



NDIS Quality
and Safeguards
Commission

Positive Behaviour Support Capability Framework

For NDIS providers and behaviour
support practitioners

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The Positive Behaviour Support Capability Framework

Context

The National Disability Insurance Scheme Quality and Safeguards Commission (NDIS Commission) is committed to developing and implementing a Positive Behaviour Support Capability Framework (PBS Capability Framework) that is consistent with the intent of the law in its behaviour support function. The PBS Capability Framework guides the NDIS Commission's work on behaviour support capability and is used to consider the suitability of behaviour support practitioners to deliver specialist behaviour support services.

The PBS Capability Framework satisfies section 181H of the *National Disability Insurance Scheme Act 2013* (Cth) that states:

The NDIS Commissioner's behaviour support function is to provide leadership in relation to behaviour support, and in the reduction and elimination of the use of restrictive practices, by NDIS providers, including by:

- (a) building capability in the development of behaviour support through:
 - i. developing and implementing a competency framework for registered NDIS providers whose registration includes the provision of behaviour support assessments and developing behaviour support plans; and
 - ii. assessing the skills and experience of such providers against the competency framework.

Introduction

The PBS Capability Framework outlines the capabilities required of individuals providing behaviour support under the National Disability Insurance Scheme (NDIS). The PBS Capability Framework has been produced by the NDIS Commission using best practice positive behaviour support (PBS) as its guidance.

For the purposes of this document, PBS will be defined using the definition adopted in the *National framework for reducing and eliminating the use of restrictive practices in the disability services sector* (Australian Government, 2014, p. 4), that states:

Positive behaviour support is the term used to describe the integration of the contemporary ideology of disability service provision with the clinical framework of applied behaviour analysis. Positive behaviour supports are supported by evidence encompassing strategies and methods that aim to increase the person's quality of life and reduce challenging behaviour (*Source note: Carr, et al., 2002; Singer & Wang, 2009*).

Using the above definition of PBS, the PBS Capability Framework aims to establish expectations of best practice behaviour support for NDIS participants. This includes practitioners with values, knowledge and skills aligned to the PBS Capability Framework; professional progression and recognition for practitioners; and the appropriate safeguards for all relevant stakeholders. It is acknowledged that the NDIS has led to unprecedented sector change, which has impacted significantly on the behaviour support workforce across Australia. In response to these challenges,

the NDIS Commission aims to strengthen the workforce and support its growth and capacity by articulating the capabilities to provide PBS under the NDIS.

By articulating capabilities, the PBS Capability Framework does not outline minimum years of practice, qualifications, training or professional development required to be a behaviour support practitioner; nor does it provide guidance on how practitioners can maintain registration with their professional accreditation body, if applicable. Rather, the PBS Capability Framework is designed to raise the standard of practice for the delivery of behaviour support services and encourage NDIS providers to work incrementally towards excellence.

The NDIS Commission acknowledges the complexity of providing high-quality PBS and uses a tiered approach to capture the breadth and depth of practitioner skills and knowledge. The PBS Capability Framework is designed to support providers, practitioners and organisations to acquire capabilities at incremental levels. The ultimate goal of the PBS Capability Framework is to build a highly skilled and capable workforce that focuses on improving the wellbeing and quality of life of people with disability who require behaviour support services.

Acknowledgements

The development of the PBS Capability Framework was informed by considering information from a range of sources. This included a review of previous work completed on a draft competency framework (Birgden, 2018) and literature review; consultation with the States and Territories' Behaviour Support Working Group (2018a, 2018b); and feedback from peak disability organisations in 2017-18.

Additional consultation occurred with key stakeholders with subject matter expertise, peak bodies and people with lived experience of cognitive impairment as identified by the NDIS Commission in 2019. The NDIS Commission thanks key stakeholders who participated in the consultations for this framework. The consultations that occurred in 2019 provided consensus for the guiding principles and values on which the PBS Capability Framework has been built. The views of people with lived experience and peak bodies also highlighted the need for practitioners to demonstrate these principles and values by listening to and valuing the voices of people with disability, and using empathy, interpersonal skills and teamwork.

The NDIS Commission also recognises the following significant documents that were used in the conceptualisation and development of the PBS Capability Framework:

- *National framework for reducing and eliminating the use of restrictive practices in the disability services sector* (Australian Government, 2014)
- *Service standards 2016/2017. Supplementary module 2 — Behaviour support* [Unpublished] (Nankervis, Lambrick, & Koelink, 2017)
- *National Disability Insurance Scheme (Provider Registration and Practice Standards) Rules 2018*
- *National Disability Insurance Scheme (Quality Indicators) Guidelines 2018*
- *National Disability Insurance Scheme (Restrictive Practices and Behaviour Support) Rules 2018*

- *Challenging behaviour and learning disabilities: Prevention and interventions for people with learning disabilities whose behaviour challenges* (National Institute for Health and Care Excellence, 2015)
- *Positive Behaviour Support: A scoping review of best practice frameworks* (NDIS Quality and Safeguards Commission, 2018)
- *Positive Behavioural Support: A competence framework* (Positive Behavioural Support Coalition UK, 2015).

Purpose

The purpose of the PBS Capability Framework is to:

- Define the principles and values base of PBS
- Define the key capability domains of best practice PBS in the NDIS context that is person-centred and rights-based
- Embed a clear commitment to the reduction and elimination of restrictive practices and a focus on proactive practice
- Maintain and develop the existing workforce by providing a framework for capability development and career progression
- Outline expectations for supervision and continuing professional development within the behaviour support context.

Legislative Context

Underpinning the PBS Capability Framework is the *NDIS Act 2013* (Cth), which supports the United Nations (2006) Convention on the Rights of Persons with Disabilities (CRPD) (Chan, French, & Webber, 2011). As such, it is expected that all behaviour support practitioners will be familiar with its general obligations (Articles 3 to 9) and particularly mindful of their obligations under Articles 12, 13, 14, 16, 19, 21 and 26.

Article 12: Equal recognition as a person before the law. This article recognises the right to protection from abuse through support to work on legal and financial issues; that rights and choices are respected; and that support is given to make decisions without coercion.

Article 13: The right to justice.

Article 14: The right to liberty and security. This article recognises the importance of protection against the removal of liberty illegally and without reason, and to protections under the law if liberty is taken away.

Article 16: Freedom from exploitation, violence and abuse. This article is the most direct link with the Australian Government's (2014) commitment to the reduction and elimination of restrictive practices, and is supported by a Zero Tolerance Framework (National Disability Services, 2016; 2018).

Article 19: Living independently and being included in the community. This article covers people making choices about where they live, who they live with, and the supports they seek to be part of the community.

Article 21: Freedom of expression and opinion, and access to information. This article is about the right to say what one thinks through the type of communication that a person chooses.

