



Policy Guidance: Monitoring and reviewing comprehensive behaviour support plans

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Purpose and scope

This document outlines the NDIS Commission's expectations of specialist behaviour support providers and NDIS behaviour support practitioners when monitoring and reviewing comprehensive behaviour support plans (BSPs). These expectations are consistent with good practice and the legislative requirements set out in the [National Disability Insurance Scheme \(NDIS\) Act 2013](#) and associated Rules.

This document complements the NDIS Commission's [behaviour support and restrictive practice policy, practice guides](#) and the [Positive Behaviour Support Capability Framework](#). It should be read in conjunction with the policy guidance on:

- [developing behaviour support plans](#)
- [undertaking behaviour support assessments \(including functional behaviour assessment\)](#)
- [the safe reduction and elimination of regulated restrictive practices](#)
- [working within your knowledge, skills and experience.](#)

Definitions of monitoring and review

Monitoring and reviewing a BSP helps ensure it remains fit-for-purpose and responsive to the person's needs. This includes confirming that strategies and supports:

- reflect the person's current needs
- enhance quality of life
- promote positive change
- demonstrate progress towards reducing and eliminating regulated restrictive practices.

What is 'Monitoring'?

Monitoring involves the ongoing, regular collection and analysis of relevant information, including incident report data. It focuses on whether the BSP is being implemented as intended, progress made towards identified goals, and any emerging risks or barriers requiring action.

Monitoring is a shared responsibility between the specialist behaviour support provider and those implementing the BSP. It should involve relevant stakeholders, such as NDIS and non-NDIS providers, therapists, medical practitioners, families and schools. Effective monitoring relies on timely communication, collaboration and appropriate documentation.

What is a 'BSP review'?

A BSP review is a systematic, evidence-informed examination of a person's comprehensive BSP to determine its continued relevance, accuracy, accessibility and effectiveness. It considers the content of the plan, how it is being implemented and the outcomes achieved.

The review acts as a safeguard. It helps to ensure the person's rights, dignity and autonomy are upheld and that supports continue to improve quality of life. Drawing on the practitioner's expertise, the review provides an opportunity to strengthen BSP quality in line with best practice and to support progress towards the reduction and elimination of restrictive practices.

A review may result in amendments to the BSP. This may include the co-design of new or revised strategies, supports, skill development programs, or fade out plans. The review ensures the plan remains person-centred, proactive and responsive to the changing needs of the person and their environment. It also supports compliance with legislative requirements.

What the NDIS Commission expects

It is expected that specialist behaviour support providers and NDIS behaviour support practitioners:

1. Monitor progress and the effective implementation of BSPs

Schedule and conduct monitoring activities to track whether the BSP is implemented as intended, assess progress towards identified goals and address any barriers to effective implementation. Monitoring may include regular engagement with the person, data collection, observations, meetings or other forms of communication with implementers. Monitoring activities should be planned, documented and proportionate to risk, complexity and need.

2. Undertake timely BSP reviews

Annual Reviews

Review comprehensive BSPs at least every 12 months while the plan is in force.

A BSP is considered **in force** from the date the NDIS behaviour support practitioner finalises its development. This may be recorded as the plan date (sometimes called the start date), the practitioner's dated signature on the plan, or the supervisor's dated signature (where relevant). Where multiple dates appear on the BSP, the latest date should be used as the date the plan came into force. Once a BSP is in force, the practitioner proceeds to support its implementation. A BSP remains in force until it is superseded by a new plan or is no longer required. In addition, the use of any regulated restrictive practices outlined in the BSP must be authorised in accordance with the relevant state or territory process.

Earlier reviews if needed

BSP reviews must also occur earlier if the person's circumstances change and the BSP requires amendment.

A **change in circumstances** is defined as any significant change in risks of harm (to self or others), or changes in a person's behaviour, needs, physical and psychological health, environment or supports that requires the BSP to be amended. For example, a pattern of unauthorised restrictive practices (URP), changes in living arrangements, or changes in providers will generally constitute a change in circumstances. Earlier review supports accuracy, ongoing relevance and contextual fit, meaning it aligns with the values, needs, resources and culture of the environment.

3. Consult with the person and others

Complete BSP reviews in consultation with the person with disability and their support network. This should explore what is working well, what is not working, and what needs to change in response to evolving needs, goals, preferences and circumstances. Effective consultation also involves working collaboratively with other providers, allied health professionals and relevant specialists.

Consultation must be accessible, meaningful, person-centred, culturally responsive, trauma-informed (where relevant) and consistent with supported decision-making principles. Consultation should be used to inform plan updates and documented, ideally within the BSP.

4. Provide information in accessible formats

Where there is a need to continue the use of regulated restrictive practices, ensure this is communicated to the person and their family or support network in an accessible and culturally appropriate way. The NDIS Commission encourages use and adaptation of the [Restrictive Practices and Me resources](#).

5. Take an evidence-informed approach

Take an evidence-informed approach by reviewing recent incident reports and any other information on behaviour, health and wellbeing. This includes analysing patterns and trends over time and considering any new assessments that have been completed or may be required to enhance understanding or refine supports. It may also involve revisiting and updating the behaviour support assessment (e.g., to refine functional hypotheses, change the intervention approach or identify areas for further investigation).

