

DOES THE PROVIDER NEED A POSITIVE BEHAVIOUR SUPPORT PLAN (PBSP)?

A Positive Behaviour Support Plan is a plan to help providers change what they do and help teach new skills.

A Positive Behaviour Support Plan needs to increase the satisfaction a person has in their life and help reduce any behaviour that hurts the person or other people.

What are the steps for developing a positive behaviour support plan?

Step 1: Does my provider need a plan?

A provider might need a Positive Behaviour Support Plan if there are behaviours of concern. Behaviours of concern are behaviours that hurt the person who the plan is written for or any other person.

Step 2: Who writes the Plan?

Someone who is experienced (the Practitioner) writes the Positive Behaviour Support Plan.

The plan helps the provider know how to change what they do and to teach new skills.

Step 3: Who can give information to go in the plan?

Anyone who has information that might help or is providing support to the person the plan is about. The person or their Guardian says that its ok for the Practitioner to speak others about the plan.

Step 4: How do I know what goes in the plan?

The Practitioner does assessments to find out the reason why a person uses a behaviour. This is called a Functional Behavioural Assessment.

For NDIS participants, the Practitioner might develop an 'interim' or short-term plan for supports to use while assessments are done.

Based on the assessments the Practitioner writes the plan. The Practitioner will talk to the person and their supports about the plan.

Step 5: Who approves and registers a plan?

If the PBSP has restrictive practices, the provider needs the plan Approved by a Positive Behaviour Support Panel and then Registered by the Senior Practitioner.

If the person is an NDIS participant, the Practitioner needs to give the plan and the Registration number of the plan to the NDIS.

Step 6: How does the plan get used?

Anybody who is supporting the person should be following the plan. Everyone does what the plan says they should do.

Step 7: What happens when a restrictive practice is used?

The Provider checks that everyone is ok and gets help if they need to. Once they know that everyone is safe, the Provider checks to see if everyone did what the plan says they should do.

If the plan needs to be changed, the Provider can ask the Practitioner for help.

Anytime a restrictive practice is used, the provider needs to tell the Senior Practitioner.

Step 8: How often does the plan get reviewed?

Everyone checks in regularly to make sure the plan is working. This can be anytime there is a team meeting, or when things change.

If you want to have your plan reviewed, you can ask for this to be done.

The law says that a plan must be reviewed at least every 12 months.

[Link through to flow chart](#)