

Positive Behaviour Support and Restrictive Practices
Disability Connect Queensland

GUIDE: How to notify the department of a restrictive practice approval or consent to the use of Restrictive Practices (Form 6-4)

Online Data Collection (ODC): Restrictive Practice Approvals

1. Login to ODC using the provided **Data Entry Operator** username and password.
<https://secure.disability.qld.gov.au/ngo>

Queensland Government
Department of Communities, Disability Services and Seniors
Department of Child Safety, Youth and Women

Secure Services Gateway

Welcome to the Secure Services Gateway for the Department of Communities, Disability Services and Seniors and the Department of Child Safety, Youth Justice and Women.

The Secure Service Gateway manages your access to various web based systems. All Login on the systems are monitored and logged. Unauthorised attempts to access the web based systems are monitored. Any person found to be an unauthorised user may be prosecuted

Login

Username:

Password:

[Forgotten your password](#)

2. Click on **Restrictive Practice** In the left hand navigation menu, then click on **[+]** to expand the options, then click on **Restrictive Practice Service User** to get started.

Queensland Government
Department of Communities, Disability Services and Seniors

[Help](#)

Online Data Collection

Administration
Notifying the department of an Approval for restrictive practices - Important changes from 01 July 2... **Last updated:** 01/07/2019

Administration
Allows for administration of agency, service type outlet and ODC user details.

Initialisation
Setup for a first time user.

Resources
Collection of documents with helpful guidelines for system users.

Service Type Outlet
Data entry of service type outlet details for your agency each quarter.

Service user
Search and view service user, services received and restrictive practices information for your agency each quarter.

Restrictive Practice
Restrictive Practice Service User
Restrictive Practice Service Outlets

Administration
[Resources](#)
[Service User](#)

Reports

Internal Reports

Bulk Import

Other Software Systems Import

What's new?

3. Enter details in the fields available and click on **Search**. Click on the service user's **surname** which has a hyperlink to access **Service User Details**.

Online Data Collection [Online Data Collection > Restrictive Practice > Search Restrictive Practice Service User](#)

Search Restrictive Practice Service User

Search for: Surname: t

[Search again](#)

Surname	First Name	NDIS ID	ID (formerly BIS ID)	DOB	Gender	Postcode	Agency
test	test	987654321	9000-0626	13 Jun 2000	MALE	4000	

[Administration](#)
[Resources](#)
[Service User](#)
[Restrictive Practice](#)
[Restrictive Practice Service User](#)
[Restrictive Practice Service Outlets](#)
[Reports](#)
[What's new?](#)

4. In the **Service User Details** section, click on **Form 6-4: Notification of Approval or Consent to the Use of Restrictive Practices**.

Gender:
Service User
Declaration Status:

[Update Service User Details](#)

[Enter Date of Death](#)

Addresses

[Add New Address](#)
When a new address is declared, the current address will automatically be end-dated the day before the "From Date" of the new address.

Include deleted records

Residential Address Line 1	Residential Address Line 2	Suburb	State	Postcode	From Date	To Date	Declaration Status	
112 George St		Brisbane	QLD	4000	20 Jul 2021		Declared	Delete

Restrictive Practice Approvals/Consent

[Form 6-4: Notification of Approval or Consent to the Use of Restrictive Practices](#)

Include deleted records

Approval Type	Plan Date	Approval/Consent By	Approval Date	Expiry Date	Cessation Date	Declaration Status	

5. Complete **Approval/Consent details** and press **Next**.

[Online Data Collection](#) > [Service User](#) > [Service User Details](#) > Form 6-4

Form 6-4

When this form is to be used <ul style="list-style-type: none">• By a Relevant Service Provider, after receiving any approval for the use of restrictive practices, at a Service Outlet (Disability Services Act 2006, Section 195).• After each subsequent review and approval given for the use of restrictive practices.• To record appointment of, or all changes to, guardianship
How to complete this form <p>Under the <i>Disability Services Act 2006</i> a service outlet means a place at which disability services are provided.</p> <p>Limited restrictive practice approval means a restrictive practice approval other than-</p> <ul style="list-style-type: none">- a containment or seclusion approval; or- a short term approval given by the public guardian under the Guardianship and Administration Act 2000, chapter 5B, part 4. <ul style="list-style-type: none">• A relevant service provider is required to complete and return this form to the department within:<ul style="list-style-type: none">- 14 days if the limited restrictive practice approval is a short-term approval and given by the department or- 21 days after the consent to use of the restrictive practice is given by either a guardian for restrictive practice (general or respite) matter or an informal decision maker.• This form must be completed with contact details and an electronic declaration.
Your Privacy <p>The information on this form is being collected so Disability Services clinical teams can provide oversight and support in relation to the development, approval and use of positive behaviour support plans and restrictive practices. The collection is authorised by the <i>Disability Services Act 2006</i>. Information may be disclosed to the statutory bodies and non-government service providers involved in this process, as part of the oversight and support functions. All personal information will be handled in accordance with the <i>Information Privacy Act 2009</i>.</p>

Service User Details

Agency:	Primary Disability:
NDIS Id:	Indigenous Status:
ID (formerly BIS ID):	Culturally and Linguistically Diversed:
First Name:	
Surname:	
Date of Birth:	
Age:	
Gender:	
Service User Declaration Status:	

Approval/Consent details

An asterisk (*) indicates that an answer is required.

Select the approval type*

- Short Term Approval
- Positive Behaviour Support Plan
- Respite/Community Access Services Plan
- Chemical Restraint (Fixed Dose) as the only Restrictive Practice - Applicable only for Respite.

Who approved or gave consent to the use of Restrictive practice(s)

Approval/Consent By: *

Enter the period of Approval/Consent

Approval Date: *

Expiry Date: *

Note: The online version looks similar to the previous hard-copy format.

