NDIS Quality and Safeguards Commission

Self-Assessment Resource Guide

For the Positive Behaviour Support Capability Framework

Version 3.0 (October 2026)

NDIS Quality and Safeguards Commission

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Section 1: Introduction

The *National Disability Insurance Scheme Act 2013* (NDIS Act) gives several functions to the Commissioner of the NDIS Quality and Safeguards Commission (NDIS Commissioner) that relate to the provision of behaviour support to people with disability. These functions include building capability in the development of behaviour support through:

- Developing and implementing a competency framework for registered NDIS providers whose registration includes the provision of behaviour support assessments and developing behaviour support plans, and
- Assessing the skills and experience of such providers against the competency framework.

The NDIS Commissioner has published the *Positive Behaviour Support Capability Framework for NDIS providers and behaviour support practitioners* (PBS Capability Framework). The PBS Capability Framework also supports the NDIS Commissioner's function of promoting continuous improvement amongst NDIS providers and delivery of progressively higher standards of supports and services to people with disability.

The NDIS Commissioner also determines applications by people and organisations who seek registration as an NDIS provider in order to provide specialist behaviour support services. Specialist behaviour support services include undertaking behaviour support assessments (including functional behavioural assessments) and developing behaviour support plans for participants. If they become registered, the NDIS Commissioner monitors these providers' compliance with registration conditions that require certain activities to be undertaken only by an 'NDIS behaviour support practitioner'—a person whom the Commissioner considers suitable to provide the services. That person may be the registered provider or a person employed or otherwise engaged by the provider.

> ***NDIS behaviour support practitioner*** means a person the NDIS Commissioner considers suitable to undertake behaviour support assessments (including functional behavioural assessments) and to develop behaviour support plans that may contain the use of restrictive practices. See section 5 of the *National Disability Insurance Scheme (Restrictive Practices and Behaviour Support) Rules 2018*.

1.1 Purpose of this Guide

This Self-Assessment Resource Guide (the Guide) complements the PBS Capability Framework. The broad purpose of the Guide is to provide guidance to behaviour support practitioners (whether they are registered providers, or employed or otherwise engaged by registered providers) on how they can assess their own capabilities against the PBS Capability Framework. The Guide aims to:

- Build capability in the development of behaviour support, and
- Encourage progressively higher standards in behaviour support services provided to people with disability.

The Guide also provides a toolkit of resources that behaviour support practitioners can use to:

- Complete a self-assessment of their capabilities against the PBS Capability Framework and
- Develop a Portfolio of Evidence that may be used when applying to the Commissioner for a determination of their suitability to undertake activities that, under the NDIS Act, can only be undertaken by an NDIS behaviour support practitioner.

1.2 Overview of this Guide

The toolkit of resources in section 3 of this Guide can be used by behaviour support practitioners to reflect on and assess their own capabilities against the seven capability domains and the four practitioner levels (core, proficient, advanced and specialist) outlined in the PBS Capability Framework. The resources include the following:

- A Self-Assessment Tool for each practitioner level
- A Portfolio of Evidence
- An Endorsement Tool
- Templates and information sheets:
  - Curriculum Vitae, or Resume
  - Continuing Professional Development Plan
  - Professional Learning Goals Achievement Record
  - Supervision Agreement
  - Information Sheet on Supervision Methods and Modes
  - Information Sheet for setting up a new supervision relationship
  - Supervision Record
  - Supervision Evaluation
  - Reflective Practice Tool.

It is not mandatory for a behaviour support practitioner to do a self-assessment, or to use these resources if they do a self-assessment. However if they are used they can:

- Assist the NDIS Commissioner's consideration of a practitioner's application to be assessed as suitable to be an NDIS behaviour support practitioner
- Assist the practitioner to build their capability on an ongoing basis and demonstrate this to participants and providers
- Assist providers for whom the practitioner works for to demonstrate the specialist behaviour support Quality Indicators; and
- Be relevant information for the NDIS Commissioner to consider if the practitioner applies for registration (including re-registration) as a registered specialist behaviour support provider.

1.3 Definitions

Table 1 below provides a definition for terms used throughout this Guide.

Table 1: Definitions of terms used in this Guide

Term used	Definition
Australian Qualifications Framework (AQF) Level 7	The national policy for regulated qualifications in Australia. AQF Level 7 includes a bachelor degree qualification.
Behaviour assessment report	A record of a functional behavioural assessment.
Behaviour support plan	A document prepared in consultation with the person with disability, their family, carers, and other support people that addresses the needs of the person identified as having behaviours of concern. There are two types of plans: a) An **interim** behaviour support plan, which is a short set of general preventative and reactive strategies to keep a person safe, and reduce risk of harm. An interim plan includes protocols to follow and identifies when and how any regulated restrictive practices are to be applied, and b) A **comprehensive** behaviour support plan, is based on a behaviour assessment, (including a functional behaviour assessment) and contains evidence-informed strategies to improve the person's quality of life and support their progress towards positive change. It should address the underlying function of the person's behaviour of concern and identify a functionally equivalent replacement behaviour. It should also outline environmental changes required, provide skill development programs to help the person learn new behaviours, and include response strategies to be followed when the behaviour of concern occurs. The plan also identifies when and how any regulated restrictive practices are to be applied, and includes fade out strategies.
Behaviour Support Rules	The *National Disability Insurance Scheme (Restrictive Practices and Behaviour Support) Rules 2018.*
Certified copy	A certified copy is a copy that has been sighted and certified as a true copy of the original document. Examples of people who can certify documents include, a Justice of the Peace, police officer, judge, barrister or solicitor, registered health

Term used	Definition
	practitioner (registered with AHPRA), teacher, accountant, minister of religion, marriage celebrant, public servant, or Sheriff's officer.
Continuing professional development plan	The template set out in section 3.6 that can be used as part of a Portfolio of Evidence.
Curriculum Vitae	The template in section 3.5 that sets out a practitioner's: relevant education, training and qualifications; employment history; years of experience; key roles and responsibilities relevant to behaviour support (also known as a resume). It can be used as part of a Portfolio of Evidence.
Endorsement Tool	The template set out in section 3.4 that can form part of a self-assessment.
Functional behavioural assessment	The process for determining and understanding the function or purpose behind a person's behaviour, which may involve the collection of data, observations, and other information to develop an understanding of the relationship of events and circumstances that trigger and maintain the behaviour.
NDIS Act	The *National Disability Insurance Scheme Act 2013.*
NDIS behaviour support practitioner	A person the Commissioner considers suitable to undertake behaviour support assessments (including functional behaviour assessments) and to develop behaviour support plans that may contain the use of restrictive practices.
NDIS Commission	The NDIS Quality and Safeguards Commission.
NDIS Commissioner	The Commissioner of the NDIS Quality and Safeguards Commission.
PBS Capability Framework	The *Positive Behaviour Support Capability Framework: For NDIS providers and behaviour support practitioners* (June 2019) published by the NDIS Commission, as updated from time to time.

Term used	Definition
Portfolio of Evidence	A record of current and relevant evidence that supports the behaviour support practitioner's self-assessment ratings in the Self-Assessment Tool.
Professional Learning Goals Achievement Record	The template set out in section 3.7 that can be used as part of a Portfolio of Evidence.
Provider Registration Rules	The *National Disability Insurance Scheme (Provider Registration and Practice Standards) Rules 2018* [in particular Schedule 3—Module 2].
Reflective Practice Tool	The template set out in section 3.13 that can be used as part of a Portfolio of Evidence.
Registered specialist behaviour support provider	A registered NDIS provider who is registered to provide specialist behaviour support services that include: a) undertaking a behaviour support assessment (including a functional behavioural assessment) of the participant; or b) developing a behaviour support plan for the participant.
Relevant Qualification	Relevant qualification means a bachelor degree (Australian Qualifications Framework Level 7) or higher in a relevant field including: • Positive Behaviour Support • Developmental education • Education • Psychology • Psychological science • Occupational therapy • Speech pathology • Nursing • Social work • Behavioural science • Applied Behavioural Analysis
Self-Assessment Tool	The template set out in section 3 that can be used in a self-assessment against the PBS Capability Framework (see section 3.1 for core and proficient behaviour support

Term used	Definition
	practitioners; section 3.2 for advanced behaviour support practitioners; and section 3.3 for specialist behaviour support practitioners).
Specialist behaviour support Quality Indicators	The standards contained in Part 4—Module 2 to the Quality Indicators of the *National Disability Insurance Scheme (Quality Indicators) Guidelines 2018.*
Supervision Agreement	The template set out in section 3.8 that can be used to document a practitioner's learning goals relating to each area of knowledge or skill that is identified through the use of the Self-Assessment Tool as *developing capability* or *capability not met*. It can be used as part of a Portfolio of Evidence. A supervision arrangement under the Supervision Agreement may take any of the following forms: • Direct professional supervision by a behaviour support practitioner with a higher level of skill and knowledge; • Peer supervision or support focused on reflective practice; • Direct supervision by a manager who monitors work practice on behalf of the provider; • Supervision that is required by a relevant professional registration body with which the practitioner is registered. Also refer to section 3.9 of this Guide.
Supervision Evaluation	The template set out in section 3.12 that can be used as part of a Portfolio of Evidence.
Supervision Record	The template set out in section 3.11 that can be used as part of a Portfolio of Evidence.
Supervisor	The supervisor of a behaviour support practitioner under a Supervision Agreement.
Toolkit of Resources	A set of tools, templates and information sheets that a behaviour support practitioner can use to complete a self-assessment of their capabilities against the PBS capability Framework, and develop a Portfolio of Evidence.

