OBA-NRP-2026 | Version 1.0 | Issued 28/09/2026

Restrictive Practices and Behaviour Support Plans: 'Positive Behaviour Support' Appears Nowhere in the Rules

Programme syllabus

DOCUMENT CONTROL

- Programme: Restrictive Practices and Behaviour Support Plans: 'Positive Behaviour Support' Appears Nowhere in the Rules (OBA-NRP-2026)
- Audience: Participants, facilitators and quality staff
- Version 1.0 | Issued 28/09/2026 | Review due 28/03/2027
- Provider: OBA Nursing Academy

What this programme is about

Every induction, every team meeting and every position description in NDIS disability support speaks the same two phrases: POSITIVE BEHAVIOUR SUPPORT, and IMPLEMENTING PROVIDER. Neither appears in the NDIS (Restrictive Practices and Behaviour Support) Rules 2018. Not once, in twenty-four pages. The NDIS Commission's own web page on those Rules uses them SEVEN and EIGHTEEN times. What the Rules themselves say, THIRTY-THREE TIMES, is AUTHORISATION; and TWENTY-SIX TIMES, STATE OR TERRITORY. Read the instrument and it is not a document about behaviour support technique at all - it is a decision tree about whether the practice is authorised where you happen to be, who has to write which plan, and by when. And the Commonwealth supplies none of the authorisation: section 9 applies only IF your State or Territory has an authorisation process, and its note says that process may be legislation, or POLICY, or informed consent, or a guardianship tribunal, or one named officer. THIS IS NOT AN ARGUMENT THAT POSITIVE BEHAVIOUR SUPPORT DOES NOT MATTER - the Commission's Guide is built on it, and section 20 requires the plan to reduce and eliminate the need for the practice. It is an argument that a worker who has only been taught the ethics does not know the conditions: the two clocks that both run one month and six months from two different moments, the eight things that must be recorded and kept for seven years, and the one duty in the whole instrument that is conditional on nothing at all - lodging the plan with the Commissioner REGARDLESS of whether authorisation was required or obtained.

THE FINDING

THE TWO PHRASES THE WHOLE SECTOR SPEAKS IN - POSITIVE BEHAVIOUR SUPPORT, AND IMPLEMENTING PROVIDER - APPEAR ZERO TIMES IN THE RULES. WHAT THE RULES SAY THIRTY-THREE TIMES IS AUTHORISATION, AND TWENTY-SIX TIMES, STATE OR TERRITORY.

The count

Counted directly from the PDF of the NDIS (Restrictive Practices and Behaviour Support) Rules 2018 as made (F2018L00632, 24 pages), and counted a second time from the extracted text, case-insensitively and on stems.

Phrase	Occurrences in 24 pages
positive behaviour support	0
implementing provider	0
quality of life	0
human rights	0
dignity	0
Convention (on the Rights of Persons with Disabilities)	0
fade / fading	0
unauthorised	0
authorisation	33
State or Territory	26
comprehensive behaviour support plan	10
interim behaviour support plan	6
functional behavioural assessment	4
primary purpose	3
last resort	1
least restrictive	1

The same subject, three documents, two vocabularies	
In the RULES - the instrument that conditions your employer's registration	positive behaviour support ZERO. implementing provider ZERO. quality of life ZERO. human rights ZERO. dignity ZERO. AUTHORISATION THIRTY-THREE. STATE OR TERRITORY TWENTY-SIX.
On the COMMISSION'S OWN PAGE about those same Rules	positive behaviour support SEVEN. implementing provider EIGHTEEN. And 'quality of life' in the first sentence.
In the Commission's sixty-page REGULATED RESTRICTIVE PRACTICES GUIDE	behaviour support plan 74. reduce 42. positive behaviour support 20. elimination 18. eliminate 15. last resort 15. fade 13 - against AUTHORISATION THREE and STATE OR TERRITORY ONE.

So the sector's vocabulary and the instrument's vocabulary are almost disjoint. That is not a criticism of the Commission - its Guide is a good document and it is built on positive behaviour support, which is the right frame for the work. It is a warning about what a worker who has only ever been trained on the Guide does not know: the Rules are mostly about authorisation and jurisdiction, and those are the parts that condition their employer's registration and carry a civil penalty.

