



# Quality Assurance Panels: Implementing Provider role

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Implementing Providers must convene or access a Quality Assurance (QA) Panel to seek authorisation for any restrictive practices they use as part of disability funded services in accordance with the Authorisation of Restrictive Practices in Funded Disability Services Policy (Policy) and the Procedure Guidelines for NDIS Funded Disability Services (Procedure Guidelines).

Human rights and Positive Behaviour Support (PBS) are central to the Policy and as such should be embedded in carrying out provider responsibilities.

It is important the rights of the person with disability subject to restrictive practices remain central in QA Panel decision making. At each stage, the Implementing Provider should account for the wishes and preferences of the person with disability, including considering how they may wish to be involved.

Implementing Providers are required to develop internal policies and procedures to govern the operations of QA Panels they convene.

When convening or accessing a QA Panel, Implementing Providers must:

- identify and manage perceived, potential, and actual conflicts of interest related to the authorisation of restrictive practices.
- appoint a Chair for the QA Panel.
- arrange for an independent external NDIS Behaviour Support Practitioner (Practitioner) to attend the QA Panel as a decision-making member.
- arrange administrative support for the QA Panel.
- ensure, that the Behaviour Support Plan (BSP) outlining the restrictive practices to be reviewed at QA Panel meets the requirements outlined in Section 4.1.1 of the Procedure Guidelines prior to convening a QA Panel.
- ensure that the BSP and supporting information has been supplied to all QA Panel decision-making members with sufficient time to review ahead of the QA Panel.
- confirm that NDIS reporting requirements for notification of authorisation and for monitoring the use of restrictive practices are met. Evidence of authorisation is a completed QA Panel Outcome Summary Report signed by each decision-making member at the QA Panel.



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### Multiple implementing providers and the QA Panel

Providers should come together to contribute to the QA Panel process and outcome when there are multiple providers implementing the restrictive practice(s) captured in a BSP for a person.

If more than one Implementing Provider is convening/accessing a QA Panel, they must each have at least one decision-making representative to speak to the restrictive practices they plan to implement in accordance with the BSP.

### The behaviour support plan and the QA Panel

#### Development of the behaviour support plan

The Practitioner must meet and engage with the person and collaborate with all key stakeholders in the person's life to develop a shared understanding of the person with disability's needs, as well as the needs of those who support the person. This includes the Implementing Provider. Supported decision-making should be used to support engagement with the person when required.

Implementing Providers must ensure that the Practitioner writing the BSP can meet with the person as well as their key people and supports. This collaborative approach assists the Practitioner to develop a BSP that captures the context of support and can be effectively implemented by their service.

By working together with the Practitioner prior to the QA Panel, the Implementing Provider can:

- support the development of a plan which is based on a shared understanding of the person's needs, and agreement about the strategies to be implemented.
- have increased confidence that the restrictive practices in the plan are suitable for the service setting and can be implemented.

#### QA Panel preparation and the behaviour support plan

To ensure a decision can be made for each restrictive practice considered at a QA Panel, the following should be confirmed by the Implementing Provider prior to the QA Panel:

- The BSP is current (i.e. not expired)
- There is evidence of engagement with the person who the plan is about, as well as key people including the Implementing Provider.
- All restrictive practices that are currently used or proposed are included and described in the BSP.



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- There must be a Reduction and Elimination Plan included as part of a BSP or as an attachment. If the BSP is an interim plan, there may not have been sufficient time to develop a Reduction and Elimination Plan. In such circumstances, an action plan to develop a Reduction and Elimination Plan must be provided.
- There is sufficient information in the BSP to address each of the principles for the use of restrictive practice(s) as outlined in Section 4.1.2 of the Procedure Guidelines.
- The BSP and all required information have been sent to the Independent External Behaviour Support Practitioner (Independent External Practitioner) with sufficient time to read and review before the QA Panel.

