

Restrictive Practices Australian States and Territories Authorisation Frameworks



| | Legislative / Policy framework | Authorising Entity | Website and key contacts | Types of RPs | Variances from NDIS RRP defintitions | Prohibited practices | Scope | NDIS BSP required? | Consent required? | Authorisation period | Statutory appeal |
|-----|---|--|---|--|---|--|---|--|--|--|--|
| ACT | Legislative Framework Senior Practitioner Act 2018 | Delegated Panel PBS plans are approved by independent panels registered with the Senior Practitioner, comprising: <ul style="list-style-type: none">a senior manager familiar with the operational protocols of the intended service settingan independent, experienced clinician with experience in positive behaviour supportadditional members with experience in the matters under consideration Restrictive Practices in PBS plans are only authorised once the plan has been registered by the Senior Practitioner. | Community Services Directorate (Office of the Senior Practitioner) W act.gov.au/directorates-and-agencies/community-services-directorate/office-of-the-senior-practitioner E actseniorpractitioner@act.gov.au P (02) 6205 2811 | NDIS (Restrictive Practices and Behaviour Support) Rules 2018 definition of regulated restrictive practices. | | ACT approach aligns with NDIS Commission's High Risk Practices with some punitive approaches included. A legally enforceable Prohibited Practices Regulation is being drafted and will soon be published. | Providers who offer any of the following services to another person: education, disability, care and protection of children, a service prescribed by regulation. | | Authorisation does not require consent. | Up to 6 months for interim BSPs. Up to 12 months for comprehensive BSPs. | Reviewable decisions may be appealed to ACT Civil and Administrative Tribunal. |
| NSW | Policy Framework NSW Restrictive Practices Authorisation Policy NSW Restrictive Practices Procedural Guide | Delegated Panel A properly constituted RPA Panel authorises regulated restrictive practices and the authorisation process requires consent to implement the practice. Interim BSP: Authorisation of RPs can be provided by a senior manager within the NDIS provider, in accordance with policy requirements. Comprehensive BSP: Authorisation by a Restrictive Practice Authorisation Panel (RPA Panel) convened by the implementing provider, comprising: <ul style="list-style-type: none">a senior manager familiar with RP use in the service setting (Panel Chair)a specialist with expertise in behaviour support The RPA Panel's decision to authorise a regulated restrictive practice is to be unanimous. | W dcj.nsw.gov.au/service-providers/deliver-disability-services/restrictive-practices-authorisation-portal.html E restrictivepracticesauthorisation@dcj.nsw.gov.au | NDIS (Restrictive Practices and Behaviour Support) Rules 2018 definition of regulated restrictive practices. | Does not include seclusion of children and young people, which is a prohibited practice. | Aversive practices that might be experienced as noxious, unpleasant or painful. Overcorrection. Misuse of medication (administration of medication contrary to the instructions of prescribing medical professional). Denial of key needs. Unauthorised restrictive practices. Any practice that degrades or demeans, may be reasonably perceived as harassment or vilification, is unethical. Corporal punishment of children. Punishment that involves immobilisation, force feeding, depriving of food, humiliation or frightening the child / young person. Seclusion of a person under the age of 18 years. | NDIS services. | Yes. | Consent is required from the person with disability or the appropriate consent giver. | Up to 6 months or the expiration date of the interim BSP. Up to 12 months or the expiration date of the comprehensive BSPs. | No. |
| NT | Legislative Framework National Disability Insurance Scheme (Authorisations) Act 2019 | Delegated Individual Senior Practitioner | Department of Health W health.nt.gov.au/professionals/restrictive-practices-authorisation E restrictive-practices.authorisation-unit@nt.gov.au | NDIS (Restrictive Practices and Behaviour Support) Rules 2018 definition of regulated restrictive practices. | Does not include seclusion of children and young people, which is a prohibited practice. | Prone or supine physical restraints. Pin downs, basket holds, take downs. Physical restraints that restrict or affect respiratory and digestive functions. Physical restraints that force the head forward, inflict deliberate pain or discomfort, including hyperextension of the joints or apply pressure on the chest. Aversive practices, overcorrection. Misuse of medication. Denial of key needs. Practices that relate to degradation or vilification, practices that limit access to community. Culture or language. Seclusion of a person under the age of 18 years. | NDIS providers providing NDIS supports to NDIS participants. | Yes. | Authorisation does not require consent. | Up to 6 months for interim BSPs. Up to 12 months for comprehensive BSPs. | Review by CE Department of Health. May be escalated to NT Civil Administrative Tribunal. |
