

Working with the NIISQ Agency

Process guide for positive behaviour support providers

This document should be considered in conjunction with the NIISQ Provider guidelines, Positive behaviour supports



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1. Introduction

1.1 About NIISQ

The National Injury Insurance Agency, Queensland (NIISQ Agency) was established on 1 July 2016 to administer the National Injury Insurance Scheme, Queensland (NIISQ).

NIISQ is a no-fault scheme which provides eligible people with necessary and reasonable treatment care and support, in some cases for their lifetime.

Anyone who experiences serious personal injuries as a result of a motor vehicle accident in Queensland, on or after 1 July 2016, may be eligible to receive support from NIISQ.

A serious personal injury, as defined in the *National Injury Insurance Scheme (Queensland) Act 2016* (the NIISQ Act) and *National Injury Insurance Scheme (Queensland) Regulation 2016* (the NIISQ Regulation) includes:

- permanent spinal cord injuries
- permanent injury to the brachial plexus
- traumatic brain injuries
- · severe burns
- multiple or high-level limb amputations
- permanent blindness caused by trauma

Under the NIISQ Act, the NIISQ Agency may fund necessary treatment, care and support for eligible participants with the above stated serious personal injuries. For further information regarding the funding of NIISQ supports please visit the NIISQ Agency website.

1.2 About the process guide for positive behaviour support providers

This process guide should be used in conjunction with the <u>NIISQ Positive behaviour support guideline</u>. This can be found on the NIISQ Agency website.

The NIISQ Positive behaviour support guideline provides an overview of NIISQ expectations for providers working with participants who benefit from positive behaviour support and NIISQ's position on restrictive practices. This process guide is intended to compliment the high-level overview for the assessment and delivery of positive behaviour support provided in the NIISQ Positive behaviour support guideline below.

No

No

Yes

No



MyPlanning

Where a participant is receiving positive behaviour supports, there may be a requirement for the NIISQ Agency to undertake further assessments of a participant's needs and amend the participant's MyPlan to ensure they are receiving the correct necessary and reasonable, treatment, care and support.

The NIISQ Agency is notified of a challenging behaviour or a potential restrictive practice.

The NIISQ Agency
engages a behaviour support
needs adviser to advise the
agency on whether a challenging
behaviour is present, and whether
positive behaviour supports are a
treatment, care and support need
for the participant.

Is a PBS provider required?

Outcome of the participant's assessment of needs is communicated to the participant during their MyPlanning.





The **PBS Provider** must confirm that any restrictive practice proposed is within the scope of the legal decision-maker's appointment.

The NIISQ Agency cannot authorise the use of restrictive practices.

Yes

PBS provider completes a PBS plan

Are restrictive practices recommended in the PBS plan?

Yes

The PBS Provider convenes a restrictive practices case conference and ascertains whether informed consent is

Is the PBS plan agreed, including consent for restrictive practices?

provided for strategies which

include restrictive practices.

PBS Plan is implemented by the PBS provider, including monitoring, review and evaluation.



withdrawn

Restrictive practices must not

Contingency planning involving:

- Notifying the participant's support planner so the support planner can consider whether a needs assessment is required.
- NIISQ Agency to consider service providers impacts

Necessary and reasonable positive behaviour supports

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2. The role of a Positive Behaviour Support Provider

As per the NIISQ provider guideline, positive behaviour support, a PBS provider is a service provider who is funded by the NIISQ Agency to provide necessary and reasonable positive behaviour supports in accordance with the guideline.

The role of a PBS provider may include:

- completion of assessment(s) required to develop a positive behaviour support plan (PBS plan)
- development of a PBS Plan (including, where necessary, any recommended restrictive practices)
- oversight, clinical co-ordination and communication of the PBS plan by the PBS practitioner with the participant, substituted decision maker (where applicable), service providers and the NIISQ Agency (for the purpose of assessing a participant's needs)
- training and supervising providers, and informal supports including family members.

3. PBS plans and interim plans

A PBS provider should collaborate and communicate with stakeholders over the course of their assessment and plan development. This includes developing and communicating shared responsibilities such as:

- timeframes for stakeholder meetings and/or training
- · monitoring responsibilities
- timeframe for PBSP and/or review
- plan for troubleshooting (stakeholders expectations for contact).

NIISQ does not require interim or PBS Plans to be on a specific template, however plans should include the recognised essential elements of a Positive Behaviour Support Plan. These include:

- details about the plan, the assessments conducted, people consulted and the plan author
- information about the person including how they are best supported
- a clear and specific description of the challenging behaviour
- the function(s) of the behaviour
- an explanation of why the behaviour is occurring
- strategies to address environmental factors, including the ways the participant can be best supported
- the alternative or functionally equivalent replacement behaviours to the challenging behaviour
- positive/proactive strategies to prevent the behaviour from occurring
- skill development/replacement behaviour strategies
- non-aversive reactive strategies to be implemented when the challenging behaviour occurs
- strategies to support the implementation of the plan
- · plan monitoring and review.

NIISQ Provider guidelines

^{*}Essential elements derived from Behaviour Intervention Plan Quality Evaluation Tool v.2, and Commonwealth and state requirements.



4. Confirming a legal decision-makers scope to consent to a restrictive practice

As per the NIISQ Positive behaviour support guideline (page 12), NIISQ cannot authorise the use of restrictive practices. A participant's consent, substituted consent (for example, provided by a guardian), or another form of lawful authorisation is required for the use of restrictive practices for participants in the NIISQ.

