



Communities
& Justice

Restrictive Practices Authorisation (RPA) News

RPA Newsletter - August 2019

In this Issue

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

- [Public Consultation on an RPA model for NSW](#)
 - [RPA System: Best Practice Examples of an Outcome Summary and Submission Form](#)
 - [Updated DCJ \(FACS\) Restrictive Practices Authorisation webpage!](#)
 - [The RPA Temperature Check Survey Results](#)
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Public Consultation on a longer term RPA model in NSW

We would like to say thank you to everyone who contributed to the NSW Government Public Consultation on a model to authorise restrictive practices in NSW. The contribution period has now closed.

As at 9 August 2019, there had been 113 responses to the online survey:

- 7 respondents from people with disability

- 65 respondents from service providers
- 41 respondents from other interested parties.

In addition to the online surveys, the following activities have occurred:

- Two CEO Roundtables were held on 1 August 2019 with approximately 30 different service providers represented.
- State-wide focus groups engaging with people with disability with consumer peaks facilitating those discussions reporting there has been positive feedback received from participants that government is engaging in this topic seriously - it's an important topic!

RPA System: Best Practice Examples



The CRPT have been developing a series of resources with best practice examples to guide NDIS Service Providers on what a quality outcome summary and submission should resemble. The first of these examples focuses on:

- RPA Submission Form
- RPA Outcome Summary Form

These resources highlight key information and evidence which is required during the authorisation process and by the RPA system.

We strongly recommend reading these in conjunction with the [Restrictive Practices Authorisation Policy](#), [Restrictive Practices Authorisation Procedural Guide](#) and the appropriate [NSW \(FACS\) RPA System User Guide](#).

These resources will be uploaded to our [Restrictive Practices Authorisation webpage](#) soon.

If you have any questions about the above resources or restrictive practices authorisation and the NSW (FACS) RPA System please contact the Central Restrictive Practices Team at RestrictivePracticesAuthorisation@facs.nsw.gov.au.

Updated DCJ (FACS) Restrictive Practices Authorisation webpage!

The DCJ Restrictive Practices Authorisation Webpage has been refreshed! The new webpage reflects a more contemporary web design which is easy to navigate and read.



Home > > Deliver disability services > Restrictive Practices Authorisation Portal

Restrictive Practices Authorisation Portal

The information and resources available to you on the previous webpage are still available, however they have now been grouped into relevant headings and topics. This is reflected in the new clickable card design.

The Restrictive Practices Authorisation (RPA) Portal allows Registered NDIS Providers and Practitioners to:

- Register with the NSW FACS RPA System
- Request user access to NSW FACS RPA System
- Submit Restrictive Practice forms for authorisation
- Record outcome summaries, and
- Request a FACS Independent Specialist for RPA panels

[Login to Restrictive Practices Authorisation System](#)

NSW RPA System Access

Please note that both a Registration form and a User Access Request form will be required

Registration Form Use this form to register your organisation with the RPA Portal.	User Access Request Form Use this form to register individual users within your organisation.	Training Environment The RPA System Training Environment allows you to experience the features and functionalities of the RPA System.
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To check out our new webpage click [here!](#)

The RPA Temperature Check Survey Results



We would like to say thank you to everyone who took the time to respond to the Temperature Check survey. The survey explored the disability sectors' view on how DCJ can better and ultimately improve restrictive practice authorisation decisions. We are currently preparing a document on the findings of the survey. These will be available in the next edition of the RPA News. Below are some insights into the respondents!

The survey was conducted among **1,612** NDIS Service Providers and **571** NDIS Behaviour Support Practitioners (total of **2,183**). The survey was completed by a total **425** (19%) respondents.

59.3% of respondents were implementing service providers, 25.9% were Behaviour Support Practitioners, and 14.8% identified as 'Other'. Examples of 'Other' roles include FACS Independent Specialists, Managers or Team Leaders, Psychologists, Case Managers, Teachers, Direct Support Staff, and Administration.

The majority of those who responded had been operating in the sector for over 6 years (78.1%). 17.4% had been operating in the sector for 1 to 3 years, and 4.8% were relatively new to the sector having been in operation for less than 12 months.

The data collected represents a range of services, specifically Specialist Disability Accommodation (34.1%), Behaviour Support (32.7%), Social and Community Participation (18.6%), Employment Services (0.8%), and Other (14.2%) such as Respite, Education, and Case Management. 23 respondents stated that their Organisation provides multiple services to NDIS participants.

Stay tuned for more!

