Behaviour Support 4 Kids ABN 18 658 931 661

Specialist Behaviour Support Policy

1. Introduction

1.1 Purpose

This Policy and the Policies and Procedures and related documentation set out in section 1.5 below (**Related Documentation**) supports Behaviour Support 4 Kids to apply the Specialist Behaviour Support NDIS Practice Standard.

1.2 Policy Aims

Behaviour Support 4 Kids is committed to ensuring that:

- (a) each Client accesses behaviour support that is appropriate to their needs which incorporates evidence-informed practice and complies with relevant legislation and policy frameworks;
- (b) each Client is only subject to a restrictive practice that meets any state and territory authorisation (however described) requirements and the relevant requirements and safeguards outlined in Commonwealth legislation and policy;
- (c) each Client's quality of life is maintained and improved by tailored, evidence-informed behaviour support plans that are responsive to their needs;
- (d) each Client's behaviour support plan is implemented effectively to meet the Client's behaviour support needs;
- (e) Each Client has a current behaviour support plan that reflects their needs, improves their quality of life and supports their progress towards positive change. The plan progresses towards the reduction and elimination of restrictive practices, where these are in place for the Client;
- (f) each Client that is subject to an emergency or unauthorised use of a restrictive practice has the use of that practice reported and reviewed;
- (g) Each Client with an immediate need for a behaviour support plan receives an interim behaviour support plan which minimises the risk to the Client and others.

1.3 NDIS Quality Indicators

In this regard, Behaviour Support 4 Kids aims to demonstrate the following quality indicators through the application of this Policy and the relevant systems, procedures, workflows and other strategies referred to in this Policy and the Related Documentation:

- (a) Each Client accesses behaviour support that is appropriate to their needs which incorporates evidence-informed practice and complies with relevant legislation and policy frameworks
 - (1) The National Disability Insurance Scheme (Restrictive Practices and Behaviour Support) Rules 2018 are understood and applied.
 - (2) All NDIS behaviour support practitioners have been assessed as suitable to deliver specialised positive behaviour support, including assessments and development of behaviour support plans.

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- (3) Each NDIS behaviour support practitioner undertakes ongoing professional development to remain current with evidence-informed practice and approaches to behaviour support, including positive behaviour support.
- (4) A specialist behaviour support clinical supervisor provides clinical supervision of each work practice of the NDIS behaviour support practitioner.
- (5) Demonstrated commitment to reducing and eliminating restrictive practices through policies, procedures and practices.
- (b) Each Client is only subject to a restrictive practice that meets any state and territory authorisation (however described) requirements and the relevant requirements and safeguards outlined in Commonwealth legislation and policy
 - (1) Knowledge and understanding of regulated restrictive practices as described in the National Disability Insurance Scheme (Restrictive Practices and Behaviour Support) Rules 2018 and knowledge and understanding of any relevant state or territory legislation and/or policy requirements and processes for obtaining authorisation (however described) for the use of any restrictive practices included in a behaviour support plan.
 - (2) Each Behaviour Support Practitioner undertakes professional development to maintain an understanding of practices considered restrictive and the risks associated with those practices.
 - (3) Each Client and, with the Client's consent, their support network, providers implementing behaviour support plans, and other relevant stakeholders are engaged in discussions about the need for restrictive practices and they understand the risks associated with their use. Alternatives to the use of restrictive practices are promoted as part of these discussions.
 - (4) Each Client and, with the Client's consent, their support network, their providers implementing behaviour support plans and other relevant stakeholders are engaged in the development of behaviour support strategies that are proportionate to the risk of harm to the Client or others.
 - (5) Restrictive practices are only included in a Client's behaviour support plan in accordance with relevant Commonwealth legislation and/or policy requirements and relevant state or territory legislation and/or policy requirements for obtaining authorisation (however described) for the use of any restrictive practices.
 - (6) Regulated restrictive practices in behaviour support plans comply with the conditions prescribed in the National Disability Insurance Scheme (Restrictive Practices and Behaviour Support) Rules 2018.
 - (7) Each Client's behaviour support plan or interim behaviour support plan includes strategies that will lead to the reduction and elimination of any restrictive practices included in the plan.
 - (8) Support is provided to other providers implementing a behaviour support plan, in delivering services, implementing strategies in the plan and evaluating the effectiveness of current approaches aimed at reducing and eliminating restrictive practices.
- (c) Each Client's quality of life is maintained and improved by tailored, evidence-informed behaviour support plans that are responsive to their needs

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- (1) Work is undertaken with each Client and their support network to undertake a behaviour support assessment that identifies unmet Client needs, the function and/or purpose of behaviours, and identifies strategies to address behaviours of concern.
- (2) Behaviour support plans take into account all appropriate sources of information such as the behaviour support assessment, and with the consent of the Client, the Client's support network, the providers implementing behaviour support plans, and assessments carried out by other collaborating providers and mainstream service providers.
- (3) Behaviour support plans are consistent with evidence-informed practice, including proactive strategies.
- (4) The interface between reasonable and necessary supports under a Client's plan and any other supports or services under a general system of service delivery that the Client receives, are considered, and strategies and protocols are developed to integrate supports/services as practicable.
- (5) Behaviour support plans are developed in consultation with the providers implementing behaviour support plans, and the behaviour support plan is given to those providers for their consideration and acceptance.
- (6) All behaviour support plans containing a regulated restrictive practice are provided to the Commissioner in the time and manner prescribed in the National Disability Insurance Scheme (Restrictive Practices and Behaviour Support) Rules 2018.