6. Click on **Add Restrictive Practice** link.

Service User [Online Data Collection > Service User > Service User Details > Form 6-4](#)

[Restrictive Practice](#)
[Service User](#)
[Service User Details](#)
[Restrictive Practice Summary](#)
[Return](#)

Form 6-4

Service User Details

Agency: Primary Disability:
 NDIS Id: Indigenous Status:
 ID (formerly BIS ID): Culturally and Linguistically Diversed:
 First Name:
 Surname:
 Date of Birth:
 Age:
 Gender:
 Service User Declaration Status:

Approval/Consent details

Approval Type:
 Approval/Consent By:
 Approval Date:
 Expiry Date:

Restrictive Practices

[Add Restrictive Practice](#)

Restrictive Practice	Additional Details (if applicable)

[Next](#) [Cancel](#)

7. Complete **Restrictive Practices** details. Multiple practices can be added by clicking on the **Add** button, then clicking the **Add Restrictive Practice** link.

Restrictive Practices

[Add Restrictive Practice](#)

Restrictive Practice	Additional Details (if applicable)
Restrictive Practice: <input type="text" value="Mechanical Restraint"/>	
Mechanical Device: <input type="text" value="Gloves / Mittens"/>	
If Other, please specify: <input type="text"/>	

- Bed Restraint
- Belt
- Clothing that restricts movement
- Gloves / Mittens
- Head gear
- One piece clothing suit
- Protective clothing
- Seat belt or Harness - other than for safe transport
- Splints
- Wheelchair seat belt
- Other

[Add](#) [Cancel](#)

8. When all authorised restrictive practices have been added, click on the **Next** button.

Restrictive Practices

[Add Restrictive Practice](#)

Restrictive Practice	Additional Details (if applicable)	
Mechanical Restraint	Gloves / Mittens	Delete
Restricted Access to Objects	Food	Delete

[Next](#) [Cancel](#)

- The next step is to add **Relevant Service Outlet Details**. Select as many locations as required from the available box and click **Add**. When complete, click on **Next**.

Relevant Service Outlet Details

Mechanical Restraint - Gloves / Mittens

Select the Service Outlet/s in this Agency approved for this Restrictive Practice

Selected test	Add	Available test 2
	Remove	

Restricted Access to Objects - Food

Select the Service Outlet/s in this Agency approved for this Restrictive Practice

Selected	Add	Available test test 2
	Remove	

[Add new Restrictive Practice Service Outlet](#)

Next Cancel

- Add details for **Appointment of a Guardian for Restrictive Practices (general or respite)**. This step will not display if the approval type selected is Short Term Approval.

Note: Existing guardian details that overlap with approval dates will be shown otherwise enter new guardian appointment details. A Guardian needs to be in place for the entire period of the approval.

Appointment of a Guardian for Restrictive Practices (general or respite)

The entire period of the Approval/Consent must be covered by one or more Guardian Appointments. If the existing Guardian Appointments do not cover the entire period, you may enter the new Guardian details below. If you proceed without entering new Guardian details, the dates of the Approval/Consent will be modified to align with the existing Guardian Appointment.

Guardian Name	Guardian Type	Appointed From	Appointed To	Cessation Date	Declaration Status
Public Guardian	Guardian for RP (General)				Declared

Enter new Guardian Appointment details if required

Guardian Name:

Guardian Type:

Appointed From:

Appointed To:

The Guardian Appointment must cover the entire period of the Restrictive Practice Approval. If the entire period is not covered, the dates of the Approval/Consent will be modified to align with the Guardian Appointment dates.

The Guardian Appointment period cannot exceed two years

When a new Guardian Appointment is entered, if there is an existing Guardian Appointment that extends beyond the Appointed From date of the new appointment, the existing record will be updated with a Cessation Date of the day before the new Appointed From date.

Next Cancel



11. The next step is to review, verify and click on **Submit**.

Form 6-4

Service User Details				
Agency:	Primary Disability:			
NDIS Id:	Indigenous Status:			
ID (formerly BIS ID):	Culturally and Linguistically Diversed:			
First Name:				
Surname:				
Date of Birth:				
Age:				
Gender:				
Service User Declaration Status:				

Approval/Consent details	
Approval Type:	Positive Behaviour Support Plan
Plan Date:	
Approval/Consent By:	Guardian for a restrictive practice (general) matter
Approval Date:	
Expiry Date:	

Appointment of Guardian Details				
Guardian Name	Guardian Type	Appointed From	Appointed To	Cessation Date
Public Guardian	Guardian for RP (General)	11 Oct 2021	10 Oct 2022	

Service Outlet and Restrictive Practice Details		
Service Outlet	Restrictive Practice	Additional Details (if applicable)
test	Mechanical Restraint	Gloves / Mittens
test	Restricted Access to Objects	Food

12. This notification will now be displayed as **'Submitted'** in the **Restrictive Practice Approvals/Consent** box within the **Service User Details** section.

Restrictive Practice Approvals/Consent

Form 6-4: Notification of Approval or Consent to the Use of Restrictive Practices

Include deleted records

Approval Type	Plan Date	Approval/Consent By	Approval Date	Expiry Date	Cessation Date	Declaration Status
Positive Behaviour Support Plan	11 Oct 2021	Guardian for a restrictive practice (general) matter	11 Oct 2021	10 Oct 2022		Submitted

13. The declaration process will now commence and a notification will be emailed to the **Authorising Agency Officer**.

Note: Implementing providers registered with the NDIS Commission are required to submit monthly reports to the NDIS Commission on the use of restrictive practices against the participant's current/ active positive behaviour support plan.