

POSITIVE BEHAVIOUR SUPPORT PLANS

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RESTRICTIVE PRACTICES &

WHAT ARE **RESTRICTIVE PRACTICES?**

A restrictive practice occurs when a child is denied or has restricted access to an item, activity or experience as a means of limiting a behaviour.

Under the UN Convention on the Rights of the Child a child holds the right to live free from abuse and harm & to feel safe and supported within their environment. In response to the Rights of the Child the NSW Care and Protection Act requires that: carers manage children's behaviours subject to regulations and implement therapeutic parenting. For example, confiscating a child's iPad [that is their own possession] is a restrictive practice and would require a modified response by the caregiver.

What counts as a restrictive practice?

Time-out



Exclusionary time-out (not involving seclusion)



Containment



Physical



Psychotropic medications



Response cost



PSYCHOTROPIC MEDICATIONS

A psychotropic medication is any drug which affects behaviour, mood, thoughts, or perception (Ghoshal, 2019). This class of medications can be used to treat conditions such as anxiety, ADHD or sleep disorders. Psychotropic medications are considered chemical restraint; therefore, in cooperation with the child's agency, a treatment plan must be devised. A treatment plan should outline the type of drug, how frequent and the dosage at which it is taken, and a review date by a health professional. In conjunction with medication, a treatment plan should include holistic strategies to support the child's health and wellbeing.

RESTRICTIVE PRACTICES AS A CRISIS RESPONSE

A crisis response occurs when a restricted practice is used and is not informed by a positive behaviour support plan. Restricted practices without a plan are considered reportable conduct and should be followed up by:

- · Speaking to a caseworker providing information about what happened.
 - · Involving the child in therapeutic interventions.
 - · Engaging in carer support.

POSITIVE BEHAVIOUR SUPPORT PLANS

A positive behaviour support plan is a person-centred document which outlines how to support behaviour change in children requiring a restrictive practice. Like a treatment plan, PBSP's are collaboratively developed by the agency, carer, and most importantly the child. A PBSP is based around goal setting and consideration of the likes/dislikes of the child. The function of a PBSP is to identify:

- What are the behaviours a function of?
- What do we need to work on?
- Where did it originate? i.e. trauma? executive functioning? After its implementation a PBSP should be monitored by the carer of the child and reviewed every 3 months. It is anticipated that as children heal from trauma or settle into a placement, the severity of behaviours should reduce over time.



USING THE P.A.C.E MODEL

Dan Hughes' P.A.C.E model is a therapeutic parenting approach in which carers can support children in developing selfawareness and regulating emotions. While we cannot undo a child's experience of trauma, promoting a PACE model can alter the way children respond to the impacts of their trauma.



PLAYFULNESS

•Humour Friendly Light touch Openness



ACCEPTANCE

 Unconditional positive regard Behaviour is communication



CURIOSITY

 Non-judgemental Active interest in child's experience Understand what is happening for the child



EMPATHY

•A felt sense of the child's experience •Communicate an understanding of the child's experience.

Preventing dysregulation

- Prompt child before activity change
- Maintain routine Listen
- Maintain attunement and focus on child - focus on other tasks/people can be perceived as rejection.

Identifying triggers

- Perception to fairness
- Doing things, he/she does not want to do
- Unplanned surprises
 - Distraction by others Not feeling heard.

Reacting vs. Responding

- emotionally-charged behaviour with an emotionally-charged reply.
- Responding: allowing the child to express big

Caring for Indigenous children

- Physical punishment is not acceptable or effective. Understand the historical
- context around humiliation, restraint and intimidation.
 - Reciprocal respect.

Changes to routine Reacting: meeting the child's

emotions, ideas and feelings without criticism, shame or guilt.