AND THE QUALIFICATION THAT TRAVELS WITH IT, EVERY TIME

AND HERE IS THE SENTENCE THAT HAS TO TRAVEL WITH THE COUNT, EVERY TIME IT IS SAID OUT LOUD. POSITIVE BEHAVIOUR SUPPORT IS NOT ABSENT FROM THE SCHEME - IT IS ABSENT FROM THIS INSTRUMENT. It is the name of registration group 0110, Specialist positive behaviour support, which sits under the NDIS (Provider Registration and Practice Standards) Rules 2018 - a different instrument, not read for this build. Section 20 of THESE Rules requires the plan to reduce and eliminate the need for the practice, to change the person's environment, and to consult the person; section 21 requires strategies that are evidence-based, person-centred and proactive. That IS positive behaviour support, described without the label. The count is a fact about which document says what. It is not permission to stop doing the thing.

AND THE ONE DUTY CONDITIONAL ON NOTHING

And this is where the two halves meet, in the last sentence of section 24. 'TO AVOID DOUBT, a behaviour support plan that contains a regulated restrictive practice MUST BE LODGED WITH THE COMMISSIONER, REGARDLESS of whether State or Territory authorisation (however described) is required to be obtained, or has been obtained, for the use of the practice.' The authorisation duty is conditional on your jurisdiction having a process. The lodgement duty is conditional on NOTHING.

What the Rules are about instead

NDIS Act 2013, section 9, as quoted in the Commission's Guide: a restrictive practice is 'ANY PRACTICE OR INTERVENTION THAT HAS THE EFFECT OF RESTRICTING THE RIGHTS OR FREEDOM OF MOVEMENT OF A PERSON WITH DISABILITY'.

Rules section 6, and read the opening words carefully: 'A restrictive practice IS A REGULATED RESTRICTIVE PRACTICE if it is or involves any of the following' - then the five. So the Act casts wide by effect, and the Rules pull a narrow set out of it for regulation. The note to section 6 says so: 'ONLY REGULATED RESTRICTIVE PRACTICES ARE COVERED BY THIS INSTRUMENT.'

AND THE THING ALMOST NOBODY KNOWS

- AND NOW THE THING ALMOST NOBODY KNOWS. 'Primary purpose' appears THREE times in the Rules, in THREE of the five definitions - chemical, mechanical and physical restraint. SECLUSION AND ENVIRONMENTAL RESTRAINT CARRY NO PURPOSE ELEMENT AT ALL.
- Which means a locked pantry, or a gate a person cannot open, or a room they are not able to leave, is a regulated restrictive practice ON ITS TERMS - whatever it was put there for, and however kindly it was meant. You do not get to ask what the primary purpose was, because the definition does not contain one. That is the exact opposite of the intuition a worker brings across from aged care, where all five practices are defined by their primary purpose.

Practice	The definition	The exclusion
(a) SECLUSION	'the sole confinement of a person with disability in a room or a physical space AT ANY HOUR OF THE DAY OR NIGHT where voluntary exit is prevented, OR NOT FACILITATED, or IT IS IMPLIED that voluntary exit is not permitted'	NO purpose element. NO stated exclusion.
(b) CHEMICAL RESTRAINT	'the use of medication or chemical substance for the PRIMARY PURPOSE of influencing a person's behaviour'	Excludes medication prescribed by a MEDICAL PRACTITIONER for the treatment of, or to enable treatment of, A DIAGNOSED MENTAL DISORDER, A PHYSICAL ILLNESS OR A PHYSICAL CONDITION.
(c) MECHANICAL RESTRAINT	'the use of a DEVICE to prevent, restrict, or subdue a person's movement for the PRIMARY PURPOSE of influencing a person's behaviour'	Excludes 'the use of devices for THERAPEUTIC OR NON-BEHAVIOURAL PURPOSES'.
(d) PHYSICAL RESTRAINT	'the use or action of PHYSICAL FORCE to prevent, restrict or subdue movement of a person's body, OR PART OF THEIR BODY, for the PRIMARY PURPOSE of influencing their behaviour'	Excludes 'the use of a hands-on technique in a REFLEXIVE way to guide or redirect a person away from potential harm/injury, consistent with what could reasonably be considered THE EXERCISE OF CARE towards a person'.
(e) ENVIRONMENTAL RESTRAINT	'which restrict a person's free access to ALL PARTS OF THEIR ENVIRONMENT, INCLUDING ITEMS OR ACTIVITIES'	NO purpose element. NO stated exclusion. And it is the shortest definition in the section.