Article 26: Habilitation and rehabilitation. This article covers actions that make it possible for people with disability to enjoy maximum independence, full abilities, and be involved in all aspects of life.

In addition to the CRPD, it is expected that behaviour support practitioners will have a thorough understanding of the,

- NDIS (Provider Registration and Practice Standards) Rules 2018, the NDIS (Restrictive Practices and Behaviour Support) Rules 2018 and the NDIS (Quality Indicators) Guidelines 2018 under the *NDIS Act 2013* (Cth), and other relevant national laws
- Relevant state and territory laws and policies.

As the PBS Capability Framework is a national document, practitioners are expected to apply the capabilities outlined below within their own state or territory laws and policies. This includes meeting legal obligations within state and territory requirements to obtain consent for service provision and the use of restrictive practices and consultation with the NDIS participant, their family, carers, guardian or other relevant person.

Who Is the PBS Capability Framework For?

The PBS Capability Framework is for behaviour support practitioners who intend to register in their own right as sole practitioners under registration group 0110 (specialist behaviour support), or behaviour support practitioners who will be working for, or be engaged by, a registered 0110 service provider. These practitioners need to be considered suitable by the NDIS Commission to deliver specialist positive behaviour support as an NDIS behaviour support practitioner [*NDIS (Quality Indicators) Guidelines 2018*]. According to the NDIS Rules, an NDIS behaviour support practitioner can “undertake behaviour support assessments (including functional behaviour assessments) and ... develop behaviour support plans that may contain the use of restrictive practices” [NDIS (Provider Registration and Practice Standards) Rules 2018, Section 5].

There are four levels of behaviour support practitioners within the PBS Capability Framework. These levels articulate the capabilities of a core practitioner through to recognising the expertise of highly experienced and specialist practitioners. Figure 1 demonstrates the progression pathway for practitioners through the framework.

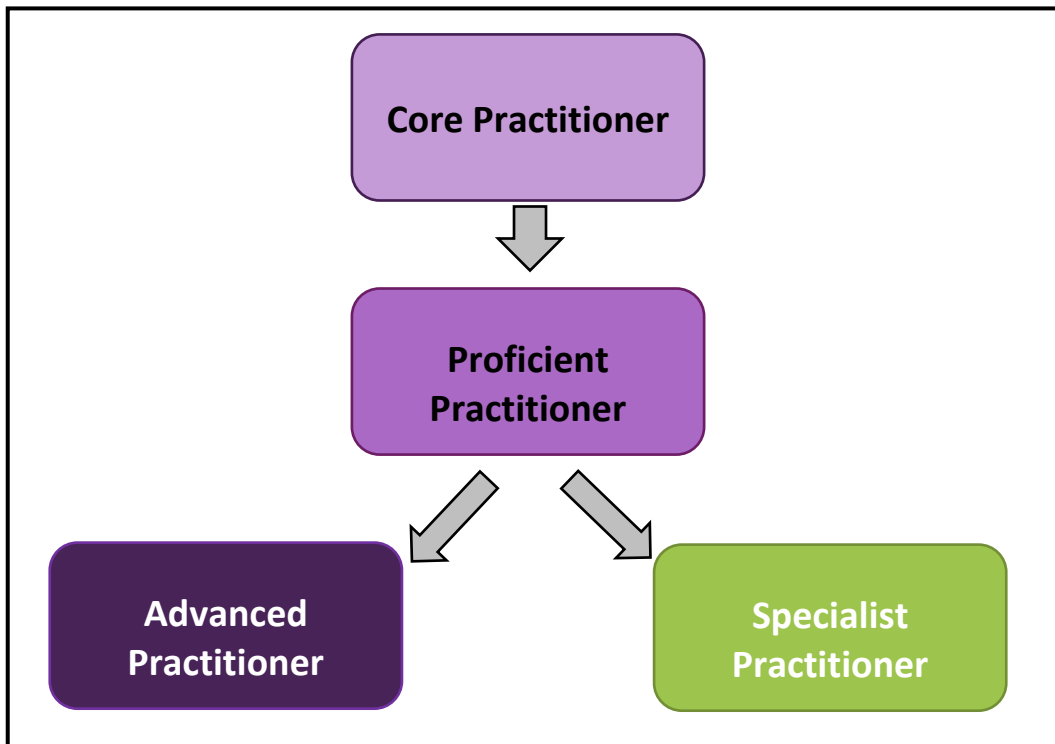


Figure 1: Progression pathway for NDIS behaviour support practitioners through the PBS Capability Framework

Behaviour Support Practitioner Levels

Practitioner levels within this framework are defined as follows.

1. **Core:** This level describes the expectations of an entry-level behaviour support practitioner. The core practitioner is expected to:
 - Recall, understand and apply concepts relating to disability and PBS in general circumstances
 - Have a core understanding of other models of practice which are complementary to PBS (e.g., environmental enrichment, person-centred active support)
 - Access and actively participate in supervision and supervised practice (a core practitioner works under the supervision of practitioner rated as proficient or above).

Note: Independently recommending restrictive practices is outside of the scope of a core practitioner and must be done under supervision (see the PBS Capability Framework).

- 2. Proficient:** In addition to meeting the core capabilities, a proficient practitioner is expected to:
- Analyse and evaluate information
 - Evaluate the quality of behaviour support plans
 - Constructively promote PBS across the organisation
 - Access and actively participate in supervision to build on behaviour support knowledge and skills (from an advanced or specialist practitioner)
 - Provide and participate in peer supervision with another proficient practitioner (if relevant to their supervision schedule)
 - Supervise a core practitioner (if the proficient practitioner has the skills and knowledge base to do so).
- 3. Advanced:** An advanced practitioner has advanced skills across all levels of the PBS Capability Framework. An advanced practitioner is expected to:
- Synthesise and integrate information from a range of sources
 - Demonstrate high-level critical thinking and analytical skills to make effective decisions in complex situations
 - Demonstrate high-level knowledge of and skills in areas covered by the PBS Capability Framework and in fields that complement the PBS approach
 - Shape strategic thinking in PBS
 - Achieve results in system change that enhances the rights of persons with disability
 - Provide practice leadership across settings and interactions with stakeholders
 - Use knowledge and practical skills gained through further study and/or extensive practical experience to provide specialist behaviour support as part of an interdisciplinary team working in complex contexts
 - Access and participate in supervision as the supervisee (including peer supervision with another advanced practitioner)
 - Supervise other practitioners at all levels
 - Have the skills to perform in a managerial or practice leadership position.

4. Specialist: A specialist practitioner is recognised for their area of specialisation in or relevant to PBS, in addition to a level of proficiency. Areas of specialisation may include, but are not limited to:

- A practice speciality (e.g., forensic, trauma-informed practice, augmentative and alternative communication)
- Dual diagnosis (e.g., intellectual disability and mental health)
- A specific population or cultural group
- A specific age group or transition point.