Section 2: Self-Assessment for the PBS Capability Framework

2.1. How to use the Self-Assessment Tools

Purpose

The Self-Assessment Tools in section 3.1 are templates that a behaviour support practitioner can use to reflect on and rate their knowledge and skills against the practitioner levels in the PBS Capability Framework. The practitioner may use the tools to identify their strengths, areas for professional development and a practitioner level.

Process

- The practitioner reviews the PBS Capability Framework and identifies the practitioner level that they consider reflects their current knowledge and skills. They can also refer to the content of each capability domain as outlined in the PBS Capability Framework for specific details of each element.
- The self-assessment tools build on each other, that is, the core practitioner self-assessment tool outlines foundation capabilities, and each subsequent self-assessment tool extends the capabilities required. For example, to complete the self-assessment at an advanced practitioner level, the **core**, **proficient** and **advanced** self-assessment tools need to be completed.
- To complete the Self-Assessment Tools, the practitioner selects a rating for each capability item relating to what they consider to be their practitioner level. The practitioner may also wish to assess themselves against the capability items for any higher practitioner level, to assist them to identify progression in their knowledge and skills over time.
- The practitioner can rate their capabilities in accordance with table 2 below.

Table 2: Self-Assessment Tool Capability Ratings

Item	Capability rating	Criteria
1	Capability met	The practitioner has the knowledge or skill capability described in column 2 of the relevant table in the Self-Assessment Tool in sections 3.1, 3.2 and 3.3.
2	Developing capability	The practitioner is in the process of developing the knowledge or skill capability described in column 2 of the relevant table in the Self-Assessment Tool in sections 3.1, 3.2 and 3.3; and can demonstrate progression against existing professional development goals.
3	Capability not met	The practitioner does not have the knowledge or skill capability described in column 2 of the relevant table in the Self-Assessment Tools in sections 3.1, 3.2 and 3.3.

- For each capability item in the domains, the practitioner indicates the type or source of evidence that they consider supports their self-assessment that they are *meeting* or *developing capability* for the item. One piece of evidence can be used to cover a number of elements within a domain, and can be included in a Portfolio of Evidence (see section 2.2 below).
- After completing the Self-Assessment Tool, the practitioner assesses themselves as meeting the criteria for a particular level in accordance with Table 3 below.

Table 3: Capability Ratings for Practitioner Levels

Item	Practitioner levels	Criteria
1	Core	The practitioner assesses themselves as *capability met* or *developing capability* for each knowledge and skill capability item for a core practitioner as set out in the Self-Assessment Tool.
2	Proficient	The practitioner assesses themselves as: • *Capability met* for each knowledge and skill capability item for a core practitioner AND • *Capability met* or *developing capability* for each knowledge and skill capability item for a proficient practitioner as set out in the Self-Assessment Tool.
3	Advanced	The practitioner assesses themselves as: • *Capability met* for each knowledge and skill capability item for a core and a proficient practitioner AND • *Capability met* or *developing capability* for each capability item for an advanced practitioner as set out in the Self-Assessment Tool.
4	Specialist	The practitioner assesses themselves as: • *Capability met* for each knowledge and skill capability item for a core and a **proficient** practitioner OR *Capability met* for each knowledge and skill capability item for a core, proficient and **advanced** practitioner AND • *Capability met* or *developing capability* for each capability item in their area of speciality for a specialist practitioner as set out in the Self-Assessment Tool.

2.2. How to develop a Portfolio of Evidence

Purpose

- The Portfolio of Evidence is a record of current and relevant evidence that supports the practitioner's self-assessment ratings in the Self-Assessment Tool.
- The Portfolio of Evidence should be used by the practitioner's supervisor to complete the Endorsement Tool. The NDIS Commission does not need to see Portfolio of Evidence, however may request examples if more information is required for assessment and determination of practitioner suitability.
- The Portfolio of Evidence can also demonstrate how the practitioner has developed and extended their capabilities as a practitioner through a range of activities related to their supervision, ongoing professional development and other work activities that include action plans and goal completion (see section 3 for templates).

Process

1. The practitioner develops a portfolio of records or documents that demonstrates how they meet or are developing the knowledge and skill capabilities for each of the seven domains in the Self-Assessment Tool.
2. Each document in the portfolio should state the date on which it was created. Documents should not have been created more than 5 years before the date on which the practitioner completes their Self-Assessment Tool unless:
    a. They are evidence of a relevant qualification or relevant employment history, or
    b. The portfolio includes a written statement outlining why the documents are relevant.

Types of evidence to include in the portfolio are described in Table 4 below.

Table 4: Portfolio of Evidence

Qualification evidence
Qualification evidence is a certified copy of a relevant qualification or other evidence (e.g. AHPRA registration number) demonstrating completion of a bachelor degree (Australian Qualification Framework Level 7) or higher in a relevant field including: a. Positive Behaviour Support b. Developmental education c. Education d. Psychology e. Psychological science f. Occupational therapy g. Speech pathology h. Nursing

Qualification evidence
i. Social work j. Behavioural science k. Applied Behavioural Analysis

Supervision and peer support evidence
Supervision evidence is evidence of one or more of the following kinds: a. Supervision documentation b. Supervision practice evidence c. Reflective practice evidence. ***Supervision documentation*** is evidence of one or more of the following kinds: a. A supervision agreement between the practitioner and a **supervisor** b. A record of the supervision under a supervision agreement in which all references to any person other than the practitioner or the supervisor are de-identified c. A record of group supervision or peer work practice support in which all references to any person other than the practitioner or the supervisor are de-identified d. An annual review, for example, of work performance, development activities, or a supervision agreement. ***Supervision practice evidence*** is evidence of one or more of the following kinds: a. Samples of work that the practitioner has performed as a behaviour support practitioner and provided to their supervisor for monitoring or feedback b. For a practitioner self-assessing at *proficient level* or above - samples of work that the practitioner has reviewed in their capacity as a supervisor, where the sample evidences the practitioner's supervisory input. ***Reflective practice evidence*** is evidence of reflective journaling or practice reflection using relevant tools.

Ongoing professional development evidence
Ongoing professional development evidence is evidence of one or more of the following kinds: a. Achievement evidence b. Involvement evidence c. Research and quality improvement evidence d. Independent study evidence e. Other evidence.

Ongoing professional development evidence
Achievement evidence is evidence of the practitioner's relevant academic and professional achievements, which may consist of one or more of the following: a. Evidence of membership of a professional association b. Evidence of registration by a professional body c. Evidence of the award of a grant, or application for a grant d. Evidence of an award received from an NDIS provider, or state, territory, or national professional association. ***Involvement evidence*** is evidence of one or more of the following kinds: a. Evidence that the practitioner has taught or presented at a professional gathering or event relevant to clinical practice in positive behaviour support b. Evidence of the practitioner's attendance at a conference or seminar relevant to clinical practice in positive behaviour support c. Evidence of the practitioner's completion of a short course or training relevant to clinical practice in positive behaviour support d. Evidence that the practitioner has facilitated an event relevant to clinical practice in positive behaviour support e. Evidence of the practitioner's participation in a journal club, interest group or committee relevant to clinical practice in positive behaviour support f. Evidence of the practitioner's participation in a relevant community of practice g. Evidence of the practitioner's participation in online discussions relevant to clinical practice in positive behaviour support. ***Research and quality improvement evidence*** means evidence that the practitioner has undertaken research or quality improvement activities relevant to clinical practice in positive behaviour support, which may consist of one or more of the following: a. Evidence that the practitioner has undertaken research or project activities b. Evidence that the practitioner has contributed to a journal or professional publication c. Evidence that the practitioner has developed educational resources or information for others d. Evidence that the practitioner has developed evidence-based practice resources e. Evidence that the practitioner has contributed to the development of organisational policy or procedures. ***Independent study evidence*** means evidence that the practitioner has undertaken independent study relevant to clinical practice in positive behaviour support, which may include evidence that the practitioner has: a. Read and reflected upon a journal article, video, webinar or other relevant resource;, and b. Considered how the resource could be applied in clinical practice.

Ongoing professional development evidence
Other evidence of ongoing professional development, which may consist of one or more of the following: a. Evidence that the practitioner is learning, or has learnt, to use instrumental tools relevant to clinical practice in positive behaviour support b. A de-identified case study demonstrating i. A positive outcome for an NDIS participant, their family or carer or ii. Progression in the practitioner's relevant knowledge or skills or iii. Reduction or elimination of the use of restrictive practices, c. A de-identified sample of the practitioner's work.

Evidence of actions and goal completion
Evidence of actions and goal completion includes evidence that the practitioner has achieved a goal set out in their continuing professional development plan, supervision agreement or professional learning goals achievement record.

2.3. How to use the Endorsement Tool

Purpose

- The Endorsement Tool is for use by a practitioner's supervisor (i.e., the person with whom they have a Supervision Agreement) to document the outcome of a discussion about the practitioner's self-assessment against the PBS Capability Framework.
- The Endorsement Tool can be used to validate the Self-Assessment Tool and Portfolio of Evidence.
- The NDIS registered specialist behaviour support provider who engages a practitioner may decide who would be the appropriate person to complete the Endorsement Tool.