NSW (FACS) RPA System User Guide - Parts 4 & 5 available!



Parts 4 and 5 of the NSW (FACS) RPA System User Guide will be available shortly on the Restrictive Practices Authorisation webpage.

- **The RPA System User Guide - Part 4: Recording Outcomes and Decisions** includes information on recording RPA panel outcomes and decisions in the system.
- **The RPA System User Guide - Part 5: Reviewing Implementation and Progress** includes information on reviewing the implementation and progress of an authorised restrictive practice.

To access Parts 1 to 6 of the NSW (FACS) RPA System User Guides please click [here](#).



Behaviours of concern

Annie is a 32 year old female who lives in a group home with three other residents. She has a diagnosis of Autism Spectrum Disorder and a mild intellectual disability. Annie sometimes feels anxious when there are a lot of people or noises in her environment. She has not been prescribed any regular medication and does not like to take pills.

Recently Annie has started to be physically aggressive with her co-residents and staff when she feels anxious. This usually happens in the common living area when several other people are present in the room. When these incidents occur, one of Annie's co-residents will try to help by moving closer and talking loudly to Annie. This however further escalates tensions and risk of harm. A few weeks ago, Annie hit a co-resident with a mug, causing a mild scalding and a large bruise.

Proposed restrictive practices

Annie's service provider has submitted a request to authorise the use of a two-person physical restraint of Annie and to physically move her from the common area to her bedroom when she is escalating physically aggressive. Her bedroom is at the farthest end of the house from the common area.

The submission includes a behaviour assessment report and a current behaviour support plan with a clearly defined physical restraint procedure. The submission does not describe any strategies for de-escalation or include any protective behaviour training for the co-residents.

Considerations for the RPA panel members

Key issues which would be assessed by the RPA panel members include:

- How frequently is Annie's behaviour escalating?
- What are the contextual factors surrounding Annie's physical aggression and the relationship and interaction between her and her co-resident? Do the documents submitted adequately address this?
- What other strategies have been attempted to manage the behaviour of concern (physical aggression)?
- What training will staff receive in regards to the use of physical restraint?
- Has a fade-out strategy been included in the behaviour support plan?

Recommendations made by the RPA panel


In this instance, the RPA panel has not authorised the restricted practice. This is because the supporting evidence is insufficient and does not explore less restrictive alternatives. The panel has made the following recommendations in order to explore less restrictive alternatives to reduce the immediate risk of harm and enable work on longer term strategies:

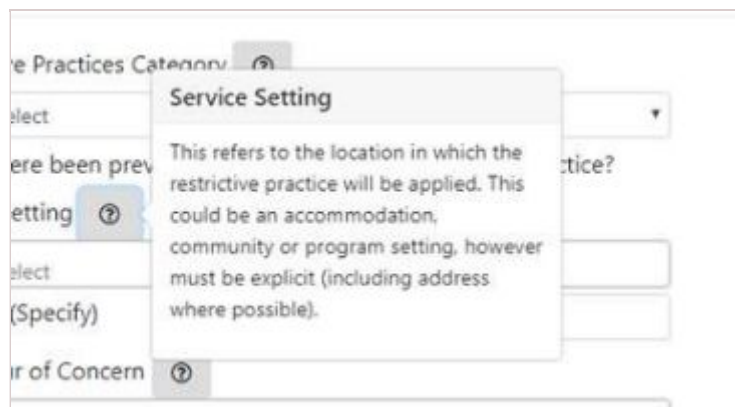
- A functional analysis of the behaviour of concern to ensure that the proposed strategies address Annie's physical aggression in an adequate and positive manner.
 - Explore less restrictive strategies to manage the behaviour of concern for Annie. An example of this may be redirecting Annie's attention or holding Annie's arms when she uses aggression towards staff or co-residents (authorisation would still be required to use this restrictive practice).
 - Skill development for Annie in recognising her anxiety and managing this more appropriately.
 - Skill development with respect to the identification of the characteristics of when someone's behaviour is escalating and also relating positively, for the co-resident who tries to help by getting involved when an incident occurs.
 - Options must be explored to fade-out the use of the environmental restraint.
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Did you know?



Throughout the NSW (FACS) RPA System there are [easy-access hover help tips](#).

You can view these by using your mouse to click on the question mark icon . This will bring up a helpful tip which provides further explanation of the part of the form which the question mark icon is next to.