In addition to their area of specialisation, a specialist practitioner is expected to:

- Have the skills and ability to provide supervision and support to other behaviour support practitioners in their area of expertise
- Access and participate in supervision as the supervisee (including peer supervision with another specialist practitioner).

Positive Behaviour Support in a Team

Behaviour support practitioners will work in a range of settings, team structures and geographical locations. If the behaviour support needs of a participant are not complex, then a positive behaviour support plan may be implemented by a sole practitioner who leads and coordinates a team that includes the person with disability and their key support people.

If the behaviour support needs of a participant are complex, then a positive behaviour support plan may be implemented by an interdisciplinary team of professionals, the person with disability and their support network. Additionally, some behaviour support practitioners may work in situations where PBS is implemented across an organisation, or where there are different tiers of practitioners who are involved at different stages depending on the complexity of the case. Regardless of the context, it is fundamentally important that a behaviour support practitioner has a clear understanding of the functions and responsibilities of their role and has the supports in place to provide high-quality and accountable service delivery.

Other Stakeholders

The PBS Capability Framework recognises that there are numerous stakeholders who are key contacts for the behaviour support practitioner and central to effective positive behaviour support. The PBS Capability Framework is not designed to articulate the roles and expectations of these team members specifically, but will refer to these stakeholders when engagement with them is a skill required of behaviour support practitioners. These stakeholders include:

- **The person:** In the PBS Capability Framework, this term is used to refer to the person with disability (participant) whose behaviours of concern are the target of NDIS support.
- **Implementer:** This term is inclusive of anyone who would be involved in the implementation and monitoring of a behaviour support plan, including disability support workers, family and carers. This role may at times extend to other roles, such as teachers or volunteers.

- Service providers: These are organisations registered to provide services under the NDIS.
- Others: These may be co-residents or other people with whom the person and their support networks may be in contact.
- Professionals: This may include a range of disability and mainstream specialists who support the person with disability who has complex needs. They may include professionals with backgrounds in medicine, psychiatry, education, allied health or justice.

While family members are included as implementers, a person's family members will take on a range of roles when providing behaviour support. The nuances of this situation do not perfectly align with the expectations of an implementer as outlined in the PBS Capability Framework.

The Capability Domains

The PBS Capability Framework describes seven key domains, all of which draw from a central core of principles and values. The domains are:

1. Interim Response
2. Functional Assessment
3. Planning
4. Implementation
5. Know it Works
6. Reduce and Eliminate Restrictive Practice
7. Continuing Professional Development and Supervision.

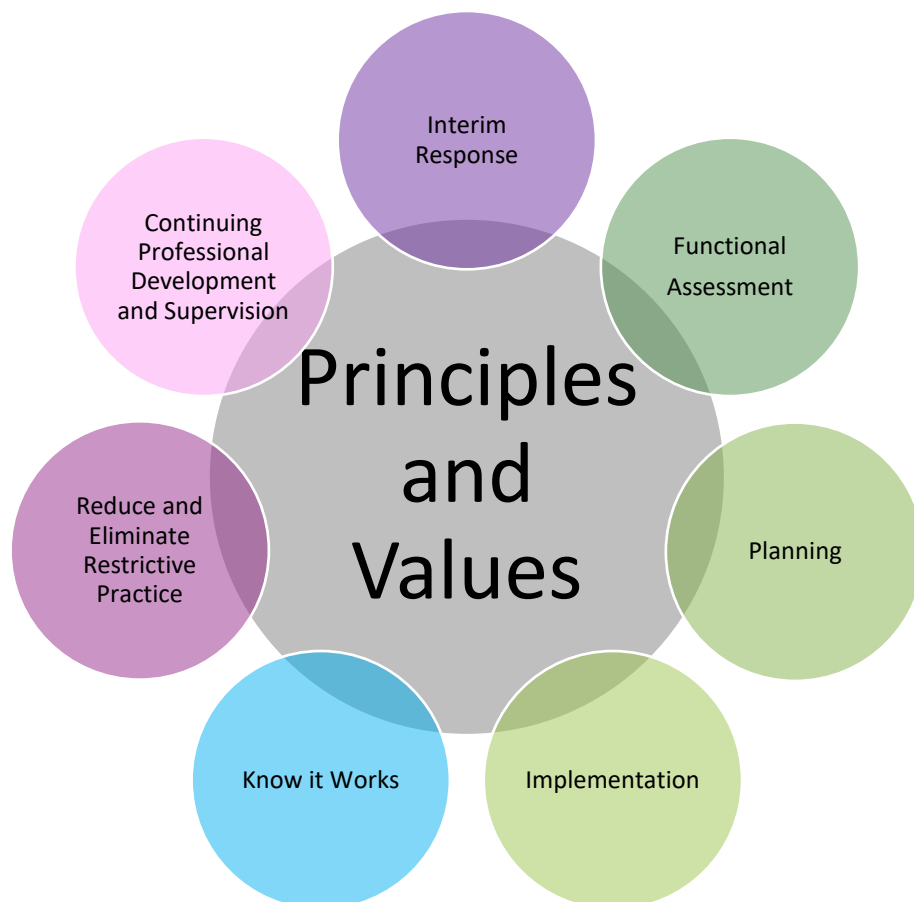


Figure 2: The PBS Capability Framework

Principles and Values

Central to the PBS Capability Framework are its values and principles.

Values

- Respect, protect and fulfil human rights, through meeting obligations under the United Nations' Convention on the Rights of Persons with Disabilities (CRPD)
- Person-centred approaches
- Strengths-based approaches to increase capacity of individuals, families and carers
- A holistic approach (recognising the connections between a person's physical, emotional, spiritual and family wellbeing)
- Recognise the importance of mainstream (e.g., medical, justice and education systems) and specialist disability services, and their roles in the team supporting with the person
- Respect for the person's 'voice'
- Full participation of people with disability as citizens in their communities
- Collaboration as recognition of the value of teamwork
- Transparency and openness

Principles

- Legally and ethically sound practice
- Culturally competent practice
- Reflective practice
- Evidence-based practice and data-driven decision-making
- Recognition that behaviours of concern are often the result of interactions between the person and their environment, and may be affected by multiple factors
- Acknowledgement of a lifespan perspective and that as people grow and develop, they face different challenges
- Commitment to the principles of supported decision-making.



The PBS Capability Framework

The person with disability who is receiving positive behaviour support remains at the centre for every part of the PBS Capability Framework. The values and principles above underpin the entire PBS Capability Framework and show how positive behaviour support is practised.

There is a brief explanation or definition for each capability domain as well as a framework structured into three main areas: behaviour support practitioner knowledge, behaviour support practitioner skills, and service provider and implementing provider considerations. Provider considerations refer to capabilities that ensure behaviour support plans are effectively implemented.