Process

1. The practitioner organises a session with their supervisor to discuss the completed Self-Assessment Tool.
2. The practitioner and supervisor review the ratings in the Self-Assessment Tool and the self-assessed practitioner level, and the Portfolio of Evidence.
3. The practitioner and supervisor discuss the outcome of the Self-Assessment Tool and Portfolio of Evidence, to determine if they agree about the self-assessed practitioner level.
    - If the supervisor disagrees with the self-assessed practitioner level, ongoing supervision in accordance with a Supervision Agreement may assist with resolving issues, for example, the practitioner may need to complete additional professional development activities. The process for resolving this disagreement should be determined by the supervisor and practitioner in line with provider policy and procedures.
    - If a practitioner's knowledge and skills are agreed to be either '*developing capability*' or '*capability not met*' at the core practitioner level, the practitioner and supervisor may want to develop and implement a Continuing Professional Development Plan that ensures the practitioner meets the expectations and required capabilities as an entry-level practitioner, before completing the Self-Assessment Tool again.
4. The practitioner and supervisor complete the Endorsement Tool to document agreement of the self-assessed practitioner level.
5. The practitioner and supervisor may want to explore the other resources in the Toolkit of Resources in section 3 of this Guide to select strategies for the practitioner to consolidate and progress acquisition of specific knowledge and skill capabilities identified through the self-assessment process.

Section 3: The Toolkit of Resources

3.1 Self-Assessment Tool for the PBS Capability Framework – Capability Domains

The Self-Assessment Tool is based on the PBS Capability Framework. The PBS Capability Framework provides a description of four levels of practitioners and, for each level, outlines the capabilities for practitioners across seven domains, each being an aspect of behaviour support practice. The seven capability domains are outlined in Table 5 below.

Table 5: Capability Domains in the PBS Capability Framework

Capability Domain	Explanation
1. Interim Response	Where a person with a disability has an immediate need for a behaviour support plan, the practitioner should have the capability to respond by developing an interim behaviour support plan to minimise the risk to the person and others.
2. Functional Assessment	The practitioner should have the capability to conduct a behaviour assessment to develop an understanding of the person including their strengths, important elements of their life and system of supports. This involves a functional behavioural assessment and formulation in order to understand the person's needs and why behaviours of concern are occurring.
3. Planning	The practitioner should have the capability to translate the findings from the behaviour assessment into a proactive and evidence-informed comprehensive behaviour support plan that is responsive to the person's needs and improves their quality of life.
4. Implementation	The practitioner should have the capability to put the behaviour support plan into action. This includes being able to adapt strategies to different environments, train those in the person's support system to implement the plan, monitor progress and make changes to the plan as required.
5. Know it works	The practitioner should have the capability to monitor and evaluate the effectiveness of the behaviour support plan, review strategies to ensure that quality of life outcomes are achieved, and work towards the reduction and elimination of restrictive practices.

Capability Domain	Explanation
6. Restrictive Practice	The practitioner should have the capability to recommend a regulated restrictive practice in a behaviour support plan according to safeguard requirements. This includes ensuring that a restrictive practice is used in line with an authorisation process, that it is the least restrictive response and an option of last resort to reduce the risk of harm to the person with disability or others.
7. Continuing Professional Development and Supervision	The practitioner should have the capability to extend their knowledge and skills in the delivery of consistent, safe and high-quality behaviour support services that are focused on improving the well-being and quality of life of people with disability and complex support needs. Part of increasing capability is undertaking continuing professional development and supervision.

Legislative and related references that are relevant to these domains are included in the appendix.

3.2 Self-Assessment Tool for the PBS Capability Framework – Core Behaviour Support Practitioner

Overview

The Self-assessment Tool is based on the Positive Behaviour Support (PBS) Capability Framework. The PBS Capability Framework provides a description of four levels of practitioners and, for each level, outlines the capabilities for practitioners across seven domains of behaviour support practice (see the Self-assessment Resource Guide for the Positive Behaviour Support Capability Framework for more details). The seven capability domains are: Interim Response, Functional Assessment, Planning, Implementation, Know It Works, Restrictive Practice, and Continuing Professional Development and Supervision.

How to use the self-assessment tool – Core Practitioner

- Review the PBS Capability Framework and identify the practitioner level that you consider reflects your current knowledge and skills (see the Positive Behaviour Support Capability Framework, pages 9-11).
- You should complete the self-assessment tool for a **Core Practitioner** before proceeding to self-assessment tools for higher capability levels.
- Download the document and save to your computer using the following naming convention: Surname, first name – Core Practitioner Self-assessment Tool.
- As you go through each knowledge and skill capability item in the self-assessment tool, select the rating that applies to you according to the definitions in the table below. This is done by clicking the box in the column next to the capability item that matches the rating you want to select.

Item	Capability rating	Criteria
1	Capability met	The practitioner has the knowledge or skill described in column 2 of the relevant table in the self-assessment tool
2	Developing capability	The practitioner is in the process of developing the knowledge or skill described in column 2 of the relevant table in the self-assessment tool; and can demonstrate progression against existing professional development goals.
3	Capability not met	The practitioner does not have the knowledge or skill described in column 2 of the relevant table in the self-assessment tool

- For each of the seven capability domains, indicate the type or source of evidence that you consider supports your self-assessment where you are *meeting* or *developing capability* for the items. This is added at the end of the capability items for each domain. One piece of evidence can be used to cover a number of items within, and across capability domains. Sources of evidence should be included in a Portfolio of Evidence (see the Self-assessment Resource Guide for the Positive Behaviour Support Capability Framework section 2.2).

- If you assessed yourself as *capability met* or *developing capability* for each knowledge and skill capability item for a **core practitioner** as set out in the self-assessment tool, then this is your self-assessed practitioner level (see the Self-assessment Resource Guide for the Positive Behaviour Support Capability Framework, section 2.1, table 3).
- If you assessed yourself as *capability met* for all knowledge and skill capability items for a **core practitioner** as set out in the self-assessment tool, you may also wish to assess yourself against the knowledge and skill capability items for a proficient practitioner level. This may assist you to identify areas in which you can extend your knowledge and skills over time.

Self-Assessment Tool for a Core Behaviour Support Practitioner

1. Interim Response

Where a person with a disability has an immediate need for a behaviour support plan, the practitioner should have the capability to respond by developing an interim behaviour support plan to minimise the risk to the person and others.

Item	Core Knowledge Capabilities	Capability met	Developing capability	Capability not met
1.1	Understand that behaviours may occur that cause immediate risk of harm to the person or others	☐	☐	☐
1.2	Know high risk behaviours need to be managed safely and effectively using least restrictive options	☐	☐	☐
1.3	Know high risk situations and environments can be identified (including antecedents, triggers)	☐	☐	☐
1.4	Know how and why interim responses will be unique to the person	☐	☐	☐
1.5	Be aware that interim risk management may include restrictive practices	☐	☐	☐
1.6	Understand the consequences of unauthorised use of restrictive practices	☐	☐	☐
1.7	Understand legal and ethical expectations	☐	☐	☐
Item	**Core Skill Capabilities**	**Capability met**	**Developing capability**	**Capability not met**
1.8	Gather and document appropriate authorisation and consents where required by states or territory laws and policies	☐	☐	☐
1.9	Evaluate the risk posed by the behaviour to the person and others	☐	☐	☐
1.10	Consult with the person, their family, carers, guardian or other relevant person	☐	☐	☐
1.11	Communicate clearly and effectively with relevant parties to gather information and provide direction	☐	☐	☐
1.12	Collaborate with team members	☐	☐	☐
1.13	Record and report accurately	☐	☐	☐
1.14	Identify any existing data that might provide insight into the situation	☐	☐	☐
1.15	Provide guidance on protective actions related to environment, setting and circumstances	☐	☐	☐
1.16	Coach those implementing the plan with support from a supervisor	☐	☐	☐
1.17	Seek professional support from a supervisor	☐	☐	☐

Self-Assessment Tool for a Core Behaviour Support Practitioner
1. Interim Response
Sources of Evidence
Examples: Environmental risk assessment; interim behaviour support plans; behavioural escalation cycle and response strategies, community safety protocol; attendance at relevant training.
a.
b.
c.
Statement about why these sources of evidence are relevant

Self-Assessment Tool for a Core Behaviour Support Practitioner

2. Functional Assessment

The practitioner should have the capability to conduct a behaviour assessment to develop an understanding of the person including their strengths, important elements of their life and system of supports. This involves a functional behavioural assessment and formulation in order to understand the person's needs and why behaviours of concern are occurring.

Item	Core Knowledge Capabilities	Capability met	Developing capability	Capability not met
2.1	Understand the values, policy and legislative context in which positive behaviour support occurs	☐	☐	☐
2.2	Understand that behaviours happen for a reason and serve a purpose	☐	☐	☐
2.3	Know the common functions of behaviours	☐	☐	☐
2.4	Understand the difference between what the behaviour looks like and its function	☐	☐	☐
2.5	Understand that assessment is focused initially on improving quality of life, and secondly, on reducing behaviours of concern	☐	☐	☐
2.6	Understand the importance of obtaining baseline measures of: (a) current behaviours of concern (including frequency and intensity), and (b) quality of life, and (c) current use of restrictive practices.	☐	☐	☐
2.7	Value the role of the service, staff, family members or carers in developing or maintaining behaviours	☐	☐	☐
2.8	Understand that the complexity and duration of the functional assessment is dependent on the severity, impact, frequency and duration of the behaviour	☐	☐	☐
2.9	Understand the importance of data-driven decision making	☐	☐	☐
2.10	Understand life-course events (i.e. the connection between a person's history and events during their life that may have had an impact on them)	☐	☐	☐
Item	**Core Skill Capabilities**	**Capability met**	**Developing capability**	**Capability not met**
2.11	Place the person at the centre of the functional assessment and establish support to keep them there	☐	☐	☐
2.12	Conduct a respectful and responsive assessment that considers the diversity of a person's culture	☐	☐	☐
2.13	Involve the person, their family members, carers, guardian and other relevant people in the assessment	☐	☐	☐

Self-Assessment Tool for a Core Behaviour Support Practitioner

2. Functional Assessment

Item	Core Skill Capabilities	Capability met	Developing capability	Capability not met
2.14	Use communication and active listening skills to develop rapport with the person and their team	☐	☐	☐
2.15	Adapt assessment terminology and systems to the needs of the target audience	☐	☐	☐
2.16	Assess the person's abilities and needs	☐	☐	☐
2.17	Use observation skills	☐	☐	☐
2.18	Use effective systems to collect data from a variety of sources	☐	☐	☐
2.19	Identify antecedents (setting events and triggers) to behaviours of concern and factors that support quality of life	☐	☐	☐
2.20	Identify consequences that maintain a behaviour	☐	☐	☐
2.21	Identify and describe the behaviour in a way that is observable and measurable	☐	☐	☐
2.22	Analyse the relationship between the person and their environment	☐	☐	☐
2.23	Produce a behaviour assessment report	☐	☐	☐
2.24	Seek professional support as required	☐	☐	☐

Sources of Evidence

Examples: Observational data; staff ABC data record; structured interview based on Functional Assessment Interview; behaviour analyses and formulation notes, functional behaviour assessment reports

a.

b.

c.

