

What will change and what will stay the same from 1 July?

Before 1 July

- Restrictive practices should be minimised or eliminated
- Restrictive practices should only be used in the context of a Behaviour Support Plan based on an assessment of behaviour
- Consent is required for the use of restrictive practices
- NSW oversees behaviour support and authorisation of restrictive practices under the NSW policy
- ‘Restricted’ practices are defined by the NSW Government
- Routine psychotropic medication is not a restrictive practice
- Unauthorised use of restrictive practices is a reportable incident
- Service providers convene or access RPA Panels to obtain authorisation
- Service providers administer and manage requests for authorisation using a range of different systems
- Service providers identify and coordinate access to independent members of RPA Panels
- Service providers report on restricted practices to the NSW Government

After 1 July

- Restrictive practices should be minimised or eliminated
- Restrictive practices should only be used in the context of a Behaviour Support Plan based on an assessment of behaviour
- Consent is required for the use of restrictive practices
- **NDIS Quality and Safeguards Commission oversees behaviour support; restrictive practices authorisation is required in accordance with NSW policy**
- **Restrictive practices are defined by the NDIS Quality and Safeguards Commission’s Rules**
- **Chemical restraint includes the routine use of psychotropic medication and is defined as a restrictive practice**
- Unauthorised use of restrictive practices is a reportable incident
- Service providers convene or access RPA Panels to obtain authorisation
- **Service providers administer and manage requests for authorisation through one online system provided by FACS**
- **FACS provides independent specialists for RPA Panels**
- **Service providers report on the use of restrictive practices to the NDIS Quality and Safeguards Commission**