Service provider and implementing provider considerations are not exhaustive but rather guide behaviour support practitioners as to what should be in place to support them in their role. The providers' considerations across the PBS Capability Framework are taken from existing NDIS practice standards and quality indicators; they are not additional requirements [see *NDIS (Provider Registration and Practice Standards) Rules 2018*; *NDIS (Quality Indicators) Guidelines 2018*; *NDIS (Restrictive Practices and Behaviour Support) Rules 2018*].

The knowledge and skills in each domain are divided into two sections. The first section includes the skills and knowledge capabilities that are considered core to being a behaviour support practitioner. The second section includes capabilities that would be expected of a practitioner rated as proficient or above.

1. Interim Response

Under the *NDIS (Restrictive Practices and Behaviour Support) Rules 2018*, any person with an immediate need for a behaviour support plan receives an interim behaviour support plan that minimises the risk to the person and others. An interim behaviour support plan that includes provision for the use of a regulated restrictive practice must be developed within one month of the specialist behaviour support provider being engaged [*NDIS (Restrictive Practices and Behaviour Support) Rules 2018*, Section 19].

People with behaviours of concern may experience periods where their behaviours place them or others at risk of harm. It is important for behaviour support practitioners to be aware of this. Practitioners need to focus on protecting the person and others, with the aim of minimising and eliminating the risk of harm. In the case where an interim behaviour support plan being developed contains regulated restrictive practices, a comprehensive behaviour support plan must be developed within six months of the specialist behaviour support provider being engaged to develop the plan [*NDIS (Restrictive Practices and Behaviour Support) Rules 2018*, Section 19].

If a behaviour support practitioner is working with a new person where an interim response is the first need, they should have the skills and knowledge to provide this support. If these skills fall outside of their scope of practice, then a practitioner rated as proficient or above needs to provide supervision (see the capability domain, Continuing Professional Development and Supervision).

Core Behaviour Support Practitioner

Knowledge: Interim Response	Skills: Interim Response	Service Provider and Implementing Provider Considerations across all Practitioner Levels
<ul style="list-style-type: none"> • Understand that behaviours may occur that cause immediate risk of harm to the person or others • Know high-risk behaviours need to be managed safely and effectively using the least restrictive options • Know high-risk situations and environments can be identified (including antecedents, triggers) • Know how and why interim responses will be unique to the person • Be aware that interim risk management may include restrictive practices • Understand the consequences of unauthorised use of restrictive practices • Understand legal and ethical expectations 	<ul style="list-style-type: none"> • Gather and document appropriate authorisation and consents where required by state or territory laws and policies • Evaluate the risk posed by the behaviour to the person and others • Consult with the person, their family, carers, guardian or other relevant person • Communicate clearly and effectively with relevant parties to gather information and provide direction • Collaborate with team members • Record and report accurately • Identify any existing data that might provide insight into the situation • Provide guidance on protective actions related to environment, setting and circumstances • Coach those implementing a behaviour support plan with the assistance of a supervisor • Seek professional support from a supervisor 	<ul style="list-style-type: none"> • Recruit and retain appropriately skilled behaviour support practitioners and implementers • Ensure all staff have the skills to provide effective supports for people with complex needs and behaviours of concern • Review procedures and policies using interim behaviour support plans to reduce the immediate risk and likelihood of crisis incidents • Help the behaviour support practitioner to conduct an initial risk assessment • Provide support for immediate review by a medical professional if required • Ensure that all staff understand restrictive practices and the consequences of unauthorised use • Ensure staff are released to attend training in the implementation of an interim behaviour support plan • Have a mechanism in place to record and review incident reports and collect other initial data as necessary

Proficient or Above Behaviour Support Practitioner

Knowledge: Interim Response	Skills: Interim Response	Service Provider and Implementing Provider Considerations across all Practitioner Levels
<ul style="list-style-type: none"> • Know a range of de-escalation techniques • Be aware of the implications of using restrictive practices as a response • Have a working knowledge of authorisation and reporting requirements for restrictive practices relevant to state or territory laws and policies 	<ul style="list-style-type: none"> • Develop an individualised immediate response plan • Use a range of strategies that can be safely adjusted once full assessment and planning concludes • Document and implement ethical reactive strategies • Seek professional support as required • Work collaboratively with the relevant stakeholders (including emergency services when required) • Train those implementing a behaviour support plan in its effective implementation 	<ul style="list-style-type: none"> • Facilitate debriefing for involved parties (if a critical or serious incident has occurred) • Ensure inclusion of key parties (including the person) in post-incident reviews

See:

- *NDIS (Provider Registration and Practice Standards) Rules 2018*: Schedule 1; Schedule 3, clause 9; Schedule 4, clause 10
- *NDIS (Restrictive Practices and Behaviour Support) Rules 2018*: Sections 11, 12, 13 and 19
- *NDIS (Quality Indicators) Guidelines 2018*: Sections 44 and 54

2. Functional Assessment

A behaviour support assessment, including a functional behaviour assessment, must be undertaken before a comprehensive behaviour support plan is developed for an NDIS participant, whether or not restrictive practices are included in the plan [*NDIS (Restrictive Practices and Behaviour Support) Rules 2018*, Section 20].

A functional behaviour assessment informs function-based interventions (Gore, et al., 2013). It should result in a common understanding of the person, their support needs and the function of the behaviour. To commence, there is a period of pre-assessment that involves gathering data and clarifying presenting information.

The functional behaviour assessment should always identify the strengths of the person, their will and preference for important elements of their life, and the person’s environmental context (e.g., physical, interpersonal, internal). Consent or consultation (as required by relevant state or territory laws and policies) must be obtained before the assessment begins, and the person must remain at the centre of the assessment. When the presenting behaviours are complex, the functional behaviour assessment should be interdisciplinary to allow for an integrated formulation as to why the behaviours of concern are occurring.

Core Behaviour Support Practitioner

Knowledge: Functional Assessment	Skills: Functional Assessment	Service provider and Implementing provider Considerations across all Practitioner Levels
<ul style="list-style-type: none"> • Understand the values, policy and legislative context in which positive behaviour support occurs • Understand that behaviours happen for a reason and serve a purpose • Know the common functions of behaviours • Understand the difference between what the behaviour looks like and its function 	<ul style="list-style-type: none"> • Place the person at the centre of the functional assessment and establish support to keep them there • Conduct a respectful and responsive assessment that considers the diversity of a person’s culture • Involve the person, their family members, carers, guardian and other relevant people in the assessment 	<ul style="list-style-type: none"> • Support the person to contribute to the assessment • Facilitate and enable the practitioner (and team where relevant) to conduct information-gathering for the assessment • Identify key stakeholders for the practitioner • Support the practitioner to conduct an initial risk assessment