Statement about why these sources of evidence are relevant

Self-Assessment Tool for a Core Behaviour Support Practitioner

3. Planning

The practitioner should have the capability to translate the findings from the behaviour assessment into a proactive and evidence-informed comprehensive behaviour support plan that is responsive to the person's needs and improves their quality of life.

Item	Core Knowledge Capabilities	Capability met	Developing capability	Capability not met
3.1	Understand that a behaviour support plan is based on knowledge from the functional assessment	☐	☐	☐
3.2	Identify who will read and use a behaviour support plan	☐	☐	☐
3.3	Understand that a behaviour support plan must be written in a way that is useful to its intended audience	☐	☐	☐
3.4	Understand that a behaviour support plan must have both proactive and reactive components	☐	☐	☐
Item	**Core Skill Capabilities**	**Capability met**	**Developing capability**	**Capability not met**
3.5	Use data to inform a theoretical and ethically sound behaviour support plan	☐	☐	☐
3.6	Identify those responsible for implementing a behaviour support plan	☐	☐	☐
3.7	Identify barriers to implementation	☐	☐	☐
3.8	Collaborate and consult as required to develop strategies	☐	☐	☐
3.9	Develop proactive strategies to improve quality of life	☐	☐	☐
3.10	Develop strategies that aim to increase the person's skills, including communication and the interaction skills of communication partners	☐	☐	☐
3.11	Develop necessary adaptations to a person's environment and routine	☐	☐	☐
3.12	Write a behaviour support plan in a way that is usable by those implementing it	☐	☐	☐
3.13	Include an escalation mechanism	☐	☐	☐
3.14	Develop data collection systems that are objective, understandable and usable by the key people	☐	☐	☐
3.15	Include a continuous cycle of monitoring	☐	☐	☐

Self-Assessment Tool for a Core Behaviour Support Practitioner
3. Planning
Sources of Evidence
Examples: Use of person-centred tools to develop goals; implementation plan; comprehensive behaviour support plans (with evidence of supervisor support if include restrictive practices); data collection forms for implementers.
a.
b.
c.
Statement about why these sources of evidence are relevant

Self-Assessment Tool for a Core Behaviour Support Practitioner

4. Implementation

The practitioner should have the capability to put the behaviour support plan into action. This includes being able to adapt strategies to different environments, train those in the person's support system to implement the plan, monitor progress and make changes to the plan as required.

Item	Core Knowledge Capabilities	Capability met	Developing capability	Capability not met
4.1	Understand the importance of individualised implementation of a behaviour support plan	☐	☐	☐
4.2	Understand how implementation approaches can vary for a person across different stages of life	☐	☐	☐
4.3	Consider the people to include in implementation	☐	☐	☐
4.4	Understand that functioning and resilient teams are likely to increase the consistency of implementation	☐	☐	☐
Item	**Core Skill Capabilities**	**Capability met**	**Developing capability**	**Capability not met**
4.5	Provide individually tailored education and training to those who are implementing a behaviour support plan	☐	☐	☐
4.6	Consider the capacity of the person at the centre of a behaviour support plan and their role in implementation	☐	☐	☐
4.7	Support implementers to incorporate strategies into daily support plans and other relevant documents	☐	☐	☐
4.8	Support implementation across different environments and contexts	☐	☐	☐
4.9	Provide feedback to implementers on implementation and model alternatives	☐	☐	☐
4.10	Support those implementing a behaviour support plan to use the recommended data collection systems	☐	☐	☐
4.11	Promote least restrictive practices	☐	☐	☐

Sources of Evidence

Examples: Documentation for staff training sessions; monitoring and review schedule; observation/ meeting notes from implementation monitoring sessions; data recording systems; analyses of incident data.

a.

b.

c.

Statement about why these sources of evidence are relevant

Self-Assessment Tool for a Core Behaviour Support Practitioner

5. Know it works

The practitioner should have the capability to monitor and evaluate the effectiveness of the behaviour support plan, review strategies to ensure that quality of life outcomes are achieved, and work towards the reduction and elimination of restrictive practices.

Item	Core Knowledge Capabilities	Capability met	Developing capability	Capability not met
5.1	Understand the rationale of a behaviour support plan and its uses	☐	☐	☐
5.2	Understand the importance of continuous review and methods to conduct reviews	☐	☐	☐
5.3	Maintain professional learning to keep abreast of current knowledge of best practice	☐	☐	☐
5.4	Know indicators to include and how and when to check the effectiveness of a behaviour support plan	☐	☐	☐
Item	**Core Skill Capabilities**	**Capability met**	**Developing capability**	**Capability not met**
5.5	Re-assess the situation (i.e. any changes to context where behaviours of concern occur, or the participant's environments)	☐	☐	☐
5.6	Review adherence to implementation (i.e. are those supporting the participant implementing the strategies in the way they were trained?)	☐	☐	☐
5.7	Use data collected by implementers to monitor the implementation of a behaviour support plan (compared to baseline) in a whole of life context, and provide feedback to implementers	☐	☐	☐
5.8	Reflect on the external factors that may impact on the efficacy of positive behaviour support	☐	☐	☐
5.9	Build and utilise collaborative partnerships to evaluate a behaviour support plan	☐	☐	☐
5.10	Coordinate a formal review meeting	☐	☐	☐
5.11	Inform changes to a behaviour support plan as required	☐	☐	☐
5.12	Track progress of a behaviour support plan using the indicators of effectiveness	☐	☐	☐

Self-Assessment Tool for a Core Behaviour Support Practitioner
5. Know it works
Sources of Evidence
Examples: Procedural reliability documentation; data or documentation on decrease in behaviours of concern; evidence of attendance at relevant training; minutes of formal review meeting; review of data and outcome measurement.
a.
b.
c.
Statement about why these sources of evidence are relevant

Self-Assessment Tool for a Core Behaviour Support Practitioner

6. Restrictive Practices

The practitioner should have the capability to recommend a regulated restrictive practice in a behaviour support plan according to safeguard requirements. This includes ensuring that a restrictive practice is used in line with an authorisation process, that it is the least restrictive response and an option of last resort to reduce the risk of harm to the person with disability or others.

Item	Core Knowledge Capabilities	Capability met	Developing capability	Capability not met
6.1	Understand that the use of restrictive practices must be authorised in accordance with relevant state or territory laws and policies	☐	☐	☐
6.2	Understand that regulated restrictive practices include seclusion, and chemical, mechanical, physical and environment restraints	☐	☐	☐
6.3	Understand that restrictive practice can represent serious human rights violations	☐	☐	☐
6.4	Understand the *National Framework for Reducing and Eliminating the Use of Restrictive Practices in the Disability Service Sector*	☐	☐	☐
6.5	Understand that restrictive practice is an option of last resort, occurs in limited circumstances, should be used for the shortest period of time, and should be the least restrictive option available	☐	☐	☐
6.6	Understand that restrictive practices must only be used in accordance with a behaviour support plan	☐	☐	☐
6.7	Understand the relevant state or territory laws and policies regarding authorisation and consent to the use of regulated restricted practices	☐	☐	☐
6.8	Understand that some restrictive practices are prohibited in some States and Territories	☐	☐	☐
6.9	Understand that the use of restrictive practices can only be in response to risk of harm to the person or others	☐	☐	☐
6.10	Understand that, in order to develop a behaviour support plan that includes regulated restrictive practices, the plan must be lodged with the NDIS Commission	☐	☐	☐
6.11	Understand the *Zero Tolerance Framework* and associated resources	☐	☐	☐

Self-Assessment Tool for a Core Behaviour Support Practitioner

6. Restrictive Practices

Item	Core Skill Capabilities	Capability met	Developing capability	Capability not met
6.12	Consult with the person and/or obtain consent (as required by relevant State or Territory laws or policies)	☐	☐	☐
6.13	Prescribe restrictive practices under the direct supervision of a person at a practitioner level of proficient or above	☐	☐	☐

Sources of Evidence

Examples: Evidence of training or community of practice attendance; documentation of restrictive practices discussion with supervisor (re legislation, authorisation processes, etc.); restrictive practices protocol developed with supervisor.

a.

b.

c.

Statement about why these sources of evidence are relevant

Self-Assessment Tool for a Core Behaviour Support Practitioner

7. Continuing Professional Development and Supervision

The practitioner should have the capability to extend their knowledge and skills in the delivery of consistent, safe and high-quality behaviour support services that are focused on improving the well-being and quality of life of people with disability and complex support needs. Part of increasing capability is undertaking continuing professional development and supervision.