(d) Each Client's behaviour support plan is implemented effectively to meet the Client's behaviour support needs

- (1) Assistance is given to ensure that the providers implementing behaviour support plans understand the relevant state or territory legislative and/or policy requirements for obtaining authorisation (however described) for the use of a restrictive practice included in a behaviour support plan, including any conditions around the use of restrictive practices.
- (2) Reasonable measures are taken to ensure the Client, and with the Client's consent, the Client's support network, and the providers implementing behaviour support plans, understand the rationale underpinning the behaviour support plan. Instructions and guidance are developed to support the Client, the providers implementing behaviour support plans and the Client's support network to effectively implement the behaviour support plan.
- (3) Providers implementing behaviour support plans are made aware of the reporting requirements prescribed in the National Disability Insurance Scheme (Restrictive Practices and Behaviour Support) Rules 2018.
- (4) Person-focused training, coaching and mentoring is facilitated or delivered to each of the providers implementing behaviour support plans, and, with each Client's consent, their support network (where applicable). It covers the strategies required to implement a Client's behaviour support plan, including positive behaviour support strategies.
- (5) Development of behaviour support plans for each Client, in collaboration with the providers implementing the behaviour support plan.
- (6) Where the specialist behaviour support provider recommends that workers implementing a behaviour support plan receive training on the safe use of a restrictive practice included in a

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plan, oversight is retained to ensure the training addresses the strategies contained within each Client's behaviour support plan.

- (7) Ongoing support and advice is offered to providers implementing behaviour support plans, and, with the Client's consent, their support network (where applicable), to address barriers to implementation.
- (e) Each Client has a current behaviour support plan that reflects their needs, improves their quality of life and supports their progress towards positive change. The plan progresses towards the reduction and elimination of restrictive practices, where these are in place for the Client
 - (1) The progress and effectiveness of implemented strategies are evaluated through regular engagement with the Client, and by reviewing, recording and monitoring data collected by providers implementing behaviour support plans.
 - (2) Modifications to the strategies contained in each Client's behaviour support plan are made based on engagement with the Client and the results of the information and data analysis, and with the Client's consent, these changes are communicated and training is provided (where required) to their support network on the modified strategies.
 - (3) Opportunities to reduce the use of restrictive practices based on documented positive change are pursued.
 - (4) The Commissioner is notified and work is undertaken with the Commissioner to address such situations:
 - (A) where effective engagement with providers implementing behaviour support plans is not possible for any reason; or
 - (B) if the supports and services are not being implemented in accordance with the behaviour support plan.
 - (5) Each Client's behaviour support plan is reviewed at least every twelve months. Consideration is given to whether the Client's needs, situation or progress create a need for more frequent reviews, including if the Client's behaviour changes, or if a new provider is required to implement the plan.
 - (6) The Commissioner is notified of changes in each Client's behaviour support plan in the manner and time frame prescribed in the National Disability Insurance Scheme (Restrictive Practices and Behaviour Support) Rules 2018.
- (f) Each Client that is subject to an emergency or unauthorised use of a restrictive practice has the use of that practice reported and reviewed
 - (1) Support is given to the providers implementing each Client's behaviour support plan in responding to a reportable incident involving the use of restrictive practices.
 - (2) Each Client, and with the Client's consent, their support network, the providers implementing behaviour support plans and other stakeholders are included in the review of incidents.
- (g) Each Client with an immediate need for a behaviour support plan receives an interim behaviour support plan which minimises the risk to the Client and others

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- (1) When a Client develops an immediate need for behaviour support, the Client and the providers implementing behaviour support plans are involved in evaluating the risks posed to the Client and others by the Client's behaviour, and an interim behaviour support plan is developed that appropriately manages that risk.
- (2) Advice and guidance is given to the providers implementing behaviour support plans and, with the Client's consent, their support network on the effective implementation of the interim behaviour support plan.

1.4 Scope

- (a) This Policy applies to:
 - (1) Clients of Behaviour Support 4 Kids who display behaviour or are at risk of displaying behaviour that causes or may cause physical harm to the Client or any other person or destroying property in the risk of harm to the Client or any other person;
 - (2) behaviour support practitioners who work with those Clients;
 - (3) anyone involved in the implementation and monitoring of behaviour support plans for those Clients, including support Workers, family and carers and may extend to teachers and volunteers;
 - (4) other service providers who provide services to those Clients;
 - (5) any other person affected by the behaviour of those Clients, including co-residents or other people with whom those Clients and their support networks may be in contact;
 - other professionals who support those Clients, which may include professionals with backgrounds in medicine, psychiatry, education, allied health or justice.
- (b) All permanent, fixed term and casual staff, contractors and volunteers are required to take full responsibility for ensuring full understanding of the commitments outlined in this Policy.
- (c) The relevant persons specified in the column corresponding to a procedure described in this Policy have the responsibility to implement the relevant systems, procedures, workflows and other strategies referred to in the relevant procedure.

1.5 Related Documentation

The application of the above NDIS Practice Standard by Behaviour Support 4 Kids is supported in part by and should be read alongside the Policies and Procedures and related documentation corresponding to this Policy in the Policy Register.

2. Definitions

2.1 Definitions

Behaviour Support 4 Kids means Behaviour Support 4 Kids Pty Ltd ABN 18 658 931 661.

BSP means a behaviour support practitioner.

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Client means a Client of Behaviour Support 4 Kids (including an NDIS Client) and includes current, future and former Clients.

Commissioner means the NDIS Commissioner.

Key Management Personnel means Emma Zarcinas and other key management personnel involved in Behaviour Support 4 Kids from time to time.

Legislation means the NDIS (Provider Registration and Practice Standards) Rules 2018, NDIS (Restrictive Practices and Behaviour Support) Rules 2018, NDIS (Quality Indicators) Guidelines 2018, United Nations (2006) Convention on the Rights of Persons with Disabilities (CRPD), PBS Capability Framework and other legislation, policies frameworks, regulations, rules and guidelines referred to in the Legislation Register.

Legislation Register means the register of legislation, policy frameworks, regulations, rules and guidelines maintained by Behaviour Support 4 Kids.

PBS Capability Framework means NDIS Positive Behaviour Support Capability Framework: For NDIS Providers and Behaviour Support Practitioners.

Policy Register means the register of policies of Behaviour Support 4 Kids.

Primary BSP means Emma Zarcinas.

Procedures means the procedures which are intended to clarify the responsibilities of the board, Principal, Key Management Personnel and other Workers and make explicit the underlying principles of this Policy.

Related Documentation has the meaning given to that term in section 1.1.

RRP means regulated restrictive practices.

