

Changing the framework for restrictive practices in QLD



Easy Read

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About this information



This information is a summary of a big document.

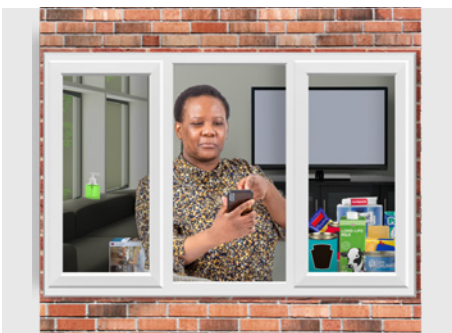


Summary means we only talk about the most important things from the big document.



This information will talk about

- The rules for using restrictive practices
- How we can make the rules in QLD better

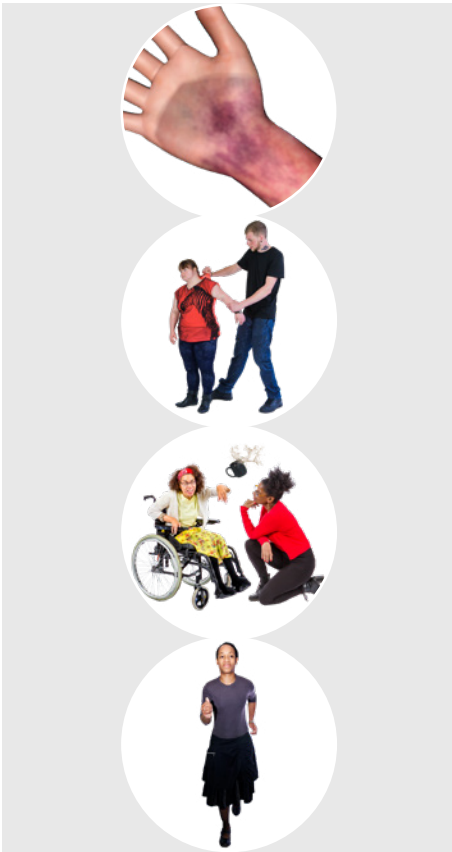


Restrictive practice means that you cannot move around freely.

About restrictive practices



Restrictive practices are used when you do things that make yourself or others not safe.



This could be when you

- Hurt yourself
- Hurt other people
- Break things when you are angry
- Run away



Restrictive practices are used when nothing else works to stop you from doing these things.

Types of restrictive practices



Mechanical restraint is when you cannot move around freely.

You might have to wear a suit that stops you from touching parts of your body.



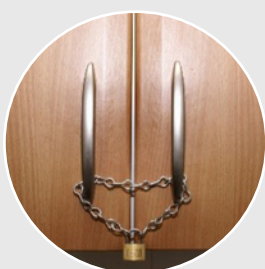
Seclusion is when you are put in a room alone to have time out.



Chemical restraint is when you get medication to stop you from doing things that are not safe.



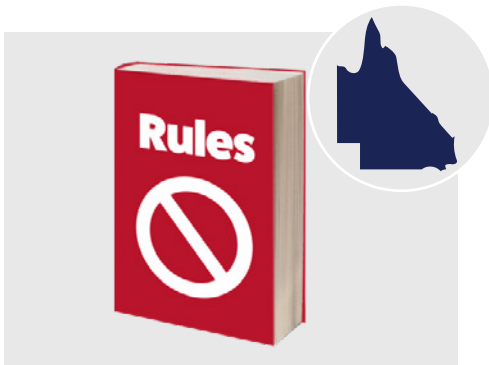
Physical restraint is when someone holds you so you cannot move.



Environmental restraint is when doors or windows in your house are locked to stop you going outside.

It can also be locked cupboards to stop you from getting things like food.

National principles



The QLD Government looks after the rules for restrictive practices.



The NDIS put together ideas to help governments make rules for restrictive practices.

These ideas are called the **national principles**.



The QLD Government wants to find out how the national principles could work for QLD.

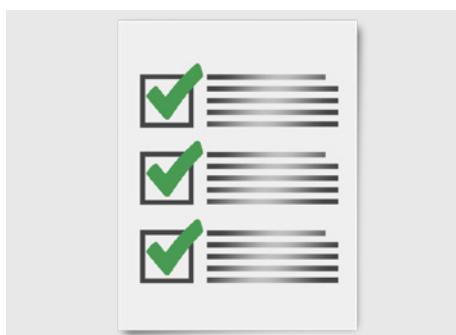


We want to talk to people with disability, families and advocates to hear what you think.