Tying up loose ends: What to do in the RPA system when a behaviour support practitioner changes employer

Changes in employment are an inevitable part of working life. When a practitioner is aware that they will be changing employer,

there are steps that both the **practitioner** and the implementing service provider needs to consider to ensure a smooth transition of responsibilities in the RPA system.



Practitioner



Practitioner consider notifying the implementing service provider that they are leaving their workplace.



Practitioner (if they were a panel member) to finalise any of their pending panel decisions in the RPA System by navigating to the outcome summary and clicking on 'approve' or 'not approved' button.



Practitioner to review their participant's submissions to see if they are listed as the 'endorsing practitioner' for any 'draft' or 'new' submissions. If so, the **practitioner** may wish to let the applicant know that they are no longer working with this participant and request that their name is replaced in the submission.



The **Practitioner** ensures their RPA System account details are updated.

Implementing Service Provider



Implementing service provider makes every reasonable effort to identify the new behaviour support practitioner providing the participant with behaviour support.



Implementing Service Provider to make changes to the practitioner in the RPA System for their participant. This can be done by updating the 'Primary Behaviour Support Practitioner' field in the participant's profile.

If you have any questions about these processes, please contact the Central Restrictive Practices Team at RestrictivePracticesAuthorisation@facs.nsw.gov.au.

All about FACS Independent Specialists (IS)

FACS funded Independent Specialists are available to participate on your RPA panels. They can fulfil up to two of the three roles required on an RPA Panel, the Behaviour Support Specialist, the Independent panel member, or both the Behaviour Support Specialist and the Independent panel member. These specialists are not directly employed by DCJ and come from a range of service providers. They have undergone a rigorous tender process and have a variety of experiences.

FACS Independent Specialists can be accessed for RPA panels where only one submission is heard or where multiple submissions are heard.

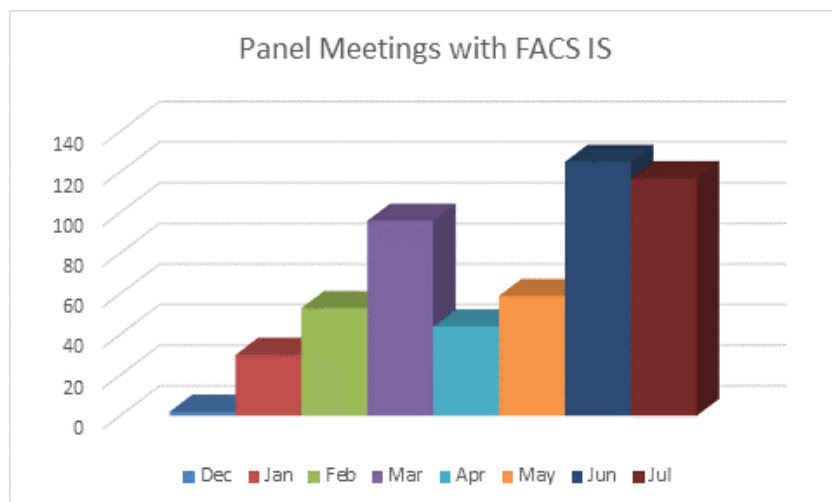
The Central Restrictive Practices Team have recently released a new whiteboard style video which will be released soon. The video will focus on:

- What is a FACS Independent Specialist?
- How can I access a FACS Independent Specialist?

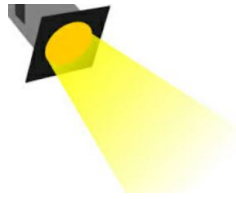
The new video will be uploaded to our [Restrictive Practices Authorisation webpage](#) shortly!



Since the commencement of the FACS Independent Specialist, we have had a steady increase in the number of service providers who have accessed this free service. To date, well over 54 different Service Providers have accessed a FACS Independent Specialists.



If you have any questions about FACS Independent Specialists please email the Central Restrictive Practices Team at RPAIndependentSpecialists@facs.nsw.gov.au. For detailed instructions on how to request a FACS Independent Specialist please refer to the [NSW \(FACS\) RPA System User Guide Part 3: Endorsement and Assigning Panel Members](#).



Spotlight on...



Michael Manning

*Practice Leader - Allied Health, Momentum Collective
FACS Independent Specialist*

How did you get to where you are today?

I have always had a fascination with the brain and behaviour. In my teens I developed a keen interest in philosophy and social justice. Ten years ago I embarked on a career change that led me to study psychology. In many ways it felt like I had found my home.