Worker means a permanent, fixed term or casual member of staff, a contractor or volunteer employed or otherwise engaged by Behaviour Support 4 Kids and includes the Principal.

Words and phrases not defined in this Policy will have the meaning given to them in the Legislation.

3. Policy

3.1 General

- (a) Behaviour Support 4 Kids is committed to providing best practice behaviour support for its Clients and reducing and eliminating the use of restrictive practices.
- (b) Behaviour Support 4 Kids recognises that people with disabilities have rights under the Legislation. These include the right to:
 - (1) equal recognition as a person before the law;
 - (2) the right to justice;
 - (3) the right to liberty and security;
 - (4) freedom from exploitation, violence and abuse;

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- (5) living independently and being included in the community;
- (6) freedom of expression and opinion, and access to information;
- (7) habilitation and rehabilitation.

Behaviour Support 4 Kids is committed to ensuring the Clients' human rights are respected.

- (c) Behaviour Support 4 Kids is committed to upholding the values and principles set out in the PBS Capability Framework:
 - (1) Values:
 - (A) respect, protect and fulfil human rights, through meeting obligations under the United Nations' Convention on the Rights of Persons with Disabilities (CRPD);
 - (B) person-centred approaches;
 - (C) strengths-based approaches to increase capacity of individuals, families and carers;
 - a holistic approach (recognising the connections between a person's physical, emotional, spiritual and family wellbeing);
 - (E) recognise the importance of mainstream (e.g., medical, justice and education systems) and specialist disability services, and their roles in the team supporting with the person;
 - (F) respect for the person's 'voice';
 - (G) full participation of people with disability as citizens in their communities;
 - (H) collaboration as recognition of the value of teamwork;
 - (I) transparency and openness.
 - (2) Principles:
 - (A) legally and ethically sound practice;
 - (B) culturally competent practice;
 - (C) reflective practice;
 - (D) evidence-based practice and data-driven decision-making;
 - (E) recognition that behaviours of concern are often the result of interactions between the person and their environment, and may be affected by multiple factors;
 - (F) acknowledgement of a lifespan perspective and that as people grow and develop, they face different challenges;
 - (G) commitment to the principles of supported decision-making.

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- (d) Behaviour Support 4 Kids establishes systems to provide positive behaviour support to its Clients and reduce and eliminate the use of restrictive practices.
- 3.2 Each Client accesses behaviour support that is appropriate to their needs which incorporates evidence-informed practice and complies with relevant legislation and policy frameworks
 - (a) Behaviour Support 4 Kids is committed to providing each Client with access to behaviour support that is appropriate to the Client's needs, incorporates evidence-informed practice and complies with the Legislation.
 - (b) Behaviour Support 4 Kids's BSPs provide behaviour support in accordance with the Legislation.
 - (c) All Behaviour Support 4 Kids's BSPs are registered as behaviour support practitioners with the NDIS Commission and considered suitable by the NDIS Commission to deliver specialised positive behaviour support as an NDIS behaviour support practitioner, including assessments and development of behaviour support plans. The NDIS Commission determines the appropriate level for each of Behaviour Support 4 Kids's BSPs depending on their qualifications, experience and knowledge of positive behaviour support and restrictive practices. There are four levels of behaviour support practitioners:
 - (1) **Core**: This level describes the expectations of an entry-level behaviour support practitioner. The core practitioner is expected to:
 - (A) recall, understand and apply concepts relating to disability and positive behaviour support in general circumstances;
 - (B) have a core understanding of other models of practice which are complementary to positive behaviour support (e.g., environmental enrichment, person-centred active support);
 - (C) access and actively participate in supervision and supervised practice (a core practitioner works under the supervision of a practitioner rated as proficient or above).

Note: Independently recommending restrictive practices is outside of the scope of a core practitioner and must be done under supervision (see the PBS Capability Framework).

- (2) **Proficient**: In addition to meeting the core capabilities, a proficient practitioner is expected to:
 - (A) analyse and evaluate information;
 - (B) evaluate the quality of behaviour support plans;
 - (C) constructively promote positive behaviour support across the organisation;
 - (D) access and actively participate in supervision to build on behaviour support knowledge and skills (from an advanced or specialist practitioner);
 - (E) provide and participate in peer supervision with another proficient practitioner (if relevant to their supervision schedule);
 - (F) supervise a core practitioner (if the proficient practitioner has the skills and knowledge base to do so).

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- (3) **Advanced**: An advanced practitioner has advanced skills across all levels of the PBS Capability Framework. An advanced practitioner is expected to:
 - (A) synthesise and integrate information from a range of sources;
 - (B) demonstrate high-level critical thinking and analytical skills to make effective decisions in complex situations;
 - (C) demonstrate high-level knowledge of and skills in areas covered by the PBS Capability Framework and in fields that complement the positive behaviour support approach;
 - (D) shape strategic thinking in positive behaviour support;
 - (E) achieve results in system change that enhances the rights of persons with disability;
 - (F) provide practice leadership across settings and interactions with stakeholders;
 - (G) use knowledge and practical skills gained through further study and/or extensive practical experience to provide specialist behaviour support as part of an interdisciplinary team working in complex contexts;
 - (H) access and participate in supervision as the supervisee (including peer supervision with another advanced practitioner);
 - (I) supervise other practitioners at all levels;
 - (J) have the skills to perform in a managerial or practice leadership position.
- (4) **Specialist**: A specialist practitioner is recognised for their area of specialisation in or relevant to positive behaviour support, in addition to a level of proficiency. Areas of specialisation may include, but are not limited to:
 - (A) a practice speciality (e.g., forensic, trauma-informed practice, augmentative and alternative communication);
 - (B) dual diagnosis (e.g., intellectual disability and mental health);
 - (C) a specific population or cultural group;
 - (D) a specific age group or transition point.

In addition to their area of specialisation, a specialist practitioner is expected to:

- (E) have the skills and ability to provide supervision and support to other behaviour support practitioners in their area of expertise;
- (F) access and participate in supervision as the supervisee (including peer supervision with another specialist practitioner).
- (d) Behaviour Support 4 Kids's Primary BSP has been assessed as provisionally suitable by the NDIS to be a BSP and has previously been assessed against the PSB Capability Framework as having a capability level of "Advanced".