6. Consider the environment

Consider whether further changes can be made to the person's environment to ensure it meets their needs and proactively reduces the need for and use of any regulated restrictive practices.

7. Work to reduce and eliminate regulated restrictive practices

Evaluate progress towards reducing and eliminating regulated restrictive practices. This should involve taking all reasonable steps to ensure that fade out plans are not only written but actively implemented in practice. For example, where the reduction of a regulated restrictive practice has not progressed, the review should document barriers and specify clear actions, responsibilities and timeframes to address this.

For chemical restraint, this requires close collaboration with the prescriber, using monitoring data to help inform clinical decision-making.

8. Keep good records and document the review

Document all sources of information considered when reviewing the BSP. Record the outcome of the review and the rationale for making, or not making, changes to the plan. This is in line with good record keeping practice. Documentation may include updating the functional behaviour assessment, case notes, progress reports or updates to the BSP itself. If documenting information in the BSP, consideration should also be given to accessibility and the needs of implementers.

9. Update the BSP as needed

Use the findings of the review to update the comprehensive BSP and any restrictive practice protocols so they remain responsive to the person's current needs and circumstances. Consider opportunities to enhance quality of life and support progress towards positive change.

Where regulated restrictive practices are involved ensure that the BSP has been developed/ reviewed in accordance with the state and territory authorisation process (however described).

BSPs should provide clear, practical and accessible guidance for implementers. The NDIS Commission strongly encourages use of the [Comprehensive BSP template](#).

10. Support others to implement the BSP effectively

Clearly outline any changes made to the plan and provide training where required to support effective implementation. Ensure everyone understands their role and how to use the strategies consistently to meet the person's needs.

Implementation is an ongoing collaborative process, not a singular event. It should include ongoing opportunities for discussion, exploration of concerns and for the provision of feedback. These actions should also be reflected in the 'implementation support' section of the BSP.

11. Lodge BSPs containing regulated restrictive practices

If, following a review, the comprehensive BSP continues to include the use of regulated restrictive practices (RRP), the updated BSP must be lodged with the NDIS Commission as soon as practicable after it is developed. This requirement applies regardless of who will implement the RRP(s) and regardless of whether State or Territory authorisation has yet been obtained.

As soon as practicable means taking the required action as soon as it is feasible in practice and without unreasonable delay. The NDIS Commission generally considers **two weeks** from the date the NDIS behaviour support practitioner finalises the BSP's development to be a practicable timeframe for lodgement.

12. Deliver quality and safe supports

Implement quality management systems to promote a culture of continuous improvement. For example, through supervision, reflective practice and peer review processes. This may also involve regular reviews of BSP quality using contemporary measures such as the [Positive Behaviour Support Plan Quality Assessment tool](#).

Administrative updates and minor edits

Superficial or administrative updates alone are not sufficient to demonstrate that a BSP review has occurred. For example, correcting typos, updating medication dose, or minor updates to a skill development program. Where these edits or corrections do not affect the status of restrictive practice authorisation in the relevant state or territory, they should be recorded as an addendum to the current plan or through version control (e.g., version 1.2). These administrative updates should not change the date the plan came into force, and a review will still be required at least annually. If edits affect the authorisation status of a regulated restrictive practice (RRP), a full review is required and the updated BSP must be lodged with the NDIS Commission if it contains RRP.

Planning context for monitoring and review

Specialist behaviour support providers are responsible for planning their supports and services so that implementation support, monitoring and the review of comprehensive BSPs can be undertaken effectively and meaningfully over the life of the plan, consistent with their service agreement. This includes allocating appropriate time for these activities.

Laws and rules that apply

The above expectations are consistent with the conditions of registration that apply to specialist behaviour support providers as outlined in:

- [NDIS \(Provider Registration and Practice Standards\) Rules 2018](#)
- [NDIS \(Restrictive Practices and Behaviour Support\) Rules 2018](#)
- [NDIS \(Code of Conduct\) Rules 2018](#)

Where to get more information

- [The right direction](#) - resources to increase effective communication and engagement between behaviour support practitioners and NDIS participants. It includes resources to support the review of behaviour support plans.
- [Deciding with support](#) - a supported decision-making toolkit designed for behaviour support developed by Flinders University and funded by the NDIS Commission.
- [Talking to participants about restrictive practices](#) – resources to support meaningful consultation with people with disability when their behaviour support plan contains regulated restrictive practices.
- [Comprehensive behaviour support plan template](#) – Commission template for Comprehensive BSPs that were informed by contemporary evidence-informed practice and an extensive consultation process.
- [Comprehensive behaviour support plan checklist](#) – a tool that outlines good practice and the requirements when developing comprehensive behaviour support plans.
- [Positive Behaviour Support Plan Quality Assessment](#) – a contemporary evidence-informed tool developed by the University of Queensland to measure behaviour support plan quality.
- [Evidence matters: Developing quality behaviour support plans](#) - a literature summary by University of Queensland and funded by the NDIS Commission. This paper also informed the development of the NDIS Commission’s Comprehensive Behaviour Support Plan V3.0.
- [The Positive Behaviour Support Capability Framework](#) - outlines the knowledge and skills required to deliver contemporary, evidence-informed behaviour support and is used to consider a practitioner’s suitability.
- [Policies, practice guidance and resources on behaviour support and restrictive practices](#)