Authorisation - the conditional duty

Section 9(1): 'This section applies IF a State or Territory HAS AN AUTHORISATION PROCESS (however described) in relation to the use of a regulated restrictive practice' and the provider provides supports in that State or Territory.

And the note to section 9 widens 'authorisation process' a very long way: 'An authorisation process may, for example, be a process under relevant State or Territory LEGISLATION OR POLICY or involve obtaining INFORMED CONSENT from a person and/or their guardian, approval from a GUARDIANSHIP BOARD OR ADMINISTRATIVE TRIBUNAL or approval from AN AUTHORISED STATE OR TERRITORY OFFICER.'

Five quite different things, any of which counts. Legislation. Or POLICY - which means the authorisation that conditions your employer's registration under Commonwealth law may live in a State department's policy document. Or informed consent from the person or their guardian. Or a tribunal. Or one named officer. 'However described' is not a throwaway phrase: it is the Commonwealth declining to specify, because the eight jurisdictions do it differently and it is not the Commonwealth's to specify.

AND THE ONLY OUTRIGHT PROHIBITION

- Section 8 is the other end of the same idea, and it is the shortest condition in the instrument. 'This section applies if A STATE OR TERRITORY PROHIBITS the use of a restrictive practice' and the provider provides supports there. Then: 'the provider MUST NOT USE the restrictive practice in relation to the person with disability.'
- So the only outright prohibition in the whole instrument is a prohibition the Commonwealth borrows from somebody else. The Rules do not ban any practice themselves. They ban what your jurisdiction bans - which means the question 'is this allowed?' has eight possible answers and none of them is in this document.

Part 2 as a decision tree

Part 2, Division 2 is six sections long, and it is not a list of duties - it is a DECISION TREE. Each section opens 'This section applies if', sets out a combination of circumstances, and attaches conditions to that combination. The two variables are: is it AUTHORISED, and is it IN A PLAN.

s	The situation	What the condition then requires
8	The State or Territory PROHIBITS the practice	MUST NOT USE IT. The only outright prohibition in the instrument.
9	The State or Territory HAS an authorisation process	The use, OTHER THAN A SINGLE EMERGENCY USE, must be authorised under it - and evidence lodged with the Commissioner as soon as reasonably practicable.
10	The practice IS in a behaviour support plan	Use it ONLY in accordance with the plan; and NOTIFY A SPECIALIST BEHAVIOUR SUPPORT PROVIDER if circumstances change so that the

		plan needs review.
11	AUTHORISED, but NOT in a plan, and the use will or is likely to continue	Take all reasonable steps to FACILITATE an interim plan within ONE MONTH of the first use, and a comprehensive plan within SIX MONTHS of the first use.
12	NEITHER in a plan NOR authorised - and authorisation IS required there	Obtain authorisation as soon as reasonably practicable; LODGE EVIDENCE of it; and the same one-month and six-month plans.
13	NOT in a plan, and authorisation is NOT required there	The same one-month and six-month plans. Nothing about authorisation, because there is none to get.

The useful thing about reading Part 2 as a tree is that it tells you which question to ask first, and it is not 'is there a plan'. It is: DOES MY JURISDICTION PROHIBIT THIS, AND DOES MY JURISDICTION HAVE AN AUTHORISATION PROCESS. Everything else in Part 2 branches off those two answers, and neither answer is in this instrument.