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- (e) Each of Behaviour Support 4 Kids's BSPs is required to keep up to date with the latest evidence-informed practice and approaches to behaviour support, including positive behaviour support. This is done by regularly undertaking CPD and engaging in supervision from Behaviour Support 4 Kids's Primary BSP. Behaviour Support 4 Kids's Primary BSP continues to undertake CPD and supervision from third parties.
- (f) Workers involved in implementing Client behaviour support plans are competent, knowledgeable and experienced in evidence-informed practice and approaches to behaviour support, including positive behaviour support.
- (g) Behaviour Support 4 Kids's Implementing Behaviour Support Plans Policy ensures that behavioural supports are delivered in a person centred manner where the Client's human and legal rights are respected.
- (h) Behaviour Support 4 Kids endeavours to implement behaviour support plans in the specific contexts that have been assessed by the BSP and using the specific strategies that are set out in the behaviour support plan. Behaviour Support 4 Kids endeavours to understand potential barriers to implementation and work with BSPs to develop strategies to address these barriers.
- (i) Behaviour Support 4 Kids endeavours to work with BSPs to ensure that Behaviour Support 4 Kids's knowledge and experiences with the Client inform the behaviour support plan. Behaviour Support 4 Kids is proactive in looking for opportunities to provide feedback on the implementation of behaviour support plans to BSPs as well as the Client and their support network. Behaviour Support 4 Kids endeavours to implement (and advocate for the implementation of) the least restrictive practice for the Client and to reduce and eliminate the need for the use and authorisation of restrictive practices in accordance with evidence-informed practice.
- (j) All behaviour support plans that include restrictive practices are required to be written with the aim of reducing and eliminating the need for the restrictive practices. This is done by conducting a functional behaviour assessment, developing strategies to prevent behaviour as well as teaching new skills to replace any challenging behaviour.
- 3.3 Each Client is only subject to a restrictive practice that meets any state and territory authorisation (however described) requirements and the relevant requirements and safeguards outlined in Commonwealth legislation and policy
 - (a) Behaviour Support 4 Kids is committed to ensuring each Client is only subject to a restrictive practice that meets any state and territory authorisation (however described) requirements and the relevant requirements and safeguards outlined in the Legislation.
 - (b) Behaviour Support 4 Kids's BSP's have the knowledge and an implementable understanding of RRPs as described in the Legislation including relevant processes for obtaining authorisations for the use of RRPs under the Legislation.
 - (c) Behaviour Support 4 Kids's BSPs understand the different types of RRPs and the relevant person or authority which can authorise the use of an RRP and related evidentiary requirements.
 - (d) Each of Behaviour Support 4 Kids's BSPs is required to keep up to date with the latest evidence-based strategies including RRPs and associated risks. This is done by regularly undertaking CPD and engaging in supervision from Behaviour Support 4 Kids's Primary BSP. Behaviour Support 4 Kids's Primary BSP continues to undertake CPD and supervision from third parties.

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- (e) Behaviour Support 4 Kids's BSPs understand that the use of RRPs should be avoided and alternatives promoted.
- (f) Behaviour Support 4 Kids's BSPs engage with and collaborate with all relevant stakeholders, including the Client and with the consent of the Client, the implementers. Discussions are focussed on the need for RRPs, associated risks and promoting alternatives. All parties are involved in discussing and developing behaviour support strategies that are proportionate to the risk of harm to the Client or others.
- (g) Behaviour Support 4 Kids's BSPs may encounter existing RRPs being used or may recommend the use of a time limited RRP with fade out strategies as an option of last resort. Inclusion of RRPs in a plan at Behaviour Support 4 Kids only occurs with the approval of and under the direct supervision of a BSP with capability of proficiency or above. Subject to receiving such approval, the BSP would:
 - (1) gain the consent of the Client, guardian and authorisations as required by the Legislation;
 - (2) work with the Client and their support network to develop a positive behaviour support plan and provide support in implementation;
 - (3) provide a statement of intent to use the RRPs and lodge a behaviour support plan with RRPs with the NDIS Commission and facilitate obtaining authorisations.
- (h) Behaviour Support 4 Kids ensures that relevant authorisations are obtained from the Authorised Program Officer and/or the Client and guardian for the implementation of the RRPs set out in a behaviour support plan. Behaviour Support 4 Kids works with the BSP to ensure that authorisations are obtained and required evidence is submitted.
- (i) Behaviour Support 4 Kids's BSPs only use restrictive practices in accordance with the terms of a behaviour support plan. Behaviour Support 4 Kids implements behaviour support plans in accordance with evidence-informed practice and in a manner which complies with the Legislation.
- (j) Behaviour Support 4 Kids accurately records and reports the use of an RRP in accordance with the Legislation and maintains a RRP use register for each Client in their Client information file.
- (k) Workers are required to maintain a record of the use of RRPs and educate Clients and other stakeholders in relation to associated risks.
- (I) Behaviour Support 4 Kids is committed to ensuring each Worker implementing the Client's behaviour support plans has knowledge of RRPs as described in the Legislation including relevant processes for obtaining authorisation for the use of RRPs under the Legislation.
- (m) Behaviour Support 4 Kids works with BSPs to ensure that Behaviour Support 4 Kids's knowledge and experiences with the Client informs their behaviour support plan. Behaviour Support 4 Kids is proactive in looking for opportunities to provide feedback on the implementation of plans to BSPs as well as to the Client and their support network. Behaviour Support 4 Kids shares relevant records and data with BSPs in order to collaboratively evaluate the effectiveness of strategies with a view to reducing and eliminating restrictive practices over time.

3.4 Each Client's quality of life is maintained and improved by tailored, evidence-informed behaviour support plans that are responsive to their needs

(a) Behaviour Support 4 Kids is committed to ensuring that each Client's quality of life is maintained and improved by tailored, evidence-informed behaviour support plans that are responsive to their needs.