The above points should be followed up with the author of the BSP ahead of the QA Panel. It is not the purpose of the QA Panel to resolve the points above.

## QA Panel composition

The QA Panel, at a minimum, consists of two decision-making members: The Senior Manager/delegate with operational knowledge and relevant experience in behaviour support, and the Independent External Practitioner who is not the BSP author and not employed by the Implementing Provider. Implementing Providers may elect to have more than two decision-making members.

Other people who do not have a decision-making role can attend the QA Panel. Attendance at the QA Panel should be decided in accordance with Implementing Providers' policies and procedures and the person with disability's specific circumstances. Implementing Providers should adopt a person-centred approach when considering who may attend a QA Panel meeting.

## QA Panel process and decision

All restrictive practices documented in the BSP are reviewed against each of the five principles for the use of restrictive practices and considered as met or not met. All five principles must be met to approve a restrictive practice. The QA Panel's approval to use a regulated restrictive practice must:

- be supported by all decision-making QA Panel members.
- specify the length of time for which the authorisation applies, where the authorisation expiry must:
  - not exceed 12 months. A shorter period may be deemed appropriate in many circumstances.
  - be no later than the expiry date of the BSP.

Approval of a restrictive practice remains valid until the authorisation date expires and/or the BSP is reviewed or changed.



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If the BSP requires a change at any point within the authorisation period, then all restrictive practices in the revised BSP must be presented at QA Panel for a new authorisation decision. This needs to occur regardless of whether any restrictive practices included in the revised BSP have been previously authorised and/or the authorisation period has not yet expired for those restrictive practices.

## QA Panel Outcome Summary Report

The QA Panel Outcome Summary Report must be signed by all decision-making QA Panel members. It records the decision to approve or not approve each restrictive practice, the reason for each decision, and any recommendations for follow up prior to future QA Panel meetings. Reasons and recommendations in the QA Panel Outcome Summary Report must be linked to the principles for the use of restrictive practices and should contain sufficient detail to allow for future review.

Implementing Providers are responsible for completing the QA Panel Outcome Summary Report as part of convening or accessing a QA Panel. There must be only one QA Outcome Summary Report for a person with disability for each QA Panel process, including when multiple Implementing Providers are present.

Implementing Providers must confirm that the QA Panel Outcome Summary Report accurately reflects the decisions made and recommendations with each decision-maker. The QA Panel Outcome Summary Report should be signed by each decision-making member as confirmation they are satisfied it accurately reflects the discussion and decisions reached at the QA panel.

The signed QA Panel Outcome Summary Report is the evidence of authorisation that must be submitted to the NDIS Commission by all Implementing Providers. There is no facility to enable submission of a copy to the Department of Communities. It must be submitted to the NDIS Commission.

## Post QA Panel follow up

If unanimous agreement could not be reached by decision-making QA Panel members at the QA Panel, it may be necessary to seek further information or additional assessment before presenting the proposed restrictive practice(s) to a future QA Panel.

If the restrictive practice(s) is not approved by a QA Panel, use of the restrictive practice(s) would need to be (or continue to be) reported as an unauthorised use of restrictive practice.

The Implementing Provider needs to ensure the author of the BSP is informed of the outcome from the QA Panel and provided with a copy of the QA Panel Outcome Summary Report. It is important that people with disability understand and are provided with a record



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of the decisions that have been made at a QA Panel. The Implementing Provider should ensure such feedback occurs in a way the person with disability can understand.

## Subsequent QA Panels

Implementing Providers should make available to subsequent QA Panels any previous QA Panel Outcome Summary Reports, BSPs, and Reduction and Elimination Plans. Provision of these documents to future QA Panels can assist the QA Panel to decide if a restrictive practice meets the principles for the use of restrictive practices or not and ensure that restrictive practices are reduced and eliminated over time.

## Contact information

For more information, please contact the Department of Communities Behaviour Support Consultancy Team:

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