The two clocks

Whose	What the Rules say
Sections 11, 12 and 13 - the provider USING the practice	One month for an interim plan and six months for a comprehensive plan, both running from THE FIRST USE of the regulated restrictive practice. And the duty is to 'TAKE ALL REASONABLE STEPS TO FACILITATE the development of' the plan BY A SPECIALIST BEHAVIOUR SUPPORT PROVIDER - not to write it.
Section 19 - the SPECIALIST BEHAVIOUR SUPPORT PROVIDER	One month for an interim plan and six months for a comprehensive plan, both running from BEING ENGAGED to develop the plan. And this duty is to DEVELOP it, not to facilitate it.

Same two durations, two different triggers, two different verbs, two different duty-holders. Which produces the gap that swallows plans: a referral made three weeks after the first use leaves the specialist provider a full month from engagement, while the implementing provider's month expired days ago. Nobody has breached section 19. The provider using the practice has breached its own condition, and will be the one asked to demonstrate compliance.

Structure

	Module	Time	Keywords
Module 00	Orientation: Two Phrases the Sector Says and the Rules Never Do	22 min	positive behaviour support, implementing provider, authorisation
Module 01	Where the Law Is: One Act, Four Rules, and Which One Binds You	22 min	section 73H, section 73J, civil penalty
Module 02	Effect in the Act, Purpose in Only Three of the Five	22 min	section 9, effect, primary purpose
Module 03	The Five Regulated Restrictive Practices, and What Each One Excludes	22 min	seclusion, chemical restraint, mechanical restraint
Module 04	Authorisation Is Somebody Else's: the Conditional Duty and the Note That Widens It	22 min	section 9, however described, policy
Module 05	Part 2 Is a Decision Tree - Including the Branch With No Plan and No Authorisation	22 min	decision tree, section 10, section 11
Module 06	Two Clocks: One Month and Six Months, From Two Different Moments	22 min	one month, six months, first use
Module 07	Who Writes the Plan, and What 'Facilitate' Actually Obliges You To Do	22 min	section 17, section 18, suitable
Module 08	What Must Be In the Plan: Seven Conditions, and the One About a Life	22 min	section 20(3), environment, accessible format
Module 09	Reporting, Records, and Seven Years	22 min	monthly, short term approval, two weeks
Module 10	What Is Not Yours: Authorisation, the Plan, and the Practice Itself	22 min	not yours, section 24(2), regardless

How the hours are made up

Component	Minutes
Eleven modules - video, guide, knowledge check and workbook	242
Programme reading	94
Assessment - case studies and the summative	86

paper	
MEASURED TOTAL	444 min = 7.40 h
AWARDED	7.5 CPD hours

The awarded figure is the measured total rounded to the NEAREST half hour, including downwards. It is measured, not chosen, and it is never rounded up to reach a number.

Assessment

Summative	60 items, 80 per cent to pass, 2 attempts
Mandatory-correct	20 items must be answered correctly regardless of total score
Case studies	5 unfolding cases, 25 decision points, feedback on every option
Interactives	17, all formative