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- (b) Behaviour Support 4 Kids conducts a respectful and Client focused functional assessment. In conducting an assessment and developing a behaviour support plan, Behaviour Support 4 Kids collaborates with appropriate stakeholders including, the Client and with the Client's consent, the implementers and other service providers. Discussions are focussed on identifying the Client's unmet needs, the function and purpose of Client behaviours and identifying proactive strategies. All parties are involved in discussing and developing a behaviour support plan which is consistent with evidence-informed practice, including proactive strategies and strategies and protocols to integrate the behaviour support with any other supports or services that the Client receives. Proposed behaviour support plans are given to the other stakeholders for review and comment and in the case of other service providers, for acceptance.
- (c) Behaviour Support 4 Kids works with BSPs and accepts responsibility for implementation of behaviour support plans (or aspects thereof).
- (d) Behaviour Support 4 Kids provides all behaviour support plans containing a RRP to the Commissioner in the time and manner required under the Legislation.

3.5 Each Client's behaviour support plan is implemented effectively to meet the Client's behaviour support needs

- (a) Behaviour Support 4 Kids is committed to ensuring that each Client's behaviour support plan is implemented effectively to meet the Client's behaviour support needs.
- (b) Behaviour Support 4 Kids:
 - (1) ensures that assistance is given to the implementers to ensure that they understand the Legislation requirements for obtaining authorisation for the use of the RRPs included in the behaviour support plan, including any conditions around the use of restrictive practices;
 - takes reasonable measures to ensure that the Client, and with the consent of the Client, the implementers understand the rationale underpinning the behaviour support plan;
 - ensures that instructions and guidance are developed to support the Client and the implementers to effectively implement the behaviour support plan;
 - ensures that implementers are made aware of the reporting requirements prescribed in the Legislation;
 - (5) ensures that individually tailored training, coaching, mentoring and instructions is/are provided to the implementers (where applicable) which covers the strategies required to implement a Client's behaviour support plan, including positive behaviour support strategies;
 - ensures that behaviour support plans are developed for each Client, in collaboration with the implementers;
 - (7) ensures that where the BSP recommends that Workers implementing a behaviour support plan receive training on the safe use of an RRP included in the behaviour support plan, oversight is retained to ensure the training addresses the strategies contained in the Client's behaviour support plan;
 - (8) ensures that ongoing support and advice is offered to implementers to address barriers to implementation.

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- 3.6 Each Client has a current behaviour support plan that reflects their needs, improves their quality of life and supports their progress towards positive change. The plan progresses towards the reduction and elimination of restrictive practices, where these are in place for the Client
 - (a) Behaviour Support 4 Kids is committed to ensuring that each Client has a current behaviour support plan that reflects their needs, improves their quality of life and supports their progress towards positive change.
 - (b) Behaviour Support 4 Kids regularly monitors and reviews the implemented behaviour support plans ensuring that there is progress towards the reduction and elimination of restrictive practices if used and to ensure any barriers to implementation are addressed.
 - (c) Consideration is given to whether the Client's needs, situation or progress create a need for more frequent reviews, including due to significant behaviour changes, or if a new provider is required to implement the behaviour support plan or if the use of any RRPs is not being reduced.
 - (d) Behaviour Support 4 Kids ensures that the progress and effectiveness of implemented strategies are evaluated through regular engagement with the Client, and by reviewing, recording and monitoring data collected by the implementers.
 - (e) Behaviour Support 4 Kids ensures that modifications to the strategies contained in each Client's behaviour support plan are made based on engagement with the Client and the results of the information and data analysis and that, with the Client's consent, these changes are communicated and training is provided (where required) to the implementers on the modified strategies.
 - (f) Behaviour Support 4 Kids continually promotes strategies that could reduce the need for restrictive practices if still being used. Behaviour Support 4 Kids will make sure that the Commissioner is notified and work is undertaken with the Commissioner to address such situations:
 - (1) where effective engagement with the implementers is not possible for any reason; or
 - (2) if supports and services are not being implemented in accordance with the behaviour support plan.
 - (g) Behaviour Support 4 Kids ensures that the Commissioner is notified of changes in each Client's behaviour support plan in a manner and time frame prescribed in the Legislation.

3.7 Each Client that is subject to an emergency or unauthorised use of a restrictive practice has the use of that practice reported and reviewed

- (a) Behaviour Support 4 Kids ensures that each of its Clients that is subject to an emergency or unauthorised use of a restrictive practice is referred for assessment to a doctor or medical practitioner immediately including by taking such reasonable steps as set out this Policy.
- (b) Behaviour Support 4 Kids is committed to cooperating and collaborating with other mainstream service providers, such as police and/or other emergency services, mental health and emergency department, treating medical practitioners and other allied health clinicians, in responding to an emergency or unauthorised use of a restrictive practice.
- (c) Behaviour Support 4 Kids acknowledges that the emergency or unauthorised use of a restrictive practice is also a reportable incident, which must be reported in accordance with the Legislation.

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- (d) Behaviour Support 4 Kids ensures that contributions are made to the review of strategies in a Client's behaviour support plan, with the primary focus of reducing or eliminating restrictive practice based on observed progress or positive changes in the Client's circumstances.
- (e) Behaviour Support 4 Kids ensures that the Client, and with the Client's consent, the implementers are included in the review of incidents and supports the engagement of a specialist BSP to develop or review the Client's behaviour support plan as a result of the incident with corrective action taken with respect to the plan if appropriate.
- (f) Behaviour Support 4 Kids ensures relevant authorisation processes in SA are initiated as required.

3.8 Each Client with an immediate need for a behaviour support plan receives an interim behaviour support plan which minimises the risk to the Client and others

- (a) Behaviour Support 4 Kids collaborates with mainstream service providers and its BSPs to ensure that each Client with an immediate need for a behaviour support plan receives an interim behaviour support plan which minimises the risk to the Client and others.
- (b) Behaviour Support 4 Kids ensures that when a Client develops an immediate need for behaviour support, Behaviour Support 4 Kids assists in developing the interim behaviour support plan that appropriately manages risks to the Client and others as identified by Behaviour Support 4 Kids and the Client.
- (c) Behaviour Support 4 Kids ensures that advice and guidance is given to the implementers on the effective implementation of the interim behaviour support plan.