Knowledge: Functional Assessment	Skills: Functional Assessment	Service provider and Implementing provider Considerations across all Practitioner Levels
<ul style="list-style-type: none"> • Understand that assessment is focused initially on improving quality of life and secondly on reducing behaviours of concern • Understand the importance of obtaining baseline measures of: <ul style="list-style-type: none"> – Current behaviour(s) of concern (including frequency and intensity) – Quality of life – Current use of restrictive practices • Value the role of the service, staff, family members or carers in developing or maintaining behaviours • Understand that the complexity and duration of the functional assessment is dependent on the severity, impact, frequency and duration of the behaviour • Understand the importance of data-driven decision-making • Understand life-course events (that is, the connection between a person’s history and events during their life that may have had an impact on them) 	<ul style="list-style-type: none"> • Use communication and active listening skills to develop rapport with the person and their team • Adapt assessment terminology and systems to the needs of the target audience • Assess the person’s abilities and needs • Use observation skills • Use effective systems to collect data from a variety of sources • Identify antecedents (setting events and triggers) to behaviours of concern and factors that support quality of life • Identify consequences that maintain a behaviour • Identify and describe the behaviour in a way that is observable and measurable • Analyse the relationship between the person and their environment • Produce an assessment report • Seek professional support as required 	<ul style="list-style-type: none"> • Support the person to contribute to the assessment • Facilitate and enable the practitioner (and team where relevant) to conduct information-gathering for the assessment • Identify key stakeholders for the practitioner • Support the practitioner to conduct an initial risk assessment • Ensure staff have the training and skills to effectively participate in data collection • Ensure staff are supported to collect data and contribute to the development of a functional assessment • Arrange medical reviews as required

Proficient or above Behaviour Support Practitioner

Knowledge: Functional Assessment	Skills: Functional Assessment	Service Provider and Implementing Provider Considerations across all Practitioner Levels
<ul style="list-style-type: none"> • Recognise assessment is a flexible and continuing process – factors that trigger and maintain behaviour may change over time • Know the importance of assessments being regularly reviewed • Understand the impact of behaviours on the person and their support networks • Be conversant with a range of functional assessment tools • Understand the strengths and weaknesses of various data collection methods and importance of selecting the appropriate method for the behaviour in question • Understand the cultural context to determine who to involve and the most appropriate mechanism for assessment • Understand the impact of monetary and physical resources <p>Note: See the capability domain, Restrictive Practices, if a behaviour support plan includes the use of regulated restrictive practices.</p>	<ul style="list-style-type: none"> • Establish a developmental history • Analyse any current or previous interventions including reactive strategies • Consider physical or mental health problems, including the effect of medications and sleep • Analyse other considerations such as a history of trauma, sensory processing, social and interpersonal history • Analyse the relationship between the person and their environment • Identify enablers and barriers to quality of life, including understanding the protective value of friendships and family, and their contribution to safety • Identify barriers to intervention • Lead an interdisciplinary assessment of complex behaviour • Construct a model of understanding that explains the functions of behaviours • Refer on when the requirements fall outside of the scope of behaviour support 	

Knowledge: Functional Assessment	Skills: Functional Assessment	Service Provider and Implementing Provider Considerations across all Practitioner Levels
	<ul style="list-style-type: none"> • Collaborate with non-disability specific or mainstream services as required (including medical professionals) • Assess and regularly review areas of risk to the person or others • Identify the use of restrictive practices • Conduct a comprehensive functional assessment and produce an assessment report that includes recommended actions and strategies • Undertake an assessment review if there is a significant change in behaviour 	

See:

- *NDIS (Provider Registration and Practice Standards) Rules 2018*: Schedule 1; Schedule 3, clause 3; Schedule 4, clause 5
- *NDIS (Restrictive Practices and Behaviour Support) Rules 2018*: Sections 20 and 22
- *NDIS (Quality Indicators) Guidelines 2018*: Sections 40 and 49

3. Planning

In the PBS Capability Framework, planning refers to the development of a person-centred, evidence-informed positive behaviour support plan that is based on a shared understanding of the function of behaviours.

A comprehensive plan must be proactive, reflect the person’s individual needs, improve their quality of life and support their progress towards positive change. There are some skills that are included in the core section of the capability domain that will be demonstrated through supervision, depending on the skill level of the core practitioner.

Core Behaviour Support Practitioner

Knowledge: Planning	Skills: Planning	Service Provider and Implementing Provider Considerations across all Practitioner Levels
<ul style="list-style-type: none"> • Understand that a behaviour support plan is based on knowledge from the functional assessment • Identify who will read and use a behaviour support plan • Understand that a behaviour support plan must be written so it suits its intended audience • Understand that a behaviour support plan must have both proactive and reactive components 	<ul style="list-style-type: none"> • Use data to inform a theoretical and ethically sound behaviour support plan • Identify those responsible for implementing a behaviour support plan • Identify barriers to implementation • Collaborate and consult as required to develop strategies • Develop proactive strategies to improve the person’s quality of life • Develop strategies that aim to increase the person’s skills, including communication, and the interaction skills of communication partners 	<ul style="list-style-type: none"> • Enable systems and procedures that provide a safe, predictable and stable environment • Be aware of environmental aspects that may pose risk factors • Provide supervision and support to those responsible for implementing and monitoring a behaviour support plan, including clarifying anything not understood • Provide time and resources for staff to read and absorb each person’s behaviour support plan • Provide staff with reasonable supports and adaptations to understand a behaviour support plan and follow it correctly

Knowledge: Planning	Skills: Planning	Service Provider and Implementing Provider Considerations across all Practitioner Levels
	<ul style="list-style-type: none"> • Develop necessary adaptations to a person’s environment and routine • Write a behaviour support plan so it is easy to understand by those implementing it • Include an escalation mechanism (under supervision as required) • Develop data collection systems that are objective, understandable and useable by the key people • Include a continuous cycle of monitoring 	

Proficient or above Behaviour Support Practitioner

Knowledge: Planning	Skills: Planning	Service Provider and Implementing Provider Considerations across all Practitioner Levels
<ul style="list-style-type: none"> • Understand the importance of risk management 	<ul style="list-style-type: none"> • Include strategies that remove conditions likely to promote behaviours of concern including: <ul style="list-style-type: none"> – Environmental modifications – Active engagement through structured and meaningful daily activities • Include strategies for replacement behaviours 	

Knowledge: Planning	Skills: Planning	Service Provider and Implementing Provider Considerations across all Practitioner Levels
	<ul style="list-style-type: none"> • Include preventative strategies such as relaxation, distraction and diversion • Include reactive strategies when behaviours are not preventable • Minimise or eliminate the use of restrictive practices • Develop a behaviour support plan according to the literacy and communication needs of the target audience • Develop a behaviour support plan that is compatible with the ability and resources of the implementers • Develop a behaviour support plan that is supported by data that measures how accurately it is implemented • Clearly articulate responsibilities and timeframes 	

See:

- *NDIS (Provider Registration and Practice Standards) Rules 2018*: Schedule 1; Schedule 3, clause 5; and Schedule 4, clause 5
- *NDIS (Restrictive Practices and Behaviour Support) Rules 2018*: Sections 18 to 24
- *NDIS (Quality Indicators) Guidelines 2018*: Sections 40 and 49

4. Implementation

Implementation is about putting a behaviour support plan into action. It involves providing tailored support and training so a plan is implemented effectively.

