

Freedom From Restriction Communiqué *June 2009*

Where to From Here?

South Australia needs to reduce or eliminate the use of seclusion or restraint. This was the take home message of the “Freedom From Restriction: - “Where To From Here?” half day conference held on the 20th May 2009. Sponsored by the Australasian Society for the Study of Intellectual Disability (ASSID), South Australian Council for Intellectual Disability (SACID) and, Flinders University, the conference explored historical and current experiences, legislation, practice and evidence in relation to the use, reduction and/or elimination of restraint. While there are rare exceptions where restraint might have useful and therapeutic application, its overall use throughout history and currently has largely had negative and adverse consequences for people living with disability. The conference was an opportunity for those working in the South Australian disability sector, as well as people living with disability, to hear from Dell Stagg (President SACID), Dr Jeffrey Chan (Senior Practitioner, Department of Human Services, Victoria), Dr John Brayley (Public Advocate, South Australia), and Richard O’Loughlin (President of the South Australian Branch ASSID) on current local and national political and clinical perspectives.

(Left to right: John Brayley, Jeffrey Chan, Stephen Wade, and Richard Bruggemann)



not only within accommodation and community settings but also in schools and hospitals. We needn’t look too far to see examples of restrictive practice within South Australia. For example, in Adelaide Now (April 2009) it was reported children living with disability attending an Adelaide Hills Primary School were dressed in fluoro vests and sent for recess and lunch to a “caged” playground for their “safety”. There are many more examples of a significant number of people living with disability or mental illness who are held in hospital beds when their treatment is complete; simply because there is nowhere else for them to go (The Independent Weekly, May 2009). Furthermore, there are a significant number of people living with intellectual disability who exhibit challenging or aggressive behaviours who are more likely to have individuals who work or support them, employ physical, mechanical, chemical, or psycho-social restraint or seclusion as a means of managing these behaviours.

Restrictive Practice

South Australia needs a new Disability Act that offers more protection for people living with disability. No more reviews, we need a new Act. The new Act should reflect the need for a Senior Practitioner in South Australia who has jurisdiction and legislative influence

Community Visitors & Office of the Senior Practitioner



(Dell Stagg, President SACID)

In her opening statement, Dell emphasised how the term 'Restrictive Practice' is a fancy word for ABUSE. Dell advocated that a new Disability Act for South Australia is needed: an Act which includes the legislative and practical support for a Community Visitors Scheme and an Office of the Senior Practitioner within South Australia. Such legislation and strategies would be in accordance with the 'Convention of the Rights of Persons with Disability' and provide safeguards to ensure that children and adults living with intellectual disability have freedom from exploitation, violence and abuse.

Systems Restriction

Other states and countries have legislative support for individualised funding programs. Dell urged South Australia to provide people living with disability the choice of Self Directed Supports and Services funding. In South Australia our system is set up for funding to be provided to service providers only and this is a restriction to self determination and choice for people living with disability.

Victorian Perspective

Dr Jeffrey Chan, Victorian Senior Practitioner, from the Office of The Senior Practitioner informed that the Victorian Disability Act 2006 was used to establish the Senior Practitioner role which became effective from July 2007. The aim of the Act and the Senior Practitioner role is to ensure the rights of people living with a disability who are subject to restrictive interventions and compulsory treatments, are protected and that treatment standards meet compliance.



Key Drivers for Change in Victoria

According to Jeffrey the key drivers for change in Victoria were the:

1. United Nations Convention on the Rights of People with Disabilities 2006,
2. Disability Act 2006 (Victorian),
3. Charter for Human Rights and Responsibilities 2006 (Victorian).

It is commonly accepted that challenging behaviour does not occur in a vacuum, it occurs in the context of relationships, the environment and a complex interplay of biological, sociological and psychological factors. Jeffrey encourages service providers to look at their own practice and question whether or not they continue to engage in restrictive practices because that is what they historically have always done? There is extensive evidence of both the significant risks to staff and people living with disability when restraint is applied and also the benefit to the lives of people living with disability and those who support them when strategies which support the reduction and elimination of restraint are effectively implemented and governed. Evidence, research, practice and experience in Victoria have demonstrated the effectiveness of a Senior Practitioner who has significant legislative powers, in the IMPLEMENTATION of key strategies targeting:

- Advancing disability support and practice
- Building partnerships and local capacity
- Creating leaders

(Jeffrey Chan, Senior Practitioner)

Ongoing data collection and timely reporting back of the meaning of the data is an essential ingredient to inform the process and make change.

