



Restrictive Practices

Key changes for providers from 1 July 2021

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From 1 July 2021, approved providers have specific responsibilities under the *Aged Care Act 1997* and the *Quality of Care Principles 2014* relating to the use of any restrictive practice for consumers in residential aged care and short-term restorative care in a residential care setting.

Amendments to the *Aged Care Act* and *Quality of Care Principles* have been implemented to minimise the use of restrictive practices, and where a restrictive practice is used, to ensure that it is used or applied in accordance with legislative obligations.

This factsheet provides a summary of the key legislative changes for providers.

Regulatory Bulletin

The Aged Care Quality and Safety Commission (the Commission) has issued a [Regulatory Bulletin](#) which sets out your new responsibilities and provides important information for you and your staff to help you ensure that your care and services accord with the changed requirements.

The [Regulatory Bulletin](#) outlines the requirements that must be met before and during the use of any restrictive practice and the resources to support providers to meet these requirements. It also outlines how the Commission will monitor compliance and manage any identified non-compliance with these requirements, as well as a provider's performance against the Aged Care Quality Standards.

Behaviour Support Plans

The requirements for behaviour support plans will be implemented from 1 September 2021. The later implementation date for behaviour support plans ensures the sector has time to prepare for meeting the new requirements.

Amendment	Legislative reference	Type of change	Summary
Updated terminology from 'restraint' to 'restrictive practice'	<i>Aged Care Act 1997</i>	New definition	<ul style="list-style-type: none"> A restrictive practice is now defined to mean 'any practice or intervention that has the effect of restricting the rights or freedom of movement of a residential care recipient' in alignment with the definition in section 9 of the <i>National Disability Insurance Scheme Act 2013</i>.
Definitions of the types of restrictive practice aligned with disability sector arrangements	Quality of Care Principles 2014	New definitions	<ul style="list-style-type: none"> The Quality of Care Principles define five types of restrictive practices. These are chemical restraint, mechanical restraint, physical restraint, environmental restraint and seclusion.
Replaced definition of 'consumer representative' with 'restrictive practice substitute decision maker'	Quality of Care Principles	New definition	<ul style="list-style-type: none"> Amendments replace the definition of 'consumer representative' with 'restrictive practice substitute decision maker'. A restrictive practice substitute decision maker is a person or body that has the authority under state or territory law to provide consent on behalf of the consumer.
Implementation of compliance notices and civil penalties for providers who breach restrictive practice requirements	<i>Aged Care Act</i>	New requirement	<ul style="list-style-type: none"> Amendments to the <i>Aged Care Act</i> introduce compliance notices and civil penalties in response to a breach of restrictive practice responsibilities. The amendment aligns with the operation of the Serious Incident Response Scheme (SIRS) legislation i.e. the civil penalty applies to the breach of the compliance notice.
Reinforce the rights of aged care consumers in making decisions about their care	<i>Aged Care Act</i>	Strengthening of existing obligations	<ul style="list-style-type: none"> Amendments include the requirement for any use of restrictive practices to be in accordance with the User Rights Principles 2014 and the Charter of Aged Care Rights. Amendments to identify key responsibilities of providers regarding use of restrictive practices in that they must be used as a last resort and consideration and use of alternative strategies must occur prior to any restrictive practice use.

Amendment	Legislative reference	Type of change	Summary
Clarification regarding consent requirements	Quality of Care Principles	Clarification of existing requirements	<ul style="list-style-type: none"> • Amendments clarify that providers must ensure that consent has been obtained in accordance with state and territory requirements and subsequently recorded. • Amendments clarify that aged care consumers must provide consent where possible, or consent must be obtained from someone with authority to provide it.
Requirements on the development and review of behaviour support plans	Quality of Care Principles	Strengthening of existing obligations	<ul style="list-style-type: none"> • Amendments stipulate that the use of restrictive practices must be detailed in a behaviour support plan from 1 September 2021. • A behaviour support plan will be required for: <ul style="list-style-type: none"> • consumers who are or may be subject to use or application of a restrictive practice based on existing health/clinical needs. • consumers who require or are receiving alternative behaviour support interventions. • A behavior support plan forms part of the existing care and services plan. It does not replace it.
Strengthen and clarify requirements in relation to documenting the use of alternative strategies prior to use of restrictive practices	Quality of Care Principles	Clarification of existing obligations	<ul style="list-style-type: none"> • Amendments clarify the requirement that alternative behaviour support strategies must be used or applied before considering any form of restrictive practice. These interventions must be documented in a behaviour support plan (from 1 September 2021), including actions taken leading up to the use of the restrictive practice and any strategies used to prevent the need for the restrictive practice.

Amendment	Legislative reference	Type of change	Summary
Expanded monitoring requirements for consumers who may have restrictive practices used or applied	Quality of Care Principles	Strengthening of existing obligations	<ul style="list-style-type: none"> • Previous legislation stipulated that consumers subject to restraint must be regularly monitored for signs of distress and harm. • Monitoring and review obligations for providers are now clarified in the Quality of Care Principles. • Additional monitoring measures are: <ul style="list-style-type: none"> • the necessity for the restrictive practice • the frequency and type of observation required • the comfort and safety of the consumer through maintaining activities of daily living such as: regular toileting, hydration, nutrition, exercise, skin care, pain relief and social interaction.
Clarification regarding responsibilities of providers and prescribers on obtaining and documenting consent for chemical restraint	Quality of Care Principles	Clarification of existing obligations	<ul style="list-style-type: none"> • The amendments aim to provide greater clarity to providers on the responsibility for prescribing practices and obtaining informed consent. • The requirements have been clarified around the ongoing use of restrictive practices, including that duration, frequency of use and intended outcome must be documented in the behaviour support plan (from 1 September 2021).

Where can I find out more?

The Commission has released a range of further resources to help providers understand their responsibilities around minimising the use of restrictive practices. These can be found on the Commission's website at [Minimising the use of restrictive practices](#).

Additional resources, including information on planned webinars, will be made available through the Commission website, and social media and quality bulletin updates.

If you have any questions, please contact the Commission by email at:
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All information in this publication is correct as of 1 July 2021.



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