Implementers include anyone who may be involved in the implementation and monitoring of a plan, such as disability support workers, family and carers. This role may at times extend to other roles, such as teachers or volunteers. Implementation should be approached in partnership with the person, their support network and other relevant professionals. As part of implementation, provisions must be made to increase the capacity of the person and improve their quality of life.

Core Behaviour Support Practitioner

Knowledge: Implementation	Skills: Implementation	Service Provider and Implementing Provider Considerations across all Practitioner Levels
<ul style="list-style-type: none"> • Understand the importance of individualised implementation of a behaviour support plan • Understand how implementation approaches can vary for a person across different stages of life • Consider the people to include in implementation • Understand that functioning and resilient teams are likely to increase the consistency of implementation 	<ul style="list-style-type: none"> • Provide individually tailored education and training to those who are implementing a behaviour support plan • Consider the capacity of the person at the centre of a behaviour support plan and their role in implementation • Support implementers to incorporate strategies into daily support plans and other relevant support documents • Support implementation across different environments and contexts • Provide feedback to implementers on implementation and model alternatives 	<ul style="list-style-type: none"> • Ensure staff supporting the person have good links with community • Provide clear expectations of staff that a key component of their role is to identify and develop meaningful activities for each person throughout the day • Lead and monitor the implementation of a behaviour support plan • Provide resources to support implementation • Provide staff with ongoing training, supervision and support in the implementation of a behaviour support plan

Knowledge: Implementation	Skills: Implementation	Service Provider and Implementing Provider Considerations across all Practitioner Levels
	<ul style="list-style-type: none"> • Support those implementing a behaviour support plan to use the recommended data collection systems • Promote least restrictive practices 	<ul style="list-style-type: none"> • Use performance management systems to ensure staff are using strategies outlined in a behaviour support plan • Provide critical incident debriefing for all involved parties when necessary

Proficient or above Behaviour Support Practitioner

Knowledge: Implementation	Skills: Implementation	Service provider and Implementing Provider Considerations across all Practitioner Levels
<ul style="list-style-type: none"> • Understand the critical people to include in implementation across diverse cultural contexts • Know different methods of giving feedback • Be aware of complex team dynamics and know strategies to manage these effectively • Understand the importance of incident debriefing practice 	<ul style="list-style-type: none"> • Provide education and training to an interdisciplinary team • Address barriers to implementation of a behaviour support plan • Identify the resilience, capacity and sustainability of implementers and make appropriate plan adjustments to take these into consideration • Provide implementers with information on ethical reactive strategies 	

Knowledge: Implementation	Skills: Implementation	Service provider and Implementing Provider Considerations across all Practitioner Levels
	<ul style="list-style-type: none"> • Provide implementers with information on risks and consequences of non-compliance with implementation • Train implementers in escalation mechanism and emergency response plans • Identify appropriate methods of feedback for those implementing a behaviour support plan • Facilitate team building to enable successful implementation of a behaviour support plan • Adjust a behaviour support plan as required • Identify incident debriefing supports available to implementers • Provide training on facilitating critical incident debriefing to appropriate members of the implementing team if required 	

See:

- *NDIS (Provider Registration and Practice Standards) Rules 2018*: Schedule 1; Schedule 3, clause 6; and Schedule 4, clause 6
- *NDIS (Restrictive Practices and Behaviour Support) Rules 2018*: Section 21
- *NDIS (Quality Indicators) Guidelines 2018*: Part 2, Sections 41 and 50

5. Know it Works

An important part of evidence-based practice is systematic monitoring and evaluation. This ensures ethical and accountable practice that meets the needs of the person. Effective monitoring and evaluation includes the capacity to distinguish between the effectiveness of a behaviour support plan and the effectiveness of its implementation. A behaviour support plan is a live document where results are incorporated, reviewed and updated.

Core Behaviour Support Practitioner

Knowledge: Know it Works	Skills: Know it Works	Service Provider and Implementing Provider Considerations across all Practitioner Levels
<ul style="list-style-type: none"> • Understand the rationale of a behaviour support plan and its uses • Understand the importance of continuous review and methods to conduct reviews • Maintain professional learning to keep abreast of current knowledge of best practice • Know the indicators to include and how and when to check the effectiveness of a behaviour support plan 	<ul style="list-style-type: none"> • Re-assess the situation (that is, any changes to context where behaviours of concern occur, or the participant’s environments) • Review adherence to implementation (that is, are those supporting the participant implementing the strategies in the way they were trained?) • Use data collected by implementers to monitor the implementation of a behaviour support plan (compared to baseline) in a whole-of-life context, and provide feedback to implementers • Reflect on external factors that may impact on the efficacy of positive behaviour support • Build and utilise collaborative partnerships to evaluate a behaviour support plan • Coordinate a formal review meeting 	<ul style="list-style-type: none"> • Support staff to collect ongoing data to evaluate the effectiveness of a behaviour support plan • Provide information on how consistently staff are implementing a behaviour support plan that may be affecting evaluative data • Support the person and other key people to contribute to a behaviour support plan’s evaluation and review meetings • Use the person’s outcomes as performance indicators • Ensure mechanisms are in place to collect and report on incident report data

Knowledge: Know it Works	Skills: Know it Works	Service Provider and Implementing Provider Considerations across all Practitioner Levels
	<ul style="list-style-type: none"> • Inform changes to a behaviour support plan as required • Track progress of a behaviour support plan using the indicators of effectiveness 	

Proficient or above Behaviour Support Practitioner

Knowledge: Know it Works	Skills: Know it Works	Service Provider and Implementing provider Considerations across all Practitioner Levels
<ul style="list-style-type: none"> • Possess a depth of understanding about systematic monitoring and evaluation • Identify the reasoning behind what is and what is not working in a behaviour support plan 	<ul style="list-style-type: none"> • Have robust and effective ways to measure and evaluate the outcomes of agreed goals • Review the resilience, capacity and sustainability of those implementing a behaviour support plan • Coordinate team participation in review if appropriate • Identify sources of information to verify a behaviour support plan's effectiveness within the cultural context • Use data to formulate ideas about the reason(s) behind a behaviour support plan's effectiveness 	

Knowledge: Know it Works	Skills: Know it Works	Service Provider and Implementing provider Considerations across all Practitioner Levels
	<ul style="list-style-type: none"> • Use an evidence-based tool to evaluate the quality of a behaviour support plan, such as the BIP-QEII • Apply and interpret measures that capture an increase in behaviours or use of restrictive practice, or decrease in quality of life • Implement a range of strategies that address any efficacy limitations of implementation 	

* BIP-QEII (formerly known as BSP-QEII; see McVilly, Webber, Paris & Sharp, 2012).