4. Procedure

This Policy is supported by the following Procedures. The Procedures work together dynamically and are relevant to all parts of Behaviour Support 4 Kids. The Procedures are not ordered in priority and all are important to achieving the aims of this Policy.

Proc	Procedure				
4.1	1.1 Each Client accesses behaviour support that is appropriate to their needs which incorporates evidence-informed practice and complies with relevant legislation and policy frameworks				
	(a)	Ensure Behaviour Support 4 Kids's BSPs are registered as behaviour support practitioners with the NDIS Commission.			
	(b)	Ensure Behaviour Support 4 Kids's Primary BSP has been assessed as provisionally suitable by the NDIS Commission to be a BSP and has been assessed against the PSB Capability Framework as having a capability level of "Advanced".			

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(q)		e strategies that remove conditions likely to promote behaviours of including:	Proficient or above BSPs
(p)	Include	e a continuous cycle of monitoring.	
(0)		op data collection systems that are objective, understandable and by the key people.	
(n)	Include	e an escalation mechanism (under supervision as required).	
(m)		a behaviour support plan so it is easy to understand by those nenting it.	
(I)	Develo	op necessary adaptations to a person's environment and routine.	
(k)		op strategies that aim to increase the person's skills, including unication, and the interaction skills of communication partners.	
(j)	Develo	pp proactive strategies to improve the person's quality of life.	
(i)	Collabo	orate and consult as required to develop strategies.	
(h)	Identify	y barriers to implementation.	
(g)	Identify	y those responsible for implementing a behaviour support plan.	
(f)	Use da plan.	ata to inform a theoretical and ethically sound behaviour support	Core BSPs
	(1)	understand the importance of risk management.	
(e)	Ensure	e that Behaviour Support 4 Kids's proficient or above BSPs:	
	(4)	understand that a behaviour support plan must have both proactive and reactive components.	
	(3)	understand that a behaviour support plan must be written so it suits its intended audience;	
	(2)	identify who will read and use a behaviour support plan;	
	(1)	understand that a behaviour support plan is based on knowledge from the functional assessment;	
(d)	Ensure	e that Behaviour Support 4 Kids's core BSPs:	
	(2)	includes those specific rights the Client is entitled to as a client of Behaviour Support 4 Kids including the rights set out in clause 3.1(b) of this Policy.	
	(1)	confirms Behaviour Support 4 Kids's commitment to best practice behaviour support for its Clients and reducing and eliminating the use of restrictive practices; and	
(c)		e each Client and BSPs are provided with a copy of this Policy and gislation together with a statement which:	

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environmental modifications; (1) (2) active engagement through structured and meaningful daily activities. Include strategies for replacement behaviours. (r) (s) Include preventative strategies such as relaxation, distraction and diversion. Include reactive strategies when behaviours are not preventable. (t) Minimise or eliminate the use of restrictive practices. (u) Develop a behaviour support plan according to the literacy and (v) communication needs of the target audience. Develop a behaviour support plan that is compatible with the ability and (w) resources of the implementers. Develop a behaviour support plan that is supported by data that measures (x) how accurately it is implemented. (y) Clearly articulate responsibilities and timeframes. 4.2 Each Client is only subject to a restrictive practice that meets any state and territory authorisation (however described) requirements and the relevant requirements and safeguards outlined in Commonwealth legislation and policy Key Ensure that Behaviour Support 4 Kids's core BSPs: (a) Management Personnel (1) understand that the use of a restrictive practice must be authorised according to the relevant state or territory laws and policies; understand that regulated restrictive practices include seclusion. (2) and chemical, mechanical, physical and environment restraints; (3) understand that a restrictive practice can represent serious human rights violations; understand the national framework for reducing and eliminating (4) the use of restrictive practices in the disability service sector; understand that a restrictive practice is an option of last resort, (5) occurs in limited circumstances, should be used for the shortest period of time and is the least restrictive option available; (6) understand that a restrictive practice must only be used in accordance with a behaviour support plan; understand relevant state or territory laws and policies regarding (7) authorisation and consent to the use of regulated restricted practices;

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		(8)	understand that some restrictive practices are prohibited in some states and territories;	
		(9)	understand that the use of a restrictive practice can only be in response to risk of harm to the person or others;	
		(10)	understand that a behaviour support plan that includes restrictive practices, it must be lodged with the NDIS commission;	
		(11)	understand the zero tolerance framework (national disability services, 2018) and associated resources.	
	(b)	Ensure	that Behaviour Support 4 Kids's proficient or above BSPs:	
		(1)	Understand that restrictive practices must be in proportion to the potential consequences of the risk of harm.	
	(c)		t with the person and/or obtain consent (as required by relevant r territory laws and policies).	Core BSPs
	(d)		be restrictive practices under the direct supervision of a person at a oner level of proficient or above.	
	(e)		with the person, their informal support and service provider to a behaviour support plan that is based on a functional behaviour ment.	Proficient or above BSPs
	(f)		e a statement of intent to include a restrictive practice in a our support plan, where required, in accordance with the tion.	
	(g)	outcom	a behaviour support plan contains strategies that are proactive, nes-focused, person-centred, and that address the person's needs haviours of concern.	
	(h)		a staged plan of fading strategies to reduce or eliminate the use of ive practices with the person over time.	
	(i)	-	a behaviour support plan with restrictive practices with the NDIS ssion for practices to be monitored.	
	(j)	Superv	ise a core BSP.	
	(k)		nent strategies that can be removed through shaping, fading and nechanisms.	
4.3			quality of life is maintained and improved by tailored, med behaviour support plans that are responsive to their	
	(a)	Ensure	that Behaviour Support 4 Kids's core BSPs:	Key Management
		(1)	understand the values, policy and legislative context in which positive behaviour support occurs;	Personnel
		(2)	understand that behaviours happen for a reason and serve a purpose;	