A new framework for QLD



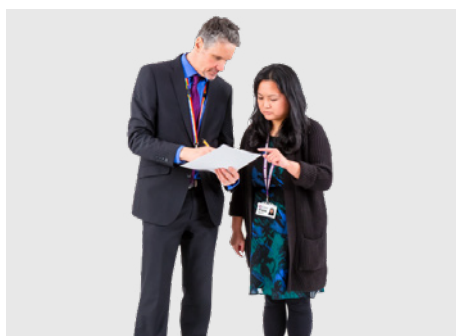
We want a new framework about restrictive practices for QLD.



The **framework** will say what the rules are for using different restrictive practices.



We have 7 big ideas about what the framework should look like.



We will talk about each idea.

We will talk about how it could work in QLD.

Idea 1.

One framework for everyone on the NDIS

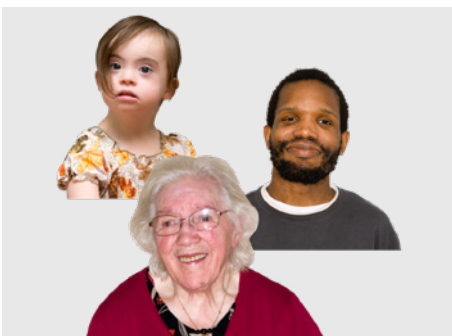


The framework in QLD is only for adults with intellectual disability.



It is for adults who cannot make their own decisions.

How could this be better



We want the new framework to be for **all** people on the NDIS.

This means adults and children.



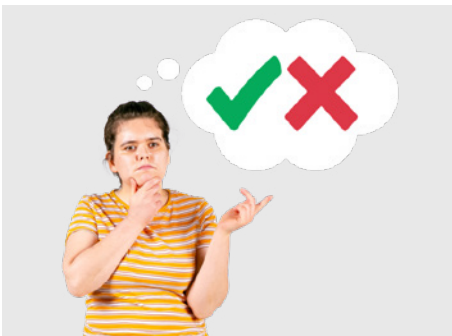
The framework should be for all disabilities.



This is important because all people with disability have the right to be safe.



People have the right to be safe even if restrictive practices are used.



People with disability also have the right to make their own choices.



That also means the choice to say no to restrictive practices.

Idea 2.

The same definitions as the NDIS framework



Right now QLD uses other definitions for restrictive practices as the NDIS.

Definitions tell you what something means.

How could this be better



We want the same definitions as the NDIS in the new framework.



When we use the same words people will understand better.



This will help

- People on the NDIS
- Families of people with disability
- NDIS service providers



Everyone will know what people are talking about.



It also helps people understand that something is a restrictive practice.

They might not have known that before.



Service providers might not have known that locking doors and windows is a restrictive practice.

Idea 3.

Say no to some restrictive practices



At the moment **all** restrictive practices are ok to use.



They can only be used to keep you or others safe.

How can this be better

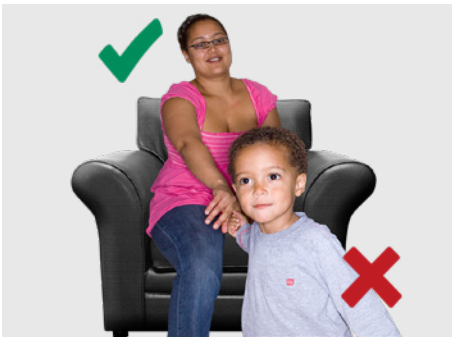


We want rules that say

- Which restrictive practices are ok to use
- When you can use them



There might be some restrictive practices that should never be used.



There are some restrictive practices that might be ok to use for adults but not for children.



We want to think about what restrictive practices are **not** ok

- For adults
- For children



We want the new rules to make it harder to use restrictive practices.



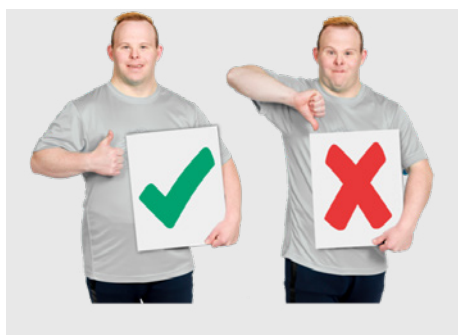
We hope that one day there will be no more restrictive practices.

Idea 4.

Easier steps to know if it is ok to use restrictive practice



The framework in QLD right now is very hard to understand.



It can be hard for service providers to know what they can and cannot do.



The framework is only for adults with intellectual disability who cannot make their own choices.



You need to check with someone else for different restrictive practices.

This could be people or organisations.

How could this be better



Every person who might need restrictive practice should have a behaviour support plan.



The **behaviour support plan** should say what restrictive practices can be used and when.



This should include the restrictive practices of containment and seclusion.

