

Good Afternoon,

I am writing to provide feedback on the Draft Disability Inclusion Bill 2023.

The feedback has been collated across a state-wide team of behaviour support practitioners and therefore is reflective of how the draft bill would apply to works conducted in the behaviour support space.

I would initially like to emphasise positive feedback on the bill for greater responsibility for recognition and fade out of restrictive practices.

Feedback and questions related to the content of the draft bill are divided into two sections, below; for relation to the intersect between behaviour support and restrictive practices, and definitions included in the preliminary.

Questions related to the intersect between behaviour support and restrictive practices

- Where a restrictive practice applies to an individual and a change in circumstances occurs, the behaviour support plan is then reviewed and updated accordingly to reflect the changes. In the context of restrictive practice approval – what is the requirement of a behaviour support practitioner and the individual's disability service provider/s to seek re-approval of a practice given a change in circumstances? With consideration that the draft bill proposes the approval applies to the person, rather than the provider, and approval is carried over even in the event of a change in provider.
- To prepare for changes in the recognition of chemical restraint, can information be provided on chemical restraint approval prior to the instatement of the bill? This would allow behaviour support practitioners to prepare and undertake any actions required within reasonable timeframes.
- What evidence will be deemed sufficient to denote the purpose of a medication and/or chemical restraint?
- Does the draft bill consider evidenced-based diagnosis in the determination of chemical restraint, inclusive of 'on label' versus 'off label' prescription? For example, the prescription of Risperidone for the purpose of Autism Spectrum Disorder.
- What are the expectations of a behaviour support practitioner and a disability services provider regarding the changes in restrictive practice definition for the abolition of 'personal restriction' (as per the Disability Services Act 2011)? Would the provider be required to re-apply for approval of the practice/s under the change in definitions? Is this expected as the practice is due for review with a current approval or immediately upon instatement of the bill? Are the changes required to be included within the individual's behaviour support plan where the method/endorsement of the practice itself remains unchanged?

Questions related to definitions proposed in the draft bill

- The draft bill defines a 'behaviour support plan' as '*...including proactive strategies to build on the person's strengths and increase their life skills*'. Is it correct that this definition may be interpreted as a 'comprehensive behaviour support plan', and distinct to an 'interim behaviour support plan'. If so, is it the expectation of a behaviour support practitioner to develop a comprehensive behaviour support plan only where a restrictive practice has been identified?

- The definition of 'behaviour support practitioner' includes suitable qualification as considered by the Senior Practitioner. Can the criteria for suitable qualification be provided?

Thank you for the opportunity to provide feedback on the draft bill.

Kindly,

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