# Definitions of regulated restrictive practices

This information sheet provides guidance as to the definitions of regulated restrictive practices and is part of a series of information sheets that have been developed to help everyone understand the Authorisation of Restrictive Practices in Funded Disability Services Policy (the Policy) that applies in Western Australia from 1 December 2020.

For further detailed information please refer to the <u>authorisation of restrictive practices</u> website.

## Regulated restrictive practices

A restrictive practice is defined as any practice or intervention that has the effect of restricting the rights or freedom of movement of a person with disability, with the primary purpose of protecting the person or others from harm. There are some situations where restrictive practices may be used, however the decision to use restrictive practices needs careful clinical and ethical consideration.

It is important to note that identification of restrictive practice is often not straightforward and can be very nuanced and context specific. It is important that wide consultation occurs, and includes people with expertise in behaviour support, where appropriate, to consider whether a practice may be defined as restrictive.

#### Seclusion

Seclusion is defined as the sole confinement of a person with disability in a room or physical space at any hour of the day or night where voluntary exit is prevented, implied, or not facilitated.

Some examples of seclusion may include:

person cannot voluntarily exit

a person being told to stay in their bedroom and being told they cannot come out until they are calm. This is implied seclusion as the person believes they cannot leave until they are calm.

**Definitions of regulated restrictive practices** 



See also rinciples guiding the use of regulated restrictive practices (listed on the restrictive practices resources

) for further information and guidance.

# **Out of scope**

**Prohibited practices** 



Substantial evidence is required to conclude that is non-intentional.

A minimum standard is an allied health or medical assessment indicating that the behaviour does not serve a function for the person that is specific to the behaviour that causes the risk.

Where there is doubt as to whether a behaviour is non-intentional, it must be viewed as intentional and any restrictions that are imposed to safeguard the person and/or others need to be regarded under the Policy as a regulated restrictive practice.

### **Court orders**

Where a court order specifically indicates a practice or limitation be in place, that would otherwise be considered a regulated restrictive practice, it is considered outside of the scope of the Policy. For example, a community-based order stipulating a curfew.

If a restrictive practice is implemented that goes beyond the bounds of a court order, it would be considered a regulated restrictive practice. For example, installation of a locked gate to which the person does not have a key in addition to a community-based order specifying a curfew. Use of the locked gate to implement the curfew of the court order is considered a regulated restrictive practice as this is beyond the stipulation of the court order.

## **Contact information**

For enquiries about the Policy, please contact the Department of Communities authorisation of restrictive practices team:

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