being put in place for a person who uses behaviours of concern, restrictive practices should not need to be used.

The right things to help a person should be put in their Positive Behaviour Support Plan. Everyone who helps the person should be involved in writing the Positive Behaviour Support Plan.
What are regulated restrictive practices?

Chemical restraint is when a person is given medication just to stop them doing a behaviour. It does not include the regular medicine that the Doctor tells a person to take to make them healthy.

Physical restraint is when another person holds a person, so they cannot move. It is not the same as when someone holds a person’s hand to cross the road.

Mechanical restraint is when equipment is used on you that does not let you move. Mechanical restraint could be a bodysuit that stops you from being able to touch your body or splints that stop you from able to move your arm.

Seclusion is when you are locked in a room or put in place where you cannot get out of or think you cannot get out.

Environmental restraint is when actions or systems stop you being able to move in your space freely or stop you from being able to join in an activity. This could be gates or fences that cannot be opened or locks on cupboards or a fridge.

Coercion is when people use words and body language to make you do what they want you to do by force. An example is you are told you will have to go to a room by yourself if you do not do something.
What does the Senior Practitioner do?

The Senior Practitioner is Mandy Donley. Mandy is in charge of a new law in the ACT called the Senior Practitioner Act 2018.

Providers follow this law. A provider is an organisation that helps people with disabilities, such as:

- schools
- early childhood services
- out of home care
- disability service

Mandy has many roles. She has to:

- write rules for providers to follow
- aim for no or close to no Restrictive Practices be used by providers in the future
- ask questions about the Restrictive Practices used by providers
- protect and give advice to people when Restricted Practices are used
- make sure providers only use Restrictive Practices when needed
- give you information and teach you about Restrictive Practices and your rights
- teach providers about other options instead of Restrictive Practices
- collect information about when, how, and why Restrictive Practices are used
- learn more about how to best to help people
My rights about my Positive Behaviour Support Plan

I can make sure providers use restrictive practices when it is the only choice because of danger to me or someone else.

I can ask questions about the restrictive practices in my behaviour support plan.

I can make sure all the restrictive practices that I experience are in my behaviour support plan.

I can make sure everyone who helps me has read and remembers my behaviour support plan.

I can expect people help me to learn new things.

If I am not happy about my behaviour support plan or decisions about my plan, I can contact the ACT Civil and Administrative Tribunal (ACAT).

Phone: 6207 1740
Email: tribunal@act.gov.au
Definitions of regulated restrictive practices
A ‘regulated restrictive practice’ is any of the following:

• seclusion, which is 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, which is 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, which is 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, which is 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