See:

- *NDIS (Provider Registration and Practice Standards) Rules 2018*: Schedule 1; Schedule 3, clause 7; and Schedule 4, clauses 7 and 8
- *NDIS (Restrictive Practices and Behaviour Support) Rules 2018*: Part 3, Division 2, section 21
- *NDIS (Quality Indicators) Guidelines 2018*: Part 2; and sections 42, 51 and 52

6. Restrictive Practice

A restrictive practice is defined in the *National framework for reducing and eliminating the use of restrictive practices in the disability service sector* as being “any practice or intervention that has the effect of restricting rights or freedom of movement or a person with disability, with the primary purpose of protecting the person or others from harm” (Australian Government, 2014, p. 4).

Behaviour support practitioners may encounter existing restrictive practices being used with a person or may be required to recommend a time-limited restrictive practice (with fade-out strategies) as an option of last resort in an interim or comprehensive behaviour support plan. This section details the knowledge and skills in the use of restrictive practices that a behaviour support practitioner must demonstrate to comply with the *NDIS Act (2013)* (Cth)

Note: It is expected that a core practitioner would have a depth of knowledge regarding restrictive practice; however, the inclusion of regulated restrictive practices in a person’s behaviour support plan is a skill set associated with a behaviour support practitioner who is rated proficient or above.

Core Behaviour Support Practitioner

Knowledge: Restrictive Practice	Skills: Restrictive Practice	Service Provider and Implementing Provider Considerations across all Practitioner Levels
<ul style="list-style-type: none"> • Understand that the use of a restrictive practice must be authorised according to the relevant state or territory laws and policies • Understand that regulated restrictive practices include seclusion, and chemical, mechanical, physical and environment restraints • Understand that a restrictive practice can represent serious human rights violations 	<ul style="list-style-type: none"> • Consult with the person and/or obtain consent (as required by relevant state or territory laws and policies) • Prescribe restrictive practices under the direct supervision of a person at a practitioner level of proficient or above 	<ul style="list-style-type: none"> • Report any emergency or unauthorised restrictive practice to the NDIS Commission and undertake a review of the incident • Ensure appropriate policies and procedures are in place

Knowledge: Restrictive Practice	Skills: Restrictive Practice	Service Provider and Implementing Provider Considerations across all Practitioner Levels
<ul style="list-style-type: none"> • Understand the <i>National Framework for Reducing and Eliminating the Use of Restrictive Practices in the Disability Service Sector</i> (Australian Government, 2014) • Understand that a restrictive practice is an option of last resort, occurs in limited circumstances, should be used for the shortest period of time and is the least restrictive option available • Understand that a restrictive practice must only be used in accordance with a behaviour support plan • Understand relevant state or territory laws and policies regarding authorisation and consent to the use of regulated restricted practices • Understand that some restrictive practices are prohibited in some states and territories • Understand that the use of a restrictive practice can only be in response to risk of harm to the person or others • Understand that a behaviour support plan that includes restrictive practices, it must be lodged with the NDIS Commission 		<ul style="list-style-type: none"> • Ensure restrictive practice is only used as part of a behaviour support plan developed by, or under the direct supervision of, a behaviour support practitioner who is rated proficient or above • Check that any restrictive practice used is the least restrictive response possible in the circumstances, that it reduces the risk of harm to the person or others, and is used for the shortest possible time to ensure the safety of the person or others • Follow state or territory laws and policies for the authorisation to use a restrictive practice • Lodge a behaviour support plan and the authorisation evidence for regulated restrictive practice with the NDIS Commission and comply with monthly reporting requirements

Knowledge: Restrictive Practice	Skills: Restrictive Practice	Service Provider and Implementing Provider Considerations across all Practitioner Levels
<ul style="list-style-type: none"> Understand the Zero Tolerance Framework (National Disability Services, 2018) and associated resources 		

Proficient or above Behaviour Support Practitioner

Knowledge: Restrictive Practice	Skills: Restrictive Practice	Service Provider and Implementing Provider Considerations across all Practitioner Levels
<ul style="list-style-type: none"> Understand that restrictive practices must be in proportion to the potential consequences of the risk of harm 	<ul style="list-style-type: none"> Work with the person, their informal supports and service provider to develop a behaviour support plan that is based on a functional behaviour assessment Provide a statement of intent to include a restrictive practice in a behaviour support plan, where required, in accordance with subsection 20(4) of the <i>NDIS (Restrictive Practices and Behaviour Support) Rules 2018</i> Ensure a behaviour support plan contains strategies that are proactive, outcomes-focused, person-centred, and that address the person's needs and behaviours of concern Design a staged plan of fading strategies to reduce or eliminate the use of restrictive practices with the person over time 	

Knowledge: Restrictive Practice	Skills: Restrictive Practice	Service Provider and Implementing Provider Considerations across all Practitioner Levels
	<ul style="list-style-type: none"> • Lodge a behaviour support plan with restrictive practices with the NDIS Commission for practices to be monitored • Supervise a core practitioner • Implement strategies that can be removed through shaping, fading and other mechanisms 	

See:

- *NDIS (Provider Registration and Practice Standards) Rules 2018*: Schedule 1; Schedule 3, clauses 4 and 8; and Schedule 4, clauses 4, and 7 to 9
- *NDIS (Restrictive Practices and Behaviour Support) Rules 2018*: Sections 8 to 15, and 18 to 24
- *NDIS (Quality Indicators) Guidelines 2018*: Part 2; and Sections 39, 43, 48, 51 and 53

7. Continuing Professional Development and Supervision

Continuing Professional Development (CPD) is a commitment to maintain, improve and broaden personal and professional knowledge, expertise and competence. Ongoing CPD is key for behaviour support practitioners to ensure their practice reflects current best practice.

In addition to CPD, the NDIS Commission recognises supervision as a fundamental mechanism for strengthening practice and building capability of the behaviour support workforce. Under the PBS Capability Framework, it is expected that behaviour support practitioners at all levels receive supervision. Supervision is a term used differently across the range of settings in which behaviour support practitioners will be working and thus may be provided in a mix of modalities.

Supervision is used to develop a behaviour support practitioner's knowledge, skills, confidence, competence and professionalism. A behaviour support practitioner should be able to show that they have received supervision. Depending on the level of the behaviour support practitioner, supervision may be:

- Direct professional supervision provided by a behaviour support practitioner with a higher level of skill and knowledge
- Peer supervision focused on reflective practice
- Managerial supervision
- Supervision that is mandated or recommended by professional registration bodies.