Where to for South Australia?

Jeffrey commented that as a collective, people interested in creating change in the area of restrictive practice are part of a significant movement in South Australia's history to "implement" change. We need to:

- Better understand the context of the problem.
- Collaboratively talk about the meaning



of dignity and justice for people with disabilities that present with behaviours of concern and move forward.

- Recognise the ways we are not doing this.
- Recognise the person with a disability, who is presenting with challenging behaviour, as a person needing support.
- Look at our current practices, interventions and **IMPLEMENT** change that is less restrictive.

This involves educating everyone and voicing what change is needed in South Australia. Jeffrey concludes "To reduce or eliminate restraint, a significant culture of change is required and systems change is required".

Key Aspects for South Australia

(John Brayley, Public Advocate South Australia)

Locally, John Brayley, Public Advocate, points out that within the South Australian context the use of restrictive practices is often attributed to the "mental incapacity" of the individual however in many, if not most instances, it reflects the "system's incapacity" to provide evidence based service. For this reason the use of restrictive practices requires regulation, transparency and a strict approval process. John proposes that the key aspects to reducing or eliminating the use of seclusion or restraint require:

- Respect and engagement of people living with disability or mental illness,
- Transparency and reporting of data,
- Rigorous follow up of all instances of using restraint or seclusion, and
- A national approach to develop communities of practices.

South Australia needs to work toward creating 'POSTIVE FREEDOM' in supporting individuals. Positive freedom provides opportunity, community participation and choice. This will be facilitated by the provision of support services and professional care which is accessible and effective and most importantly wanted by the consumer; instead of restriction, restraint, compulsion, direction, unwanted interventions and loss of autonomy. In summary, John advocates that protecting the rights of people living with a disability inevitably leads to better outcomes for these individuals and the community as a whole. In many instances an economic benefit can be demonstrated if money is diverted from detaining and restraining, which has no long term benefit, to the provision of accommodation, therapeutic and support services.



(Richard O'Loughlin, President ASSID, South Australia)

- Need to look at broad contextual issues not just episode of care. We do need to see it as a change in our belief systems.
- People living with disability, staff, organisations, agencies and government need to work more collaboratively.

Recommendations

Richard O'Loughlin facilitated an audience discussion on the topic "Where to From Here?" The following is a summary of some personal views expressed on the day:

- Need to create a human rights culture.
- 20 years ago SA punched well above its own weight now we are a waste land. Staff are bothered about chemical restraint, physical restraint. How do we get it onto the political agenda?
- SA needs to come out of the darkness and re-emerge as practice leaders because this is where we were 20 years ago.
- People who can help with disability issues are people living with disability themselves. Ask people living with a disability what they want.
- What is missing is access to allied health in the adult accommodation setting. Need for assessment and treatment. Implementation of assessments is also problematic; we need a stronger focus on implementation after assessment reports.
- We need proper and better training for developmental psychiatrists and better advocacy.
- Many staff often find themselves working in direct care roles; need to look at high levels of support needs. Making sure there is more professional support and that direct care staff receive the support, training and role models they need to provide best quality service.

Julia Farr Association (JFA) project on Restrictive Practices and Safeguards

JFA is about to embark on a significant project on Restrictive Practices and Safeguards. This project will investigate the current use and value of restrictive practices within disability services in Australia and globally, and propose a way forward which features appropriate safeguards, is person-centred, ethically sound and considered best practice in Australia.

JFA will engage key people, research and consult widely within the sector, in order to develop a position paper which will outline acceptable standards and strategies for practice in Australia, and establish requirements for change.

Anyone interested in contributing or being involved in this exciting piece of work should contact Shelley Hoppen at JFA, telephone,

(08) 3738306 or email shelleyh@juliafarr.org.au



(Left to right: Tammy Hendy, Laura Morris, Johanna de Kort and Leigh Wallis)

We thank Leigh Wallis, Tammy Hendy, Laura Morris, Johanna deKort and Richard Bruggemann for organising the conference on Restrictive Practice.