Item	Core Knowledge Capabilities	Capability met	Developing capability	Capability not met
7.1	Understand the importance of self-directed, lifelong learning, including a commitment to ongoing professional development	☐	☐	☐
7.2	Understand the importance of behaviour skills training	☐	☐	☐
7.3	Understand the importance of incorporating learning from supervision into practice	☐	☐	☐
Item	**Core Skill Capabilities**	**Capability met**	**Developing capability**	**Capability not met**
7.4	Set professional development goals	☐	☐	☐
7.5	Implement an annual professional development plan that is regularly reviewed and updated (which includes goals related to skills and knowledge within this framework)	☐	☐	☐
7.6	Participate in supervision to identify personal and professional goals, and take steps to achieve them	☐	☐	☐
7.7	Prioritise, prepare for, and engage actively in supervision	☐	☐	☐
7.8	Openly express and discuss expectations and needs related to supervision	☐	☐	☐
7.9	Openly identify and discuss practice issues which are challenging, and skills and knowledge that need developing	☐	☐	☐
7.10	Work to develop trust in the supervision relationship	☐	☐	☐
7.11	Take responsibility for seeking help when required	☐	☐	☐
7.12	Regularly review the supervision relationship and provide honest feedback	☐	☐	☐

Self-Assessment Tool for a Core Behaviour Support Practitioner
7. Continuing Professional Development and Supervision
Sources of Evidence
Examples: Continuing professional development plan; supervision agreement; documentation of supervision sessions; documentation of attendance at training or completion of courses.
a.
b.
c.
Statement about why these sources of evidence are relevant

3.3 Self-Assessment Tool for the PBS Capability Framework –Proficient Behaviour Support Practitioner

Overview

The Self-assessment Tool is based on the Positive Behaviour Support (PBS) Capability Framework. The PBS Capability Framework provides a description of four levels of practitioners and, for each level, outlines the capabilities for practitioners across seven domains of behaviour support practice (see the Self-assessment Resource Guide for the Positive Behaviour Support Capability Framework for more details). The seven capability domains are: Interim Response, Functional Assessment, Planning, Implementation, Know It Works, Restrictive Practice, and Continuing Professional Development and Supervision.

Prior to commencing a self-assessment, you should review the PBS Capability Framework and identify the practitioner level that you consider reflects your current knowledge and skills (see the Positive Behaviour Support Capability Framework, pages 9-11).

How to use the self-assessment tool – Proficient Practitioner

- A self-assessment at a proficient practitioner level requires you to complete the self-assessment tool for a **core practitioner** and the self-assessment tool for a **proficient practitioner**.
- You should meet all core practitioner knowledge and skills capabilities before progressing to this self-assessment tool for a Proficient Practitioner, that is,
  - STEP 1: Complete self- assessment tool for **core practitioner**
  - STEP 2: If you meet all capability items at the core level, complete self-assessment tool for **proficient practitioner**
- Download the self-assessment document from the NDIS Commission website and save to your computer using the following naming convention:
  Surname, first name – Proficient Practitioner Self-assessment Tool.
- As you go through each knowledge and skill capability item in the self-assessment tool, select the rating that applies to you according to the definitions in the table below. This is done by clicking the box in the column next to the capability item that matches the rating you want to select.

Item	Capability rating	Criteria
1	Capability met	The practitioner has the knowledge or skill described in column 2 of the relevant table in the self-assessment tool
2	Developing capability	The practitioner is in the process of developing the knowledge or skill described in column 2 of the relevant table in the self-assessment tool; and can demonstrate progression against existing professional development goals.
3	Capability not met	The practitioner does not have the knowledge or skill described in column 2 of the relevant table in the self-assessment tool

- For each of the seven capability domains, indicate the type or source of evidence that you consider supports your self-assessment where you are *meeting* or *developing capability* for the items. This is added at the end of the capability items for each domain. One piece of evidence can be used to cover a number of items within, and across capability domains. Sources of evidence should be included in a Portfolio of Evidence (see the Self-assessment Resource Guide for the Positive Behaviour Support Capability Framework, section 2.2).
- To self-assess at a **proficient practitioner** level, you should have assessed yourself as
  - *capability met* for each knowledge and skill capability item for a **core practitioner**, AND
  - *capability met* or *developing capability* for each knowledge and skill capability item for a **proficient practitioner** as set out in the self-assessment tool

    See the Self-assessment Resource Guide for the Positive Behaviour Support Capability Framework, section 2.1, table 3.
- If you assessed yourself as *capability met* for all knowledge and skill capability items for a **proficient practitioner** as set out in the self-assessment tool, you may also wish to assess yourself against the capability items for an advanced or specialist practitioner level. These tools may assist you to identify areas in which you can extend your knowledge and skills over time.

NOTE: Complete the self-assessment tool for a **core practitioner** before this self-assessment tool for a proficient practitioner.

Self-Assessment Tool for a Proficient Behaviour Support Practitioner

1. Interim Response

Where a person with a disability has an immediate need for a behaviour support plan, the practitioner should have the capability to respond by developing an interim response plan to minimise the risk to the person and others.

Item	Proficient Knowledge Capabilities	Capability met	Developing capability	Capability not met
1.1	Know a range of de-escalation techniques	☐	☐	☐
1.2	Be aware of the implications of using restrictive practices as a response	☐	☐	☐
1.3	Have a working knowledge of authorisation and reporting requirements for restrictive practices relevant to State or Territory laws and policies	☐	☐	☐
Item	**Proficient Skill Capabilities**	**Capability met**	**Developing capability**	**Capability not met**
1.4	Develop an individualised immediate response plan	☐	☐	☐
1.5	Use a range of strategies that can be safely adjusted once full assessment and planning concludes	☐	☐	☐
1.6	Document and implement ethical reactive strategies	☐	☐	☐
1.7	Seek professional support as required	☐	☐	☐
1.8	Work collaboratively with the relevant stakeholders (including emergency services when required)	☐	☐	☐
1.9	Train those implementing a behaviour support plan in its effective implementation	☐	☐	☐

Sources of Evidence
Examples: *Trauma informed risk assessment; Interim behaviour support plans; restrictive practice authorisation application, staff training package for client restrictive practices.*
a.
b.
c.
Statement about why these sources of evidence are relevant

Self-Assessment Tool for a Proficient Behaviour Support Practitioner

2. Functional Assessment

The practitioner should have the capability to conduct a behaviour assessment to develop an understanding of the person including their strengths, important elements of their life and system of supports. This involves a functional behavioural assessment and formulation in order to understand the person's needs and why behaviours of concern are occurring.

Item	Proficient Knowledge Capabilities	Capability met	Developing capability	Capability not met
2.1	Recognise assessment is a flexible and continuing process – factors that trigger and maintain behaviour may change over time	☐	☐	☐
2.2	Know the importance of assessments being regularly reviewed	☐	☐	☐
2.3	Understand the impact of behaviours on the person and their support networks	☐	☐	☐
2.4	Be conversant with a range of functional assessment tools	☐	☐	☐
2.5	Understand the strengths and weaknesses of various data collection methods and importance of selecting the appropriate method for the behaviour in question	☐	☐	☐
2.6	Understand the cultural context to determine who to involve and the most appropriate mechanism for assessment	☐	☐	☐
2.7	Understand the impact of monetary and physical resources	☐	☐	☐
Item	**Proficient Skill Capabilities**	**Capability met**	**Developing capability**	**Capability not met**
2.8	Establish a developmental history	☐	☐	☐
2.9	Analyse any current or previous interventions including reactive strategies	☐	☐	☐
2.10	Consider physical or mental health problems including the effect of medications and sleep	☐	☐	☐
2.11	Analyse other considerations such as history of trauma, sensory processing, social and interpersonal history	☐	☐	☐
2.12	Analyse the relationship between the person and their environment	☒	☐	☐
2.13	Identify enablers and barriers to quality of life, including understanding the protective value of friendships and family, and their contribution to safety	☐	☐	☐
2.14	Identify barriers to intervention	☐	☐	☐

Self-Assessment Tool for a Proficient Behaviour Support Practitioner

2. Functional Assessment

Item	Proficient Skill Capabilities	Capability met	Developing capability	Capability not met
2.15	Lead an interdisciplinary assessment of complex behaviour	☐	☐	☐
2.16	Construct a model of understanding that explains the functions of behaviours	☐	☐	☐
2.17	Refer on when requirements fall outside of the scope of behaviour support	☐	☐	☐
2.18	Collaborate with non-disability specific or mainstream services as required (including medical professionals)	☐	☐	☐
2.19	Assess and regularly review areas of risk to the person or others	☐	☐	☐
2.20	Identify the use of restrictive practices	☐	☐	☐
2.21	Conduct a comprehensive functional assessment and produce an assessment report that includes recommended actions and strategies	☐	☐	☐
2.22	Undertake assessment review if there is a significant change in behaviour	☐	☐	☐

Sources of Evidence

Examples: Developmental Behaviour Checklist 2; parent interview notes using the Strengths and Difficulties Questionnaire; Lifestyle and Environment Review; clinical formulation notes; functional behaviour assessment reports

a.

b.

c.

Statement about why these sources of evidence are relevant

Self-Assessment Tool for a Proficient Behaviour Support Practitioner

3. Planning

The practitioner should have the capability to translate the findings from the behaviour assessment into a proactive and evidence-informed comprehensive behaviour support plan that is responsive to the person's needs and improves their quality of life.