What the programme refuses to say

	Why
ANY STATEMENT THAT A PRACTICE IS AUTHORISED, AUTHORISABLE, LAWFUL OR PROHIBITED IN ANY JURISDICTION	THE PRIMARY ONE. The Rules defer to State and Territory processes twenty-six times and THIS BUILD READ NONE OF THEM. Section 9 applies only IF the jurisdiction has a process, and the note says it may be legislation, policy, consent, a tribunal or a named officer.
A BEHAVIOUR SUPPORT PLAN PRESENTED AS MAKING A PRACTICE LAWFUL OR AUTHORISED	A plan is not an authorisation. Section 8 prohibits what the jurisdiction prohibits and s21(3)(b) requires authorisation separately.
THE COUNT PRESENTED AS MEANING THAT POSITIVE BEHAVIOUR SUPPORT DOES NOT MATTER	The phrase is absent from THIS instrument, not from the scheme. Section 20 requires the plan to reduce and eliminate the need, change the environment and consult the person; s21 requires evidence-based, person-centred, proactive strategies.
ANY SUGGESTION THAT USE WITHOUT A PLAN OR AUTHORISATION IS ACCEPTABLE BECAUSE SECTION 12 DESCRIBES IT	Section 12 states what the registration condition requires NEXT. Section 8 still prohibits, s73J still exposes the provider to a civil penalty, and the use may be a reportable incident under Rules this build did not read.
A PURPOSE TEST APPLIED TO SECLUSION OR ENVIRONMENTAL RESTRAINT	'Primary purpose' appears in three of the five definitions. Seclusion and environmental restraint have no purpose element.
ANY PHYSICAL, MECHANICAL OR CHEMICAL TECHNIQUE, OR ANY INSTRUCTION ON HOW TO APPLY A RESTRICTIVE PRACTICE	The programme teaches no technique of any kind and nothing in it constitutes training or authorisation to apply anything.
A DECISION THAT A PARTICULAR MEDICINE FALLS INSIDE OR OUTSIDE THE CHEMICAL RESTRAINT EXCLUSION	It turns on a medical practitioner prescribing for the treatment of a diagnosed mental disorder, a physical illness or a physical condition. A prescriber's question.
A CLAIM THAT A PARTICULAR ACTION WAS REFLEXIVE, OR ADVICE THAT PLANNED HOLDS FALL INSIDE THAT EXCLUSION	The exclusion is for a hands-on technique used in a REFLEXIVE way to guide or redirect away from potential harm. It is not a category for planned restraint.
ANY REPORTABLE INCIDENT TIMEFRAME, CATEGORY OR THRESHOLD	The Incident Management and Reportable Incidents Rules 2018 were NOT READ for this build.
ANY QUALIFICATION, PROFESSION OR CREDENTIAL STATED AS REQUIRED OF AN NDIS BEHAVIOUR SUPPORT PRACTITIONER	Section 5: 'a person the Commissioner considers is suitable'. The Rules name none, and the Commission's suitability criteria were not read.
A DIAGNOSIS, A DIAGNOSTIC CRITERION, A BEHAVIOURAL INTERVENTION OR A MEDICATION	Out of scope entirely.
A VERDICT ON WHETHER ANY PROVIDER, PRACTITIONER, PLAN OR PRACTICE COMPLIES WITH ANYTHING	This is professional development, not a compliance sign-off. The sanction in s73J runs against the provider and the assessment is the Commission's.
A NAMED INDIVIDUAL, REAL PROVIDER, REAL	Every scenario is constructed, nobody is named,

PARTICIPANT, REAL PLAN OR REAL JURISDICTION IN A SCENARIO	and no scenario identifies a jurisdiction - because the first question the Rules ask is which one you are in.

Sources

Source	What it settles
NDIS (Restrictive Practices and Behaviour Support) Rules 2018	The five regulated practices, the authorisation conditions, the decision tree in Part 2, the two clocks, the contents of the plan, reporting and records. READ IN FULL for this build, in its AS-MADE version F2018L00632.
NDIS Act 2013	s9 the definition, s73H the power, s73J the civil penalty, s73ZK(4) reportable incidents, s181H the Commissioner's function. READ ONLY AS QUOTED in the Rules and the Commission's Guide.
Your own State or Territory authorisation instrument or policy	WHETHER THE PRACTICE IS PROHIBITED, AND WHETHER AND HOW IT CAN BE AUTHORISED. The single most important source for any real decision. NOT READ IN THIS BUILD, and not knowable from here.
NDIS (Incident Management and Reportable Incidents) Rules 2018	Whether and when a use of a regulated restrictive practice must be reported as a reportable incident. NOT READ IN THIS BUILD - so this programme states no reportable incident timeframe.
NDIS (Provider Registration and Practice Standards) Rules 2018, and the Quality Indicators Guidelines 2018	Registration group 0110 Specialist positive behaviour support, and the practice standards. NOT READ IN THIS BUILD.
Your provider's own policies, and the behaviour support plan itself	What you are actually required to do on a shift, and what the plan says. Binding on you, and present in none of the documents above.