Core Behaviour Support Practitioner

Knowledge: CPD and Supervision	Skills: CPD and Supervision	Service Provider and Implementing Provider Considerations across all Practitioner Levels
<ul style="list-style-type: none"> • Understand the importance of self-directed, lifelong learning, including a commitment to ongoing professional development • Understand the importance of behaviour skills training • Understand the importance of incorporating learning from supervision into practice 	<ul style="list-style-type: none"> • Set professional development goals • Implement an annual professional development plan that is regularly reviewed and updated (which includes goals related to skills and knowledge within this framework) • Participate in supervision to identify personal and professional goals and take steps to achieve them • Prioritise, prepare for and engage actively in supervision • Openly express and discuss expectations and needs related to supervision • Openly identify and discuss practice issues which are challenging, and skills and knowledge that need developing • Work to develop trust in the supervision relationship • Take responsibility for seeking help when required • Regularly review the supervision relationship and provide honest feedback 	<ul style="list-style-type: none"> • Encourage a culture of continuous improvement of the workforce, including supervision and professional development planning • Create policies and procedures which establish aims, structures and processes for supervision • Provide access to (internal or external) staff who can provide high-quality behaviour support supervision • Allow staff time to engage in supervision • Clearly articulate the modalities of supervision available to staff (including any compulsory components) • Provide clear information about professional development opportunities for staff, including compulsory training, time allowances to attend professional development and any budgetary considerations

Proficient or above Behaviour Support Practitioner

Knowledge: CPD and Supervision	Skills: CPD and Supervision	Service Provider and Implementing Provider Considerations across all Practitioner Levels
<ul style="list-style-type: none"> • Thoroughly understand the relevant skills to receive or provide supervision • Maintain up-to-date knowledge of the regulatory context and evidence-based practice 	<ul style="list-style-type: none"> • Participate in or facilitate a culturally safe and respectful environment • Establish joint expectations within a supervision relationship • Allow time to develop trust and rapport within a supervision relationship • Use a supervision contract • Maintain supervision documentation • Participate in or provide supervision in the agreed format • Seek or be available to provide support between formal supervision sessions, especially for newer behaviour support practitioners • Seek or provide feedback (timely, specific and constructive) as part of the supervision relationship • Participate in or conduct an evaluation of the effectiveness of supervision 	

Knowledge: CPD and Supervision	Skills: CPD and Supervision	Service Provider and Implementing Provider Considerations across all Practitioner Levels
	<ul style="list-style-type: none"> • Participate in or facilitate reflective practice • Utilise supervision sessions for the purpose of debriefing when required • Discuss or share knowledge of the regulatory context and evidence-based practice 	

See: *NDIS (Quality Indicators) Guidelines 2018*: Part 2; Part 4, section 38; and Part 5, sections 47 and 50

References

- Australian Government. (2014). *National framework for reducing and eliminating the use of restrictive practices in the disability service sector*. Retrieved from <https://www.dss.gov.au/sites/default/files/documents/04_2014/national_framework_restrictive_practices_0.pdf>.
- Birgden, A. (2018). *NDIS Quality and Safeguards Commission behaviour support competency framework: Version 1*. [Draft May 2018]. Document contracted by the Australian Government Department of Social Services, Quality and Safeguards Policy Branch, Canberra, ACT.
- Carr, E.G., Dunlap, G., Horner, R.H., Koegel, R.L., Turnbull, A.P., Sailor, W., et al. (2002). Positive Behaviour Support: evolution of an applied science. *Journal of Positive Behaviour Interventions*, 4(1), 4–16. <<https://doi.org/10.1177/109830070200400102>>.
- Chan, J., French, P., & Webber, L. (2011). Positive behavioural support and the UNCRPD. *International Journal of Positive Behavioural Support*, 1(1), 7–13.
- Gore, N.J., McGill, P., Toogood, S., Allen, D., Hughes, J.C., Baker, P., et al. (2013). Definition and scope for positive behavioural support. *International Journal of Positive Behavioural Support*, 3(2), 14–23.
- McVilly, K., Webber, L., Paris M., & Sharp, G. (2012). Reliability and utility of the Behaviour Support Plan Quality Evaluation tool (BSP-QEII) for auditing and quality development in services for adults with intellectual disability and challenging behaviour. *Journal of Intellectual Disability Research*, 57(8), 716–27. <<https://doi.org/10.1111/j.1365-2788.2012.01603.x>>.
- Nankervis, K., Lambrick, F., & Koelink, A. (2017). *Service standards 2016/2017. Supplementary module 2 — Behaviour support*. [Unpublished].
- National Disability Insurance Scheme Act 2013* (Cth). Retrieved from <<https://www.legislation.gov.au/Details/C2013A00020>>.
- National Disability Insurance Scheme (Provider Registration and Practice Standards) Rules 2018*. Retrieved from <<https://www.legislation.gov.au/Details/F2018L00631>>.
- National Disability Insurance Scheme (Quality Indicators) Guidelines 2018*. Retrieved from <<https://www.legislation.gov.au/Details/F2018N00041>>.
- National Disability Insurance Scheme (Restrictive Practices and Behaviour Support) Rules 2018*. Retrieved from <<https://www.legislation.gov.au/Details/F2018L00632>>.
- National Disability Services. (2016). *Speaking up about safety: Perspectives of people with disability on personal safety at home, in the community and in disability services*. Retrieved from <<https://www.nds.org.au/resources/zero-tolerance>>.
- National Disability Services. (2018). *Zero tolerance framework*. Retrieved from <<https://www.nds.org.au/resources/zero-tolerance>>.

- National Institute for Health and Care Excellence (NICE). (2015). *Challenging behaviour and learning disabilities: Prevention and interventions for people with learning disabilities whose behaviour challenges*. Retrieved from <<https://www.nice.org.uk/guidance/ng11>>.
- NDIS Quality and Safeguards Commission. (2018). *Positive Behaviour Support: A scoping review of best practice frameworks*. Internal document developed by NDIS Commission Behaviour Support Research Team, Penrith, NSW.
- Positive Behavioural Support Coalition UK. (2015). *Positive Behavioural Support: A competence framework*. Retrieved from <www.pbsacademy.org.uk>.
- Singer, G.H., & Wang, M. (2009). The intellectual roots of positive behavior support and their implications for its development. In *Handbook of positive behavior support* (pp. 17–46). Springer, Boston, MA.
- States and Territories' Behaviour Support Working Group. (2018a). *Draft competency assessment methodology*. [Internal draft document based on consultation with working group members and collated by DSS Quality and Safeguards Policy Branch].
- States and Territories' Behaviour Support Working Group. (2018b). *Feedback on the behaviour support competency framework and responses from Dr A. Birgden and NDIS Commission national behaviour support team*. [Internal documents based on feedback collated by Commonwealth DSS Quality and Safeguards Policy Branch from meetings and correspondence from working group members].