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(c)			on at the centre of the functional assessment and establish o them there.	Core BSPs
	(8)	behavi practic		
	(7)	unders	tand the impact of monetary and physical resources;	
	(6)		stand the cultural context to determine who to involve and set appropriate mechanism for assessment;	
	(5)	collecti	tand the strengths and weaknesses of various data on methods and importance of selecting the appropriate d for the behaviour in question;	
	(4)	be con	versant with a range of functional assessment tools;	
	(3)		tand the impact of behaviours on the person and their t networks;	
	(2)	know tl	he importance of assessments being regularly reviewed;	
	(1)		ise assessment is a flexible and continuing process – that trigger and maintain behaviour may change over time;	
(b)	Ensure	that Be	haviour Support 4 Kids's proficient or above BSPs:	
	(9)	persor	stand life-course events (that is, the connection between a a's history and events during their life that may have had an ton them).	
	(8)	unders	stand the importance of data-driven decision-making;	
	(7)	assess	stand that the complexity and duration of the functional sment is dependent on the severity, impact, frequency and on of the behaviour;	
		(D)	value the role of the service, staff, family members or carers in developing or maintaining behaviours;	
		(C)	current use of restrictive practices;	
		(B)	quality of life;	
		(A)	current behaviour(s) of concern (including frequency and intensity);	
	(6)	unders	stand the importance of obtaining baseline measures of:	
	(5)	unders quality		
	(4)		stand the difference between what the behaviour looks like function;	
	(3)	know t		

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(d)	Conduct a respectful and responsive assessment that considers the diversity of a person's culture.	
(e)	Involve the Client, their family members, carers, guardian and other relevant people in the assessment.	
(f)	Use communication and active listening skills to develop rapport with the person and their team.	
(g)	Adapt assessment terminology and systems to the needs of the target audience.	
(h)	Assess the person's abilities and needs.	
(i)	Use observation skills.	
(j)	Use effective systems to collect data from a variety of sources.	
(k)	Identify antecedents (setting events and triggers) to behaviours of concern and factors that support quality of life.	
(I)	Identify consequences that maintain a behaviour.	
(m)	Identify and describe the behaviour in a way that is observable and measurable.	
(n)	Analyse the relationship between the person and their environment.	
(0)	Produce an assessment report.	
(p)	Seek professional support as required.	
(q)	Establish a developmental history.	Proficient or above BSPs
(r)	Analyse any current or previous interventions including reactive strategies.	above BSFS
(s)	Consider physical or mental health problems, including the effect of medications and sleep.	
(t)	Analyse other considerations such as a history of trauma, sensory processing, social and interpersonal history.	
(u)	Analyse the relationship between the person and their environment.	
(v)	Identify enablers and barriers to quality of life, including understanding the protective value of friendships and family, and their contribution to safety.	
(w)	Identify barriers to intervention.	
(x)	Lead an interdisciplinary assessment of complex behaviour.	
(y)	Construct a model of understanding that explains the functions of behaviours.	
(z)	Refer on when the requirements fall outside of the scope of behaviour support.	

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	(aa)	Collaborate with non-disability specific or mainstream services as required (including medical professionals).			
	(bb)	Assess	Assess and regularly review areas of risk to the person or others.		
	(cc)	Identify	Identify the use of restrictive practices.		
	(dd) Conduct a comprehensive functional assessment and produce an assessment report that includes recommended actions and strategies.				
	(ee)	Undert behavi	ake an assessment review if there is a significant change in our.		
4.4			behaviour support plan is implemented effectively to meet the iour support needs		
	(a)	Ensure	that Behaviour Support 4 Kids's core BSPs:	Key Management	
		(1)	understand the importance of individualised implementation of a behaviour support plan;	Personnel	
		(2)	understand how implementation approaches can vary for a person across different stages of life;		
		(3)	consider the people to include in implementation;		
		(4)	understand that functioning and resilient teams are likely to increase the consistency of implementation.		
	(b)	Ensure	that Behaviour Support 4 Kids's proficient or above BSPs:		
		(1)	understand the critical people to include in implementation across diverse cultural contexts;		
		(2)	know different methods of giving feedback;		
		(3)	be aware of complex team dynamics and know strategies to manage these effectively;		
		(4)	understand the importance of incident debriefing practice.		
	(c)		e individually tailored education and training to those who are nenting a behaviour support plan.	Core BSPs	
	(d)		er the capacity of the person at the centre of a behaviour support and their role in implementation.		
	(e)		rt implementers to incorporate strategies into daily support plans ner relevant support documents.		
	(f)	Suppor	rt implementation across different environments and contexts.		
	(g)	Provide alterna	e feedback to implementers on implementation and model tives.		
	(h)		rt those implementing a behaviour support plan to use the mended data collection systems.		