During my second year of university, I became a Support Worker with a person experiencing complex disabilities. There were limited resources, so we took the initiative to draft a Behaviour Assessment and Support Plan. I gave this to my manager who passed it on. The rest, as they say, is history. They promoted me to Caseworker, specialising in behaviours of concern. The Clinical Manager, Lisa Jones, was a psychologist who took me under wing and supervised my support plans. It was relatively early days for Authorisation Panels and I was lucky enough to sit alongside Lisa and Carrie Brooks as they worked to reduce and remove restrictive practices.

At the Far North Coast Behaviour Support Forum, I had the pleasure of meeting many other practitioners. I had the opportunity to write organisational procedures to ensure compliance with ADHC policies and was privileged to work with Kay Piera to develop Positive Behaviour Support Training.

I ended up completing my Bachelor of Applied Psychology with first class honours, racking up five consecutive awards for Academic Excellence. By my graduation, I had been promoted to Behaviour Specialist and moved to Momentum Collective (formerly On Track Community Programs). I then received an offer I couldn't refuse: a scholarship to undertake my PhD. I became a Sessional Academic and led tutorials in Biological Psychology, Cognition Memory and Learning, and Personality and Individual Differences. My PhD topic? Resilience and Coping of Adults with an Intellectual Disability.

I continued to work alongside people with a disability to co-design and implement Behaviour Supports. Midway through my PhD I returned to Momentum and started working with FACS to implement the innovative FACS Clinical Governance Framework.

Clinical Governance and capacity building continues to be a priority to me as the sector continues to evolve. Keneti Galo, Momentum's General Manager - Practice, inspires me every day and supervises my work in parallel with Nicola Roberts of SAL Consulting. I

continue my PhD under the supervision of Associate Professor Elizabeth Conlon.

It has been a long road, but the people around me - my colleagues, the people we support and my friends enrich my life in ways I never knew was possible. They continue to be my strength and my inspiration and I am so lucky to walk alongside them.

What do you see are the benefits of having the FACS Independent Specialists participating on RPA panels?

Working as a FACS Independent Specialist, I again find myself surrounded by amazing people who truly believe in upholding the rights of people with a disability. The staggering wealth of knowledge and experience of my fellow FACS Independent Specialists is on show during the regular workshops held by DCJ. This combined practice knowledge gives organisations an opportunity to reflect on and improve their practice. The presence of FACS Independent Specialists challenges organisations to shift their focus from supporting participants' safety to empowering people to safely meet their unique goals.

This valuable resource ensures that the Authorisation process is more than just a data collection and collation exercise. Having a FACS Independent Specialist present provides the host organisations with an opportunity to access clinical insight that stimulates more robust case conceptualisation.

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

Collaborate, empathise, listen and learn. The vast majority of the people who work in our sector have the best interests of the people in we support at heart. We are all doing our best to support people in a period of unprecedented systemic change.

As panel members we have a unique opportunity to sit in a place of curiosity and explore possibilities. Together, we can evolve our thinking and practice to empower the people we support to take control of their lives. To become active participants in their communities and enrich our shared experience.

Open your mind to alternative viewpoints, respect the lived experience of the people we support, and share your understanding to improve outcomes and reduce restrictions. True inclusion removes systemic barriers. This can only be achieved by empowering people to be their best possible self.

Test your knowledge!



Question 1. Can a review be used to extend the authorisation period of a restrictive practice?

Question 2. Who funds FACS Independent Specialists to attend RPA panels?

Question 3. What practices are prohibited in NSW?

Get in contact!



RPA News will be published monthly on the [DCJ RPA Webpage](#). 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@facs.nsw.gov.au.

Test Your Knowledge Answers

Question 1. A review can never be used to extend the authorisation date of a restricted practice. An RPA panel may request a review in order to ensure that the recommendations in the outcome summary are being progressed. Those implementing the practice may also request a review to give feedback to the panel on constraints that they may be facing, or on improvements which have been made by enacting the recommendations made by the panel. A review may be used multiple times during the period of authorisation.

Question 2. FACS Independent Specialists are funded by the Department of Communities and Justice to attend and participate on RPA Panels.

Question 3. The following practices are prohibited in NSW: aversion, overcorrection, misuse of medication, seclusion of children or young people, denial of key needs, and any unauthorised use of a restrictive practice. For a more detailed explanation please refer to the *Restrictive Practices Authorisation Policy*.

Our mailing address is:

RestrictivePracticesAuthorisation@facs.nsw.gov.au

Why am I getting this?

All individuals registered with the NSW (FACS) RPA System will automatically receive the RPA Newsletter.

Don't like our emails?

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