Item	Proficient Knowledge Capabilities	Capability met	Developing capability	Capability not met
3.1	Understand the importance of risk management	☐	☐	☐
Item	**Proficient Skill Capabilities**	**Capability met**	**Developing capability**	**Capability not met**
3.2	Include strategies that remove conditions likely to promote behaviours of concern, including: (a) environmental modifications; and (b) active engagement through structured and meaningful daily activities.	☐	☐	☐
3.3	Include strategies for replacement behaviours	☐	☐	☐
3.4	Include preventative strategies including relaxation, distraction and diversion	☐	☐	☐
3.5	Include reactive strategies when behaviours are not preventable	☐	☐	☐
3.6	Minimise or eliminate the use of restrictive practices	☐	☐	☐
3.7	Develop a behaviour support plan according to the literacy and communication needs of the target audience	☐	☐	☐
3.8	Develop a behaviour support plan that is compatible with the ability and resources of the implementers	☐	☐	☐
3.9	Develop a behaviour support plan supported by data that measures how accurately it is implemented	☐	☐	☐
3.10	Clearly articulate responsibilities and timeframes	☐	☐	☐

Sources of Evidence
Examples: Documentation on use of Goal Attainment Scale; multi-element implementation plan; comprehensive behaviour support plans; easy read behaviour support plan for participant
a.
b.
c.
Statement about why these sources of evidence are relevant

Self-Assessment Tool for a Proficient Behaviour Support Practitioner

4. Implementation

The practitioner should have the capability to put the behaviour support plan into action. This includes being able to adapt strategies to different environments, train those in the person's support system to implement the plan, monitor progress and make changes to the plan as required.

Item	Proficient Knowledge Capabilities	Capability met	Developing capability	Capability not met
4.1	Understand the critical people to include in implementation across diverse cultural contexts	☐	☐	☐
4.2	Know different methods of giving feedback	☐	☐	☐
4.3	Be aware of complex team dynamics and know strategies to manage these effectively	☐	☐	☐
4.4	Understand the importance of incident debriefing practice	☐	☐	☐
Item	**Proficient Skill Capabilities**	**Capability met**	**Developing capability**	**Capability not met**
4.5	Provide education and training to an interdisciplinary team	☐	☐	☐
4.6	Address barriers to implementation of a behaviour support plan	☐	☐	☐
4.7	Identify the support system's resilience, capacity and ability to sustain implementation, and make appropriate adjustments to the plan	☐	☐	☐
4.8	Provide implementers with information on ethical reactive strategies	☐	☐	☐
4.9	Provide implementers with information on risks and consequences of non-compliance with implementation	☐	☐	☐
4.10	Train implementers in escalation mechanism and emergency response plans	☐	☐	☐
4.11	Identify appropriate methods of feedback for those implementing a behaviour support plan	☐	☐	☐
4.12	Facilitate team building to enable successful implementation of a behaviour support plan	☐	☐	☐
4.13	Adjust a behaviour support plan as required	☐	☐	☐
4.14	Identify incident debriefing supports available to implementers	☐	☐	☐
4.15	Provide training on facilitating critical incident debriefing to appropriate members of the implementing team if required	☐	☐	☐

Self-Assessment Tool for a Proficient Behaviour Support Practitioner
4. Implementation
Sources of Evidence
Examples: Outcome measurement tools; monitoring and review schedule; data recording systems; restrictive practices protocol and fading strategies; documentation on use of Professional Quality of Life tool (ProQoL) with support system.
a.
b.
c.
Statement about why these sources of evidence are relevant

Self-Assessment Tool for a Proficient Behaviour Support Practitioner

5. Know it works

The practitioner should have the capability to monitor and evaluate the effectiveness of the behaviour support plan, review strategies to ensure that quality of life outcomes are achieved, and work towards the reduction and elimination of restrictive practices.

Item	Proficient Knowledge Capabilities	Capability met	Developing capability	Capability not met
5.1	Possess a depth of understanding about systematic monitoring and evaluation	☐	☐	☐
5.2	Identify the reasoning behind what is working and not working in a behaviour support plan	☐	☐	☐
Item	**Proficient Skill Capabilities**	**Capability met**	**Developing capability**	**Capability not met**
5.3	Have robust and effective ways to measure and evaluate the outcomes of agreed goals of the behaviour support plan	☐	☐	☐
5.4	Review the resilience, capacity and sustainability of those implementing a behaviour support plan	☐	☐	☐
5.5	Coordinate team participation in review, if appropriate	☐	☐	☐
5.6	Identify sources of information to verify a behaviour support plan's effectiveness within the cultural context	☐	☐	☐
5.7	Use data to formulate ideas about the reason(s) behind a behaviour support plan's effectiveness	☐	☐	☐
5.8	Use an evidence-based tool to evaluate the quality of a behaviour support plan, such as the BIP-QEII	☐	☐	☐
5.9	Apply and interpret measures that capture an increase in behaviours, increase in restrictive practice use or decrease in quality of life	☐	☐	☐
5.10	Implement a range of strategies that address efficacy limitations of implementation	☐	☐	☐

Sources of Evidence
Examples: Procedural reliability documentation; BSPQEII report; NDIA outcomes review report
a.
b.
c.
Statement about why these sources of evidence are relevant

Self-Assessment Tool for a Proficient Behaviour Support Practitioner

6. Restrictive Practices

The practitioner should have the capability to recommend a regulated restrictive practice in a behaviour support plan according to safeguard requirements. This includes ensuring that a restrictive practice is used in line with an authorisation process, that it is the least restrictive response and an option of last resort to reduce the risk of harm to the person with disability or others.

Item	Proficient Knowledge Capabilities	Capability met	Developing capability	Capability not met
6.1	Understand that restrictive practices must be in proportion to the potential consequences of the risk of harm	☐	☐	☐
Item	**Proficient Skill Capabilities**	**Capability met**	**Developing capability**	**Capability not met**
6.2	Work with the person, their informal supports and service provider to develop a behaviour support plan that is based on a functional behaviour assessment	☐	☐	☐
6.3	Provide a statement of intent to include a restrictive practice in a behaviour support plan, where required, in accordance with subsection 20(4) of the Behaviour Support Rules	☐	☐	☐
6.4	Ensure a behaviour support plan contains strategies that are proactive, outcomes-focused, person-centred, and that address the person's needs and the functions of the behaviour	☐	☐	☐
6.5	Design a staged plan of fading strategies to reduce or eliminate the use of restrictive practices with the person over time	☐	☐	☐
6.6	Lodge a behaviour support plan with regulated restrictive practices with the NDIS Commission for practices to be monitored	☐	☐	☐
6.7	Supervise a core practitioner	☐	☐	☐
6.8	Implement strategies that can be removed through shaping, fading and other mechanisms	☐	☐	☐

Sources of Evidence
Examples: Restrictive practices protocols; restrictive practice fade out plan or strategies in behaviour support plan
a.
b.
c.
Statement about why these sources of evidence are relevant

Self-Assessment Tool for a Proficient Behaviour Support Practitioner

7. Continuing Professional Development and Supervision

The practitioner should have the capability to extend their knowledge and skills in the delivery of consistent, safe and high-quality behaviour support services that are focused on improving the well-being and quality of life of people with disability and complex support needs. Part of increasing capability is undertaking continuing professional development and supervision.

Note: If you do not supervise others, consider your current supervision arrangements to respond to these items (refer to the Self-assessment Resource Guide for the Positive Behaviour Support Capability Framework, section 3.9)

Item	Proficient Knowledge Capabilities	Capability met	Developing capability	Capability not met
7.1	Thoroughly understand the skills relevant to receive or provide supervision	☐	☐	☐
7.2	Maintain up-to-date knowledge of the regulatory context and evidence-based practice	☐	☐	☐
Item	**Proficient Skill Capabilities**	**Capability met**	**Developing capability**	**Capability not met**
7.3	Participate in or facilitate a culturally safe and respectful environment	☐	☐	☐
7.4	Establish joint expectations within a supervision relationship	☐	☐	☐
7.5	Allow time to develop trust and rapport within a supervision relationship	☐	☐	☐
7.6	Use a supervision contract	☐	☐	☐
7.7	Maintain supervision documentation	☐	☐	☐
7.8	Participate in or provide supervision in the agreed format	☐	☐	☐
7.9	Seek or be available to provide support between formal supervision sessions, especially for newer behaviour support practitioners	☐	☐	☐
7.10	Seek or provide feedback (timely, specific and constructive) as part of the supervision relationship	☐	☐	☐
7.11	Participate in or conduct an evaluation of the effectiveness of supervision	☐	☐	☐
7.12	Participate in or facilitate reflective practice	☐	☐	☐
7.13	Utilise supervision sessions for the purpose of debriefing when required	☐	☐	☐
7.14	Discuss or share knowledge of the regulatory context and evidence-based practice	☐	☐	☐

Self-Assessment Tool for a Proficient Behaviour Support Practitioner
7. Continuing Professional Development and Supervision
Sources of Evidence
Examples: Continuing professional development plan; supervision agreement; documentation of supervision sessions; documentation of attendance at training or courses.
a.
b.
c.
Statement about why these sources of evidence are relevant

3.4 Self-Assessment Tool for the PBS Capability Framework – Advanced Behaviour Support Practitioner

Overview

The Self-assessment Tool is based on the Positive Behaviour Support (PBS) Capability Framework. The PBS Capability Framework provides a description of four levels of practitioners and, for each level, outlines the capabilities for practitioners across seven domains of behaviour support practice (see the Self-assessment Resource Guide for the Positive Behaviour Support Capability Framework for more details). The seven capability domains are: Interim Response, Functional Assessment, Planning, Implementation, Know It Works, Restrictive Practice, and Continuing Professional Development and Supervision.

Prior to commencing a self-assessment, you should review the PBS Capability Framework and identify the practitioner level that you consider reflects your current knowledge and skills (see the Positive Behaviour Support Capability Framework, pages 9-11).