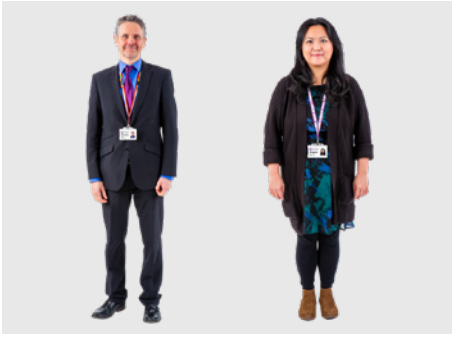


Containment is when you cannot move about freely.

This could be locked doors or windows in your house to stop you going outside.



Seclusion is when you are put in a room alone to have time out.



There could be 2 new jobs that will help make decisions about restrictive practices

- Authorised Program Officer
- Senior Practitioner



The **Authorised Program Officers** would look after some restrictive practices.

They say when they can be used.



They are doctors with lots of training and experience.

They might work for service providers.



The **Senior Practitioner** would look after all other restrictive practices.

They say when it is ok to use them.



They would be very well trained doctors with lots of experience.



For some decisions the Authorised Program Officer and the Senior Practitioner have to work together.

Idea 5.

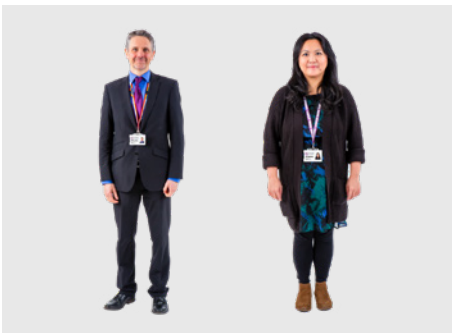
QCAT only checks decisions



QCAT is short for Queensland Civil and Administrative Tribunal.



It is their job to say when containment and seclusion can be used.



The role of QCAT will need to change if we get other people to make decisions about restrictive practices.

This could be an Authorised Program Officer, Senior Practitioner or another person.



Instead of making decisions QCAT could check decisions of the other people.

How could this be better



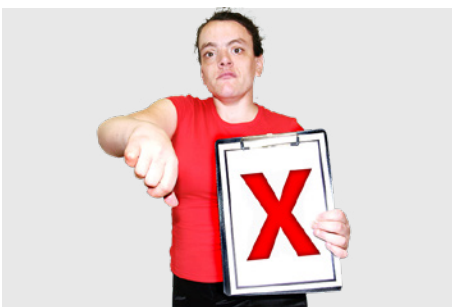
People can ask QCAT to check decisions made by the other people.



QCAT would check if it was the right decision.



Service providers could pick someone to be their Authorised Program Officer.



The Senior Practitioner could say no to that person.



The service provider could then ask QCAT to look into why this happened.

Idea 6.

People with disability have a say about restrictive practices



Service providers must tell the person before they will use a restrictive practice.



They must write to them in a way they can understand like Easy Read.



They must also write to the family or support person.



The letter must say

- Why they want to use the restrictive practice
- Who makes the decision about using the restrictive practice
- How the person can be part of the decision
- How the person can make a complaint

How could this be better



People with disability have the right to make decisions about what happens in their lives.



They should be part of making the decisions about restrictive practices.



We need to use more supported decision making.

Supported decision making means you get the help you need to make your own choices.



The person must be part of writing their own Positive Behaviour Support Plans.



Positive Behaviour Support Plans are plans that help you stop doing bad things to yourself or other people.

They help you do more good things.

Idea 7.

Senior Practitioners must share what they do



If there will be Senior Practitioners in QLD we want them to share what they do with everyone.



They should share information about

- What restrictive practices they said yes to
- Why they said yes
- How often restrictive practices were used
- How long they were used for



This will help us know what works well and what needs to change.



It will help make changes to the rules about restrictive practices.

Have your say



We want to know what you think about our ideas.



We have a list of questions that might
help you. You can find the questions **here**



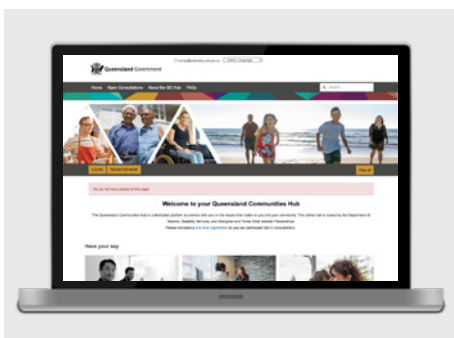
You can email it to
**restrictivepracticesreview@
dsdsatsip.qld.gov.au**



You can post it to

Strategic Policy and Legislation
Department of Seniors, Disability Services
and Aboriginal and Torres Strait Islander
Partnerships

**GPO Box 806
Brisbane QLD 4001**



For more information go to

www.qld.gov.au/restrictive-practices-review



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