#VERIFY-CURRENCY - WHAT WAS READ, AND WHEN

• WHAT WAS READ, AND WHEN. The NDIS (RESTRICTIVE PRACTICES AND BEHAVIOUR SUPPORT) RULES 2018 were read IN FULL on 28/09/2026, and the counts quoted in this programme were taken TWICE - once from the extracted text and once directly from the PDF, case-insensitively and on stems - because a count of ZERO is the kind of claim that has to be right. AN IMPORTANT LIMIT: the version read in full was the AS-MADE version, F2018L00632, an authorised version registered 18/05/2018. The current compilation is F2020C01087, compilation C01, in force 1 December 2020, amended by the NDIS Legislation Amendment (Transitioning Aged Care Providers) Rules 2020, Schedule 1 items 14 to 26. THAT COMPILATION WAS NOT READ PROVISION BY PROVISION. Its only amending instrument is titled 'Transitioning Aged Care Providers' and Part 4 of the Rules is the transitional Part, so the amendments are very likely confined there - but that was not confirmed section by section. Every section quoted here was cross-checked against the NDIS Commission's own current published description of the obligations and matched at every point tested. If you are about to rely on an exact form of words, open the current compilation.

- The counts quoted throughout were taken TWICE - once from the extracted text and once directly from the PDF, case-insensitively and on stems - because a count of ZERO is the kind of claim that has to be right.
- THE BIGGEST GAP IS DELIBERATE AND STATED EVERYWHERE. The Rules defer to State and Territory authorisation processes twenty-six times. THIS BUILD READ NONE OF THEM - not one Act, not one policy, not one tribunal practice direction. So nothing in this programme tells you whether a practice is authorised, authorisable or prohibited where you work.
- AND THE VERSION READ WAS THE AS-MADE ONE. F2018L00632, registered 18/05/2018. The current compilation is F2020C01087, C01, in force 1 December 2020, amended only by the NDIS Legislation Amendment (Transitioning Aged Care Providers) Rules 2020 - and Part 4 is the transitional Part, so the amendments are very likely confined there. THAT WAS NOT CONFIRMED SECTION BY SECTION.

SCOPE, CURRENCY AND THE LIMIT OF THIS PROGRAMME

- This programme is professional development. It states what the NDIS (RESTRICTIVE PRACTICES AND BEHAVIOUR SUPPORT) RULES 2018 say, quotes them where the words matter, and cites the section every time. IT IS NOT LEGAL ADVICE AND IT IS NOT CLINICAL ADVICE. It states NOTHING about what any State or Territory authorisation process requires, permits or prohibits - the Rules defer to those instruments twenty-six times and THIS BUILD READ NONE OF THEM. It contains no behavioural intervention, no medication, no physical technique and no de-escalation sequence. It does not decide whether any particular practice is a regulated restrictive practice, whether it is authorised, or whether anybody complies with anything. Decisions about an individual belong to that person, their guardian or decision-maker, the NDIS behaviour support practitioner, the provider, and the authorisation process where they live.
- WHAT WAS READ, AND WHEN. The NDIS (RESTRICTIVE PRACTICES AND BEHAVIOUR SUPPORT) RULES 2018 were read IN FULL on 28/09/2026, and the counts quoted in this programme were taken TWICE - once from the extracted text and once directly from the PDF, case-insensitively and on stems - because a count of ZERO is the kind of claim that has to be right. AN IMPORTANT LIMIT: the version read in full was the AS-MADE version, F2018L00632, an authorised version registered 18/05/2018. The current compilation is F2020C01087, compilation C01, in force 1 December 2020, amended by the NDIS Legislation Amendment (Transitioning Aged Care Providers) Rules 2020, Schedule 1 items 14 to 26. THAT COMPILATION WAS NOT READ PROVISION BY PROVISION. Its only amending instrument is titled 'Transitioning Aged Care Providers' and Part 4 of the Rules is the transitional Part, so the amendments are very likely confined there - but that was not confirmed section by section. Every section quoted here was cross-checked against the NDIS Commission's own current published description of the obligations and matched at every point tested. If you are about to rely on an exact form of words, open the current compilation.

SUPPORT AND WHERE TO RAISE SOMETHING

- NDIS Quality and Safeguards Commission - 1800 035 544. Concerns and complaints about NDIS supports and services.
- National Disability Abuse and Neglect Hotline - 1800 880 052. Reporting abuse or neglect of a person with disability.
- Lifeline - 13 11 14. 24-hour crisis support.
- You may stop this programme at any point and come back. Nothing is timed and there is no penalty.