How to use the self-assessment tool – Advanced Practitioner

- A self-assessment at an advanced practitioner level requires you to complete the self-assessment tool for **a core practitioner** and **proficient practitioner** before proceeding to self-assessment tools for an advanced practitioner. All of these self-assessment tools are included in this document.
- You should also meet all core and proficient practitioner knowledge and skills capabilities before progressing to this self-assessment tool for an **advanced practitioner**, that is,
  - STEP 1: Complete self-assessment tool for core practitioner
  - STEP 2: If you meet all capability items at the core level, complete the self-assessment tool for a **proficient practitioner**
  - STEP 3: If you meet all capability items at the proficient level, complete the self-assessment tool for an **advanced practitioner**
- Download the self-assessment document from the NDIS Commission website and save to your computer using the following naming convention:
  Surname, first name – Advanced Practitioner Self-assessment Tool.

- For each of the capability items in the self-assessment tool, select the rating that applies to you according to the definitions in the table below. This is done by clicking the box in the column next to the capability item that matches the rating you want to select.

Item	Capability rating	Criteria
1	Capability met	The practitioner has the knowledge or skill described in column 2 of the relevant table in the self-assessment tool
2	Developing capability	The practitioner is in the process of developing the knowledge or skill described in column 2 of the relevant table in the self-assessment tool; and can demonstrate progression against existing professional development goals.
3	Capability not met	The practitioner does not have the knowledge or skill described in column 2 of the relevant table in the self-assessment tool

- At the bottom of the form, indicate the type or source of evidence that you consider supports your self-assessment where you are *meeting* or *developing capability* for the items. Sources of evidence should be included in a Portfolio of Evidence (see the Self-assessment Resource Guide for the Positive Behaviour Support Capability Framework, section 2.2).

- To self-assess at an **advanced practitioner** level, you should have assessed yourself as
  - *Capability met* for each knowledge and skill capability item for a **core** and a **proficient practitioner**, AND
  - *Capability met* or *developing capability* for each capability item for an **advanced practitioner** as set out in the Self-Assessment Tool.

    See the Self-assessment Resource Guide for the Positive Behaviour Support Capability Framework, section 2.1, table 3.

- You may also want to review the self-assessment tool for a **specialist practitioner** if you have an area of specialisation relevant to positive behaviour support. The tool may assist you to identify areas in which you can extend your knowledge and skills over time.

NOTE: Complete the self-assessment tools for a **core practitioner** and a **proficient practitioner** before this self-assessment tool for an advanced practitioner.

Self-Assessment Tool for an Advanced Behaviour Support Practitioner				
Item	**Advanced Capabilities**	**Capability met**	**Developing capability**	**Capability not met**
A1	Synthesise and integrate information from a range of sources	☐	☐	☐
A2	Make effective decisions in complex situations using advanced critical thinking and analytical skills	☐	☐	☐
A3	Demonstrate advanced knowledge and skills across the PBS Capability Framework and in fields that complement the positive behaviour support approach	☐	☐	☐
A4	Shape strategic thinking in positive behaviour support	☐	☐	☐
A5	Achieve results in system change that enhance the rights of persons with disability	☐	☐	☐
A6	Provide practice leadership across settings and interactions with stakeholders	☐	☐	☐
A7	Provide specialist behavioural intervention support as part of a multi-disciplinary team working in complex contexts	☐	☐	☐
A8	Provide peer support or direct supervision to practitioners at other levels	☐	☐	☐
Sources of Evidence				
Examples: Behaviour Assessment Reports; behaviour support needs assessment reports, court reports; evidence of outcome measurement, policy or strategic planning documents for behaviour support service delivery; de-identified comprehensive behaviour support plans for participants with complex needs.				
a.				
b.				
c.				
d.				
e.				
Statement about why these sources of evidence are relevant				

3.5 Self-Assessment Tool for the PBS Capability Framework – Specialist Behaviour Support Practitioner

Overview

The Self-assessment Tool is based on the Positive Behaviour Support (PBS) Capability Framework. The PBS Capability Framework provides a description of four levels of practitioners and, for each level, outlines the capabilities for practitioners across seven domains of behaviour support practice (see the Self-assessment Resource Guide for the Positive Behaviour Support Capability Framework for more details). The seven capability domains are: Interim Response, Functional Assessment, Planning, Implementation, Know It Works, Restrictive Practice, and Continuing Professional Development and Supervision.

Prior to commencing a self-assessment, you should review the PBS Capability Framework and identify the practitioner level that you consider reflects your current knowledge and skills (see the Positive Behaviour Support Capability Framework, pages 9-11).

How to use the self-assessment tool – Specialist Practitioner

- A self-assessment at a **specialist practitioner** level requires you to ***first complete***,
  - the self-assessment tool for a **proficient practitioner**, OR
  - the self-assessment tool for an **advanced practitioner**.

- You should also meet all core and proficient practitioner capabilities **or** have met or be developing capabilities as an advanced practitioner before progressing to this self-assessment tool for a **specialist practitioner**, that is,
  - STEP 1: Complete the self-assessment tool for a **proficient practitioner OR** an **advanced practitioner**
  - STEP 2: If you meet all capability items at the proficient or advanced levels, then complete the self-assessment tool for a **specialist practitioner**

- Download the self-assessment document from the NDIS Commission website and save to your computer using the following naming convention:
  Surname, first name – Specialist Practitioner Self-assessment Tool.

- For each of the capability items in the self-assessment tool, select the rating that applies to you according to the definitions in the table below. This is done by clicking the box in the column next to the capability item that matches the rating you want to select.

Item	Capability rating	Criteria
1	Capability met	The practitioner has the knowledge or skill described in column 2 of the relevant table in the self-assessment tool
2	Developing capability	The practitioner is in the process of developing the knowledge or skill described in column 2 of the relevant table in the self-assessment tool; and can demonstrate progression against existing professional development goals.
3	Capability not met	The practitioner does not have the knowledge or skill described in column 2 of the relevant table in the self-assessment tool

- At the bottom of the form, indicate the type or source of evidence that you consider supports your self-assessment where you are *meeting* or *developing capability* for the items. Sources of evidence should be included in a Portfolio of Evidence (see the Self-assessment Resource Guide for the Positive Behaviour Support Capability Framework, section 2.2).

- To self-assess at a **specialist practitioner** level, you should have assessed yourself as
  - *Capability met* for each knowledge and skill capability item for a **proficient practitioner** OR
    c*apability met* or *developing capability* for each capability item for an **advanced practitioner**

    AND
  - *Capability met* or *developing capability* for each capability item for a **specialist practitioner** as set out in the Self-Assessment Tool.

    See the Self-assessment Resource Guide for the Positive Behaviour Support Capability Framework, section 2.1, table 3.

NOTE: Before completing this self-assessment tool for an specialist practitioner, you need to complete the self-assessment tools for a,

- **core** practitioner and a **proficient** practitioner; **OR**
- **core** practitioner**, proficient** practitioner and an **advanced** practitioner.

Self-Assessment Tool for a Specialist Behaviour Support Practitioner				
Item	**Capabilities in speciality area**	**Capability met**	**Developing capability**	**Capability not met**
S1	Demonstrates skills and abilities in a practice speciality area (for example, dual diagnosis, forensic, trauma-informed practice, augmentative and alternative communication)	☐	☐	☐
S2	Demonstrates the skills and ability to provide supervision and support to other practitioners in their area of expertise	☐	☐	☐
Practice Speciality Area: Please provide specific details of your speciality area				
Sources of Evidence				
Examples: Extensive experience in a speciality area outlined in resume; certified copies of undergraduate or post-graduate qualifications in speciality area; authored clinical papers or journal articles; presentations at conferences focused on speciality area				
a.				
b.				
c.				
d.				
e.				
Statement about why these sources of evidence are relevant				

3.6 Endorsement Tool

Practitioner details	
Name	
Existing NDIS Commission Practitioner Identification Number	
Phone	
Email	

Practitioner Self-assessed Level (please click on box or cross X)			
☐ Core	☐ Proficient	☐ Advanced	☐ Specialist

Supervisor details	
Name	
Phone	
Email	
Practitioner identification number (if applicable)	
Organisation and work address	
What is your relationship to the practitioner?	
How long have you worked with the practitioner?	
What is your technical experience and skills in behaviour support?	

Supervisor Assessed Level of the applicant (please click on box or cross X)			
☐ Core	☐ Proficient	☐ Advanced	☐ Specialist

Provide comments if the supervisor assessment was different to the behaviour support practitioner's self-assessed level, and how this was resolved.

Based on your knowledge of the behaviour support practitioner and the Portfolio of Evidence presented, please check (X) the appropriate box that represents your understanding of the practitioner's capabilities against their self-assessed level i.e. core, proficient, advanced or specialist practitioner level.

Please select practitioner levels reviewed:

☐ I reviewed the Core Practitioner Self-Assessment Tool and Portfolio of Evidence

Core Practitioner Capability Domains	Capability met	Developing capability	Capability not met
1. Interim Response	☐	☐	☐
2. Functional Assessment	☐	☐	☐
3. Planning	☐	☐	☐
4. Implementation	☐	☐	☐
5. Know it works	☐	☐	☐
6. Reducing and eliminating restrictive practice	☐	☐	☐
7. Continuing Professional Development and Supervision	☐	☐	☐

☐ I reviewed the Proficient Practitioner Self-Assessment Tool and Portfolio of Evidence

Proficient Practitioner Capability Domains	Capability met	Developing capability	Capability not met
1. Interim Response	☐	☐	☐
2. Functional Assessment	☐	☐	☐
3. Planning	☐	☐	☐
4. Implementation	☐	☐	☐
5. Know it works	☐	☐	☐
6. Reducing and eliminating restrictive practice	☐	☐	☐
7. Continuing Professional Development and Supervision	☒	☐	☐

☐ I reviewed the Advanced Practitioner Self-Assessment Tool and Portfolio of Evidence

Advanced Practitioner Capabilities	☐ Capability met	☐ Developing capability	☐ Capability not met

☐ I reviewed the Specialist Practitioner Self-Assessment Tool and Portfolio of Evidence

Specialist Practitioner Capabilities	☐ Capability met	☐ Developing capability	☐ Capability not met

☐ **Endorsement**: I confirm that I have endorsed the practitioner's self-assessment as their supervisor.

