



Principles for the authorisation and use of regulated restrictive practices

March 2026

The use of restrictive practices represents a breach of human rights and should only be used in circumstances where a behaviour of concern poses a risk of harm to a person with disability themselves or those around them. The choice to use a restrictive practice is a complex decision that must balance the needs of providing safety and protection with the impacts of restricting a person with disability's rights and freedom.

The Authorisation of Restrictive Practice in Funded Disability Services Policy (Policy) seeks to ensure that:

- Positive outcomes and quality of life improvements for people with disability are central in decision-making processes.
- People with disability are presumed to have capacity to make decisions and have access to effective person-centred behaviour support.

Principles for the authorisation and use of restrictive practices

Authorisation under the Policy requires that all 5 principles for use of a RP are met. These principles are:

1. Last resort

A restrictive practice should only be used as a last resort in response to a risk of harm to the person with disability or others, and after the provider has explored and applied other evidence-based, person-centred, and proactive strategies.

A restrictive practice should not be the first consideration when supporting someone with a behaviour that presents a risk of harm.

2. Least restrictive approach



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A restrictive practice must be the least restrictive response that is possible in the circumstances to ensure the safety of the person or others. It is especially important to engage with the person and their key supporters to understand what would be least restrictive to them, based on their history, culture and background.

3. Reduce risk of harm

Reducing the risk of harm is the only acceptable reason for the use of a restrictive practice where there is a behaviour of concern. Restrictive practices cannot be used for any other reason.

A restrictive practice should not increase the risk of harm to a person with disability or others, and it must be implemented safely. A restrictive practice should also never be used for reasons associated with convenience e.g. staffing levels.

4. Proportionality

A restrictive practice must be in proportion to the potential negative consequences, or actual risk of harm, of not using the restrictive practice.

It is important to consider the person's perspective regarding the impact of the restrictive practice on their life.

5. Shortest possible time

A restrictive practice must be used for the shortest possible time, and no more than is necessary to ensure the safety of the person with disability or others. This applies each time it is implemented as well as historically

The goal is to reduce and eliminate a restrictive practice over time, while keeping the person safe and maximising the use of proactive strategies.

Contact information

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