Restrictive Practice use in aged care facilities

Factsheet - Overview

What is a restrictive practice?
A restrictive practice is any practice or intervention that has the effect of restricting the rights or freedom of movement of a care recipient. From 1 July 2021, legislation changes took effect, which replaced the term ‘restraint’ with ‘restrictive practice’.

What do restrictive practices include?
There are five types of restrictive practices:
- chemical restraint
- environmental restraint
- mechanical restraint
- physical restraint
- seclusion.

The definitions and the five types of restrictive practices were implemented from 1 July 2021. The definitions provide additional clarity to approved providers on what constitutes a restrictive practice and the circumstances for the use of a restrictive practice.

These definitions align with the definitions applied under the National Disability Insurance Scheme.

What has changed with the new legislative amendments?
Updates to the Aged Care Act 1997 and the Quality of Care Principles 2014, have been made. They now to include strengthened and more specific requirements for the use of restrictive practices, including the circumstances where a restrictive practice can be used.

The changes provide clearer obligations to protect senior Australians receiving care. They give greater detail and clarity on providers’ requirements for the use of restrictive practices. The revised legislation:
- emphasises individualised care and reinforces the rights of aged care recipients
- strengthens and clarifies the definitions of restrictive practices
- clarifies consent requirements to ensure providers understand their obligations
- ensures restrictive practices are only used as a last resort to prevent harm after best practice behaviour supports have been considered, applied and documented, and
- introduces restrictive practices compliance notices and the potential for civil penalties if restrictive practice requirements are breached by approved providers.

Requirements for the use of any restrictive practice
The following requirements must be met for the use of any restrictive practice in relation to a residential aged care recipient.
• Restrictive practices must only be used as a last resort to prevent harm to the care recipient or other persons. They must only be used after consideration of the likely impact on the care recipient.

• Best practice alternative behaviour support strategies have been used before the restrictive practice is applied and the use of these strategies has been documented.

• Restrictive practices must only be used in proportion to the risk of harm, in the least restrictive form, and for the shortest period possible.

• The use of restrictive practices must be monitored, reviewed and documented. Alternative strategies must be considered including if the restrictive practice can be reduced or stopped.

• Informed consent for the use of restrictive practices must be obtained from the care recipient. If the care recipient does not have the capacity to give that consent, it must be obtained from their restrictive practice substitute decision maker.

• The use of the restrictive practice must comply with the User Rights Principles and Aged Care Quality Standards.

• The use of a restrictive practice must be continually monitored, reviewed and documented.

Emergency use of restrictive practices

An emergency is a serious or dangerous situation that is unanticipated or unforeseen and requires immediate action. Situations where restrictive practices are required in residential aged care in the event of an emergency should be rare.

It is expected that providers will be actively engaged in a consumer’s day to day care and support needs, including behaviour support planning. This understanding and engagement will reduce the occurrence of emergencies.

Some requirements do not apply when restrictive practices are used in an emergency. These exemptions are intended to ensure a provider can appropriately and rapidly respond to an emergency to protect a care recipient or other person from immediate harm. The exemption applies only while the emergency exists.

An emergency situation is not expected to last for an extended period. An emergency situation will be considered to have ended when there is no immediate risk of harm or injury for the care recipient or others.

If an approved provider uses a restrictive practice in an emergency the approved provider must, as soon as practicable after the restrictive practice starts to be used inform the restrictive practices substitute decision-maker about the use of the restrictive practice. The provider must also ensure the use of the restrictive practice is documented.

Once the emergency is over, the provider should revert to the usual policies and procedures regarding the application or use of any restrictive practice for the care recipient. This includes obtaining and documenting appropriate consent.

During an emergency, approved providers must seek to ensure the least restrictive form of practice is being applied and that it is for the shortest period possible. Additionally, approved providers must continually seek to consider whether an alternative strategy can be used and whether the restrictive practice can be reduced or stopped.
How can I get more information?

Department of Health
General information about the use of restrictive practices in aged care can be found on the Department of Health’s website.

Aged Care Quality and Safety Commission
Information about the use of restrictive practices in aged care including education and regulatory requirements can be found on the Aged Care Quality and Safety Commission website.

Dementia Support Australia
Information about supports for people with dementia who are experiencing changes in behaviour that impact their care or carer, can be found at Dementia Support Australia’s website.

Support includes access to the Dementia Behaviour Management Advisory Service (DBMAS) and Severe Behaviour Response Teams (SBRT).

Dementia Training Australia
Supports including free on-line dementia training, practical resources and training packages, including guidance on behaviour support planning can be found at Dementia Training Australia’s website.