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	(i)	Promo	te least restrictive practices.	
	(j)	Provide	e education and training to an interdisciplinary team	Proficient or above BSPs
	(k)	Addres	ss barriers to implementation of a behaviour support plan	above bors
	(1)		y the resilience, capacity and sustainability of implementers and appropriate plan adjustments to take these into consideration	
	(m)	Provide	e implementers with information on ethical reactive strategies	
	(n)		e implementers with information on risks and consequences of impliance with implementation.	
	(0)	Train ir plans.	mplementers in escalation mechanism and emergency response	
	(p)	-	y appropriate methods of feedback for those implementing a our support plan.	
	(q)		ate team building to enable successful implementation of a our support plan.	
	(r)	Adjust	a behaviour support plan as required.	
	(s)	Identify	y incident debriefing supports available to implementers.	
	(t)		e training on facilitating critical incident debriefing to appropriate ers of the implementing team if required.	
4.5	improv chang	ves thei e. The p	as a current behaviour support plan that reflects their needs, r quality of life and supports their progress towards positive plan progresses towards the reduction and elimination of ctices, where these are in place for the Client	Key
	(a)	Ensure	e that Behaviour Support 4 Kids's core BSPs:	Management Personnel
		(1)	understand the rationale of a behaviour support plan and its uses;	
		(2)	understand the importance of continuous review and methods to conduct reviews;	
		(3)	maintain professional learning to keep abreast of current knowledge of best practice;	
		(4)	know the indicators to include and how and when to check the effectiveness of a behaviour support plan.	
	(b)	Ensure	e that Behaviour Support 4 Kids's proficient or above BSPs:	
		(1)	possess a depth of understanding about systematic monitoring and evaluation;	
		(2)	identify the reasoning behind what is and what is not working in a behaviour support plan.	
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	(c)	Reassess the situation (that is, any changes to context where behaviours of concern occur, or the Client's environments).	Core BSPs				
	(d)	Review adherence to implementation (that is, are those supporting the Client implementing the strategies in the way they were trained?).					
	(e) Use data collected by implementers to monitor the implementation of a behaviour support plan (compared to baseline) in a whole-of-life context, and provide feedback to implementers.						
	(f)	Reflect on external factors that may impact on the efficacy of positive behaviour support.					
	(g)	Build and utilise collaborative partnerships to evaluate a behaviour support plan.					
	(h)	Coordinate a formal review meeting.					
	(i)	Inform changes to a behaviour support plan as required.					
	(j)	Track progress of a behaviour support plan using the indicators of effectiveness.					
	(k)	Have robust and effective ways to measure and evaluate the outcomes of agreed goals.	Proficient or above BSPs				
	(I)	Review the resilience, capacity and sustainability of those implementing a behaviour support plan .					
	(m)	Coordinate team participation in review if appropriate.					
	(n)	Identify sources of information to verify a behaviour support plan's effectiveness within the cultural context.					
	(0)	Use data to formulate ideas about the reason(s) behind a behaviour support plan's effectiveness.					
	(p)	Use an evidence-based tool to evaluate the quality of a behaviour support plan, such as the BIP-QEII.					
	(p)	Apply and interpret measures that capture an increase in behaviours or use of restrictive practice, or decrease in quality of life.					
	(r)	Implement a range of strategies that address any efficacy limitations of implementation.					
4.6		Client that is subject to an emergency or unauthorised use of a tive practice has the use of that practice reported and reviewed	Key Management Personnel				
	(a)	Ensure each Client that is subject to an emergency or unauthorised use of a restrictive practice has the use of that practice reported in accordance with the Legislation and reviewed.					
	(b)	Ensure that support is given to the implementers of the Client's support plan in responding to a reportable incident involving the use of restrictive practices.					
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	(c)		that the Client, and with the Client's consent, the implementers are and in the review and assessment of a reportable incident.	
4.7		rim beh	th an immediate need for a behaviour support plan receives aviour support plan which minimises the risk to the Client and	
	others			Key
	(a)	Ensure	that Behaviour Support 4 Kids's core BSPs:	Management Personnel
		(1)	understand that behaviours may occur that cause immediate risk of harm to the Client or others;	
		(2)	know that high-risk behaviours need to be managed safely and effectively using the least restrictive options;	
		(3)	know that high-risk situations and environments can be identified (including antecedents, triggers);	
		(4)	know how and why interim responses will be unique to the person;	
		(5)	are aware that interim risk management may include restrictive practices;	
		(6)	understand the consequences of unauthorised use of restrictive practices;	
		(7)	understand legal and ethical expectations.	
	(b)	Ensure	that Behaviour Support 4 Kids's proficient or above BSPs:	
		(1)	know a range of de-escalation techniques;	
		(2)	are aware of the implications of using restrictive practices as a response;	
		(3)	have a working knowledge of authorisation and reporting requirements for restrictive practices relevant to state or territory laws and policies.	
	(c)		ent displays behaviour which may cause immediate risk of harm to ent or others, refer the Client to one of Behaviour Support 4 Kids's SPs.	All Workers
	(d)		and document appropriate authorisation and consents where d by state or territory laws and policies.	Core BSPs
	(e)	Evalua	te the risk posed by the behaviour to the Client and others.	
	(f)	Consul person	t with the Client, their family, carers, guardian or other relevant .	
	(g)		unicate clearly and effectively with relevant parties to gather ation and provide direction.	
	(h)	Collabo	orate with team members.	

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	(i)	Record	and report accurately.	
	(j)	Identify	any existing data that might provide insight into the situation.	
	(k)		e guidance on protective actions related to environment, setting and stances.	
	(1)		those implementing a behaviour support plan with the assistance pervisor.	
	(m)	Seek p	professional support from a supervisor.	
	(n)	Develo	p an individualised immediate response plan.	Proficient or
	(0)		range of strategies that can be safely adjusted once full ment and planning concludes.	above BSPs
	(p)	Docum	nent and implement ethical reactive strategies.	
	(q)	Seek p	professional support as required.	
	(r)		collaboratively with the relevant stakeholders (including emergency es when required).	
	(s)		nose implementing a behaviour support plan in its effective nentation.	
4.8	Workers to commit to Policy		All Workers	
	(a)		rkers are provided with a copy of this Policy in their orientation and on materials.	
	(b)	agreen	their employment, contractor agreement or binding letter nent, each Worker at Behaviour Support 4 Kids is required to take sibility for ensuring:	
		(1)	full understanding of the commitments outlined in this Policy as well as procedures and other strategies designed to ensure that the principles of this Policy are upheld; and	
		(2)	ensuring that the principles and procedures and other strategies within this Policy are applied in their daily work.	
4.9	Train V	Vorkers		Principal and
	(a)	Trainin	g and supporting Workers to understand and apply the Legislation.	Key Management Personnel
	(b)	Legisla	g staff to recognise the importance of complying with the ation and committing to the reduction and elimination of RRPs in this Policy and Procedures.	i ersonner
4.10	Compl	ementa	ry policy adoption	Principal and
	Adopt a Behavion	Key Management Personnel		

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2. General

2.1 Relevant Legislation, Regulations, Rules and Guidelines

Legislation, Rules, Guidelines and Policies apply to this Policy and supporting documentation as set out in the Legislation Register.

2.2 Inconsistency

If and to the extent that the terms of this Policy are or would be inconsistent with the requirements of any applicable law, this Policy is deemed to be amended but only to the extent required to comply with the applicable law.

2.3 Policy Details

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