Identifying the source of consent for restrictive practices is an essential part of the assessment process, and a PBS provider must confirm that any restrictive practice proposed is within the scope of the legal decision-maker's appointment.

A PBS provider can refer a legal decision maker to the Queensland Civil and Administrative Tribunal (QCAT) to obtain clarification of the scope of their appointment. Please inform the relevant NIISQ Support Planner of this, as NIISQ will assess whether additional support for the legal decision maker may be required.

5. Restrictive Practices Case Conference

Part A: Purpose of a Restrictive Practices (RP) Case Conference

An RP case conference is convened and chaired by the PBS provider engaged with a NIISQ participant.

Funding for PBS provider's time should be included in the original quote for service and in a participants NIISQ MyPlan.

The purpose of an RP case conference is to provide a 'check point' with all relevant stakeholders to ensure information and expectations around behaviour support and the positive behaviour support plan (PBSP) are shared, transparent, and that any legal consent provided is informed.

A NIISQ Support Planner may attend where their attendance is necessary for the assessment of the participant's treatment, care and support needs, including new needs which might arise as a result of the PBSP, or where the participant, the participant's legal decision maker, PBS provider or Attendant Care and Support provider (ACS provider) considers that the NIISQ Support Planner could assist attendees by providing information about how supports are funded under the scheme.

If a party does not consent to the implementation of the recommended restrictive practice, **it is not to be implemented**. A NIISQ Support Planner may ask the participant's ACS provider and PBS provider questions, with the aim of assisting the participant to explore the expected outcomes of this, and any alternative arrangements that are available.



Part B: Objectives of the RP Case Conference

- 1. Presentation by PBS provider of recommended behaviour support strategies, intervention, and monitoring plan.
- 2. Confirm informed consent from participant's legal guardian for implementation of recommended behaviour support strategies including restrictive practices where necessary.
- 3. For PBS provider to confirm with the participant, their legal guardian and ACS provider the:
 - a. timeframe for stakeholder training
 - b. monitoring responsibilities
 - c. timeframe for PBSP review
 - d. plan for troubleshooting (stakeholders expectations for contact)
 - e. for chemical restraint, confirm regularity of GP or specialist reviews
- 4. For the NIISQ Support Planner to ensure that the participant's MyPlan is sufficient to meet the needs of PBSP, and review if necessary.

Part C: Roles and responsibilities

The **PBS Practitioner** who has conducted the functional behavioural assessment and developed the PBSP:

- is the Convenor and Chair for the RP case conference
- presents information on challenging behaviour and recommended positive behaviour support strategies
- presents the PBSP for implementation, training, monitoring, and review
- facilitates conversations about any problems and solutions related to PBSP
- · documents and distributes actions to all attendees.

The NIISQ Participant or their legal decision maker:

- · represents the best interests of the participant
- provides consent, where legally appropriate, to recommended PBS strategies including restrictive practices where necessary, as documented by signed PBSP.

An appropriate representative of the ACS provider implementing the positive behaviour support plan and using the restrictive practice:

- represents the care provider engaged to provide care to the participant
- confirms ACS provider agree to implement proposed PBS strategies
- confirms ACS provider will fulfill monitoring requirements
- confirms ACS provider agrees to discuss any problems and solutions related to plan
- confirms ACS provider has necessary resources to meet the needs of the PBS plan, or discusses additional required resources with the NIISQ Support Planner.



The participant's NIISQ Support Planner:

- provide information about NIISQ related questions (NIISQ role, funding, incident reporting processes)
- follow usual business practices related to MyPlanning assessment and MyPlan review.



Important note:

The participant's NIISQ Support Planner is not involved in the provision of care to a participant, including clinical decisions which must be made by other parties, including service providers funded under the NIISQ.

Part D: Example agenda

- 1. Introduction and roles:
 - · PBS Practitioner as convener and chair
 - Introduction of roles (where attending, the NIISQ Support Planner may introduce their role and nature of the NIISQ Agency's involvement in the participant's supports).
- 2. Review purpose of meeting:
 - To ensure information and expectations around the participant's behaviour support and PBSP are shared, transparent, with a goal of the Participant's legal decision maker (self or other), PBS Practitioner and ACS provider agreeing to the proposed plan.
 - To facilitate informed decision making.
- 3. Review objectives:
 - PBS Practitioner presents recommended behaviour support strategies and intervention and monitoring plan. These should be documented in the PBSP.
 - Where appropriate, PBS Practitioner gain informed consent from participant's legal decision maker for implementation of recommended behaviour support strategies including restrictive practices where necessary by signature on PBSP.
 - Confirm:
 - a. timeframe for provider training and plan for training any future staff
 - b. monitoring responsibilities
 - c. timeframe for PBSP review
 - d. plan for troubleshooting (stakeholders expectations for contact)
 - e. for chemical restraint, confirm regularity of GP / specialist reviews.
 - Ensure participant's MyPlan is sufficient to meet the needs of PBS Plan. Review if necessary.
- 4. Confirm how documentation will be shared:
 - PBS Practitioner to collate and send 'Actions' via email to all stakeholders following the meeting
 - PBS Practitioner to send finalised / signed PBSP to all stakeholders.



NIISQ

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