| QLD | Legislative Framework Disability Services Act 2006 (Qld) Part 6 Guardianship and Administration Act 2000 (Qld) Chapter 5B Public Guardian Act 2014 (Qld) section 12 | Delegated Individuals Department of Families, Seniors, Disability Services and Child Safety <ul style="list-style-type: none">can provide short term authorisation for chemical, mechanical, physical, and restricting access Public Guardian <ul style="list-style-type: none">can provide consent to short term authorisation for the use of seclusion and containment A guardian for restrictive practice (general) <ul style="list-style-type: none">can provide consent to longer term use of chemical, mechanical or physical restraint and restricting access An informal-decision-maker <ul style="list-style-type: none">if there is no guardian for a restrictive practice (general), can provide consent to longer term use of restricting access Delegated Panel Queensland Civil and Administrative Tribunal (QCAT) can authorise seclusion or containment in comprehensive BSPs. | Disability Services W families.qld.gov.au/our-work/disability-services/positive-behaviour-support-restrictive-practices E enquiries_RP@qld.gov.au P 1800 902 006 Office of the Public Guardian (for short term approvals) E publicguardian@publicguardian.qld.gov.au | NDIS (Restrictive Practices and Behaviour Support) Rules 2018 definition of regulated restrictive practices. Disability Services Act 2006 (Qld) section 144 definition of restrictive practices. | Restricting access means restricting the adult's access, at a place where the adult receives disability services or NDIS supports or services, to an object in response to the adult's behaviour that causes harm to the adult or others. Containment means preventing the free exit of an adult with an intellectual or cognitive disability from a premises where the adult receives disability services or NDIS supports or services, other than by secluding the adult. The adult is not contained if the adult has a skills deficit and the adult's free exist from the premises is prevented by the locking of gates, doors or windows. | Any use of restrictive practices that is not in compliance with part 6 of the Disability Services Act 2006 (Qld) would be unlawful. | NDIS services and state disability services. Adults who have an intellectual or cognitive disability, and are at risk of harming themselves or others, and receive services from government provided or NDIS funded services. | Yes, for longer term authorisation. Queensland requires a Positive Behaviour Support Plan, with template available from Department of Families, Seniors, Disability Services and Child Safety. | Yes, approval is required from QCAT (for containment and/ or seclusion). For chemical, mechanical and physical restrictive practices, consent from a guardian for a restrictive practice (general) is required, and for restricting access, if there is no guardian for a restrictive practice (general), consent from an informal decision-maker. | Up to six months for short term authorisation and up to 12 months for comprehensive BSPs. The decision to approve or consent to a restrictive practice must be regularly reviewed, at a minimum of once per year. Queensland Civil and Administrative Tribunal has review and appeal jurisdiction. | No. |
| SA | Legislative Framework Disability Inclusion Act 2018 (Part 6A) Disability Inclusion (Restrictive Practices – NDIS) Regulations 2021 Restrictive Practices Guidelines 2022 | Delegated Individuals Senior Authorising Officer – SAO (Restrictive Practices Unit) Authorised Program Officers – APO (NDIS implementing providers) for Level 1 RPs only. | Restrictive Practices Unit W rpd.sa.gov.au E DHHSRestrictivePracticesUnit@sa.gov.au P 1800 862 004 | NDIS (Restrictive Practices and Behaviour Support) Rules 2018 definition of regulated restrictive practices. | RPs are categorised as Level 1 or Level 2. Seclusion can only occur in an emergency situation, is for the purpose of de-escalation/ regulation, and can not exceed 2 hours. Environmental restraints that involve locking external gates and doors of residential premises where disability supports are provided on a 24 hour basis can only be authorised by the SAO where the person does not have supports to enable them to safely leave at their discretion. | Prone and supine physical restraints. Physical restraints that restrict or affect respiratory and digestive functions. Physical restraints that force the head forward, inflict deliberate pain or discomfort, including hyperextension of the joints or apply pressure on the chest. Restrictive practices that are implemented for a punitive or aversive purpose. | NDIS providers providing NDIS supports to NDIS participants. | Yes, by NDIS Behaviours Support Practitioner. | Authorisation does not require consent. The consent of legal guardians is influential but does not constitute authorisation. | Up to 8 months from the start date of an interim BSP. Up to 15 months from the start date of a comprehensive BSP. | Yes, APO reviewable decisions may be appealed to the SAO. SAO reviewable decisions may be appealed to the SA Civil and Administrative Tribunal (SACAT). |
| TAS | Legislative Framework Disability Rights, Inclusion and Safeguarding Act 2024 Disability Rights, Inclusion and Safeguarding Regulations 2025 Restrictive Practices Guidelines 2025 | Delegated Individual Senior Practitioner, Department of Premier and Cabinet | Senior Practitioner – Department of Premier and Cabinet W department.premier-and-cabinet.tas.gov.au/the-senior-practitioner E seniorpractitioner@dpac.tas.gov.au | NDIS (Restrictive Practices and Behaviour Support) Rules 2018 definition of regulated restrictive practices. Any practice or intervention determined by the Senior Practitioner to be a restrictive practice. | Any other practice or intervention determined by the Senior Practitioner to be a restrictive practice. | Prohibitive practices are prescribed in regulations and align with the NDIS Commission's High Risk Practices definitions. | NDIS funded disability services providers or other persons/organisations prescribed by regulation. | Yes. | Authorisation does not require consent. | As specified in the Senior Practitioner's authorisation for a period not exceeding 12 months. | In the first instance reviews are under taken internally by the Office of the Senior Practitioner. A subsequent review may be undertaken by the Tasmanian Civil and Administrative Tribunal. |
| VIC | Legislative Framework Disability Act 2006 | Delegated Individuals Authorised Program Officers can authorise chemical and environmental restraints. Additional authorisation is required from the Victorian Senior Practitioner for the use of seclusion, physical restraint, mechanical restraint and regulated RPs for people with psychosocial disabilities. In an emergency, the person in charge of a registered NDIS provider can authorise the use of a regulated RP to prevent an imminent risk of serious physical harm. | W dfff.vic.gov.au/victorian-senior-practitioner E victorianseniorpractitioner@dfff.vic.gov.au P (03) 9096 8427 | NDIS (Restrictive Practices and Behaviour Support) Rules 2018 definition of regulated restrictive practices. | Detain, in Part 8, means a form of restrictive practice used on a person for the purpose of reducing the risk of violence or the significant risk of serious harm the person presents to another person and includes — (a) physically locking a person in any premises; and (b) constantly supervising or escorting a person to prevent the person from exercising freedom of movement. | Prone or supine restraints. Pin downs, basket holds, take downs. Physical restraints that restrict or affect respiratory and digestive functions. Physical restraints that force the head forward, inflict deliberate pain or discomfort, including hyperextension of the joints or apply pressure on the chest. | NDIS and state disability services. | Yes. Template on RDIS for state-funded services. | Authorisation does not require consent. Administrative model including independent person. | Up to 6 months for interim BSPs and up to 12 months for comprehensive BSPs. | Appeal to the Office of the Senior Practitioner, and Victorian Civil and Administrative Tribunal. |
| WA | Policy Framework Authorisation of Restrictive Practices in Funded Disability Services Policy 2020 | Delegated Panel Quality Assurance Panel Comprised of a senior manager of the Implementing provider and an independent NDIS Behaviour Support Practitioner who is not the author of the BSP. | Department of Communities E arp@communities.wa.gov.au P 1800 176 888 or (08) 6217 6888 | NDIS (Restrictive Practices and Behaviour Support) Rules 2018 definition of regulated restrictive practices. | | Prone or supine restraints. Pin downs, basket holds, take downs. Physical restraints that restrict or affect respiratory and digestive functions. Physical restraints that force the head forward, inflict deliberate pain or discomfort, including hyperextension of the joints or apply pressure on the chest. Restrictive practices that are implemented for a punitive purpose, including aversive approaches, overcorrection, denial of key needs, practices that relate to degradation and vilification, practices that limit access to culture, response cost strategies. | NDIS and state disability services. | Yes. | Authorisation does not require consent. Principles of presumed capacity, decision making and supported decision making apply. | Up to 5 months from the start of an interim BSP, up to 12 months for a comprehensive BSP, up to the expiration date of the BSP. | No. |