☐ **Consent**: I consent to being contacted by the NDIS Quality and Safeguards Commission to discuss my supervision under the agreement, the self-assessment, the endorsement or any other matter relevant to the practitioner's application for suitability.

Supervisor signature: **Date:**

Practitioner signature: **Date:**

NDIS Quality and Safeguards Commission

3.7 Curriculum Vitae (Resume)

Name: _____ **NDIS Practitioner ID number:** _____

NDIS Provider Name: _____ **NDIS Provider Registration Number:** _____

EMPLOYMENT SUMMARY

Year	Time in position	Position title	Employer	Relevance to Behaviour Support

(Add or delete additional rows as required)

EDUCATION AND QUALIFICATIONS

Year completed	Name of qualification	Training institute / organisation

(Add or delete additional rows as required)

RELEVANT TRAINING, COURSES, WORKSHOPS (Attended or presented in last 5 years)

Year completed	Name of training or course	Training institute / organisation

(Add or delete additional rows as required)

3.8 Continuing Professional Development Plan

Name:	**Practitioner ID:**
Plan Start Date:	**Plan End Date:**
My Strengths	
PBS Capability Framework Knowledge	
PBS Capability Framework Skills	

Goal	Strategy	First Steps	Resources	Planned Completion	Outcome/ Evidence of Progress

Practitioner Signature:

Supervisor/Provider Signature:

3.9 Professional Learning Goals Achievement Record

Instructions:

1. The Positive Behaviour Support Learning Goals from the Supervision Agreement (refer to section 3.8) can be transferred to the Professional Learning Goals Achievement Record by the practitioner into the first column noting the knowledge or skill to be developed.
2. The supervisor can then note when the practitioner has satisfactorily achieved each goal and any relevant comments (second column)
3. Both the practitioner and supervisor sign and date to acknowledge the completion of each goal (third column)

Capability Framework Knowledge or Skill	Goal Achieved (include comments and evidence)	Completion Date & Signature

(Add or delete additional rows as required)

3.10 Supervision Agreement

Date of Agreement	
Supervisee	
Supervisor	
Review Date	
Frequency of Sessions	
Length of Sessions (approx.)	

Confidentiality	
How will sessions be recorded?	
Where will records be stored?	
Who will have access to the records?	
What will happen to the records if the supervisee leaves the position?	
Threshold for when information discussed in supervision might need to be shared and with whom?	

Positive Behaviour Support Learning Goals		
Learning Goals	**Actions**	**Resources**

(Add or delete additional rows as required)

Standing Agenda Items

Expectations	
The supervisee will prepare for meetings by…	
The supervisor will prepare for meetings by…	
Should a meeting need to be rescheduled we agree to…	

Agreement		
Supervisor name:	Supervisor signature:	Date:
Supervisee name:	Supervisee signature:	Date:

3.11 Information Sheet: Supervision Methods and Modes

The specialist behaviour support Quality Indicators specify that NDIS behaviour support practitioners should receive clinical supervision for their work practices in delivering behaviour support to NDIS participants. The PBS Capability Framework acknowledges that there are different levels of practitioners that may have different needs for both method and mode of supervision.

The NDIS Commission has not set a minimum requirement for the frequency of supervision, however best practice principles should apply. Supervision frequency will also depend on the practitioner level and can be determined in the Supervision Agreement between practitioners and supervisors.

It is essential that core level practitioners receive regular professional supervision if they are developing behaviour support plans that contain regulated restrictive practices. A core level behaviour support practitioner should engage in direct professional supervision from a supervisor who is a proficient behaviour support practitioner or above (as defined in the PBS Capability Framework).

Methods of Supervision

The method of supervision that a practitioner receives will depend on their level of skill and expertise. Detailed below are the different methods of supervision and support that a practitioner may access as part of their ongoing development.

Direct Professional Supervision

Direct professional supervision should be provided by a supervisor with a higher level of skill or knowledge than the practitioner. A supervisor may be a behaviour support practitioner, manager or other professional depending on the practitioner's professional needs. A core level behaviour support practitioner should engage in direct professional supervision from a supervisor who is a proficient behaviour support practitioner or above (as defined in the PBS Capability Framework).

Direct professional supervision is a collaborative process that occurs on a regular basis. It should be based on a culture of continuous improvement, tailored to the needs of the individual, have mutually defined expectations and under a Supervision Agreement. An example Supervision Agreement has been provided in section 3.8. For practitioners who are new to receiving professional supervision for behaviour support, there is an information sheet in section 3.10 on the important elements of setting up a new supervision relationship.

Peer Supervision or Support

Peer supervision or support occurs between two practitioners who are at the same practitioner level according to the PBS Capability Framework, and where that level is either proficient or above. The focus of peer supervision or support should be on reflective practice. Peer supervision should be recorded and signed as a true record by both parties.

Group Supervision

Practitioners at a proficient level or above may benefit from participating in group supervision or reflective practice. Group supervision should follow an agenda and may include, for example, clinical discussions, information sharing about a particular topic, a case presentation, or supervising others. Group supervision should be recorded and signed as a true record by group participants.

Although not directly a method of group supervision, participation in a Community of Practice (CoP) focused on an element of positive behaviour support can be a valuable opportunity for practitioners to increase knowledge, as well as provide and receive support from peers. Notes or minutes from CoP meetings should be taken as a true record of practitioner involvement.

Managerial or Administrative Supervision

In some instances, a practitioner may receive managerial or administrative supervision. This includes monitoring of their performance towards achievement of organisational goals. It may also include an element of evaluation and appraisal of a practitioner's performance. A practitioner may have goals within their continuing professional development plan that could be worked on or achieved through managerial or administrative supervision.

Mentoring

Mentoring is an activity that focuses on the development of a specific skill or expertise. Mentoring should be provided by someone with a skill set or knowledge that is relevant to the capability gaps or professional development goals of a practitioner. A mentor may or may not be another NDIS behaviour support practitioner.

Coaching

Coaching can be for an individual, group or team. It provides direction and instruction to learn a skill or work towards a goal. A coach would usually be engaged by an individual to learn a new skill. However coaching can also be applied during workshops, seminars, tutorials or supervised practice.

Multi-Modal Supervision

It is acknowledged that practitioners may be engaged in multiple methods of supervision and that supervision methods may change overtime. Methods and the purpose of supervision can be captured in a practitioner's Continuing Professional Development Plan. Multi-modal supervision is important to ensure that all aspects of the PBS Capability Framework can be addressed, including the legislative framework, underpinning principles and values, knowledge, and skills across the seven capability domains.

Modes of Supervision

The mode of supervision is 'how' supervision occurs. The mode will depend on the needs of the behaviour support practitioner, the capacity of the supervisor and other factors such as geographical location.

Face to Face

This is where the supervisor and behaviour support practitioner meet in person. When the supervisor and practitioner are located in a way that allows this in-person meeting there is also scope for the supervision relationship to include direct observations, modelling, coaching, co-facilitation and teaching.

Distance

This is where the supervisor and behaviour support practitioner are located remotely from each other and are unable to meet in-person. Supervision is conducted via telephone, videoconference or a web-based platform. Distance supervision poses a challenge for direct observations, modelling, co-facilitation and teaching. This challenge can be overcome by practitioners gaining consent to take video footage of practice examples or facilitating a session or training.

Evaluating Supervision

An important part of supervision, regardless of the method or mode, is to regularly evaluate the supervisor-supervisee relationship. At a minimum, this should be done annually. An example supervision evaluation is at section 3.12.

Reflective Practice

Reflective practice in supervision is a process of describing, analysing, evaluating and making plans about practice. It allows a practitioner to learn through their experiences and results in changes or creates new learnings (Allin & Turnock, 2007). There are several tools or processes that can facilitate reflective practice in supervision. Two examples of these are below.

Gibb's Model of Reflection

This 6-step process takes the practitioner on a reflective journey through a practice example:

- **Description –** What happened (be factual)
- **Feelings –** What were you thinking and feeling?
- **Evaluation –** What was good and bad about the experience?
- **Analysis –** What sense can you make of the situation?
- **Conclusion –** What else could you have done
- **Action Plan –** If it arose again what would you do?

A reflective practice example tool based on Gibbs' (1988) Model of Reflection has been included in section 3.13.

4+1 Questions

The 4 + 1 Questions (Sanderson & Lewis, 2012) is a reflective problem-solving tool that aims to help practitioners think about a current situation or problem and what needs to change for them to move forward. The tool provides a structured approach to ensure previous efforts and learning are not lost as practitioners move to new actions. There are five questions: What have we tried? What have we learnt? What are we pleased about? What are we concerned about? What do we need to do next? The 4 + 1 template is available from Helen Sanderson and Associates (UK)

3.12 Information Sheet: Setting up a new supervision relationship

- **Find a suitable supervisor** – A supervisor should be someone whom the practitioner respects and has the skills and experience to provide supervision as required by the practitioner. Spending the time to find the right supervisor helps to build trust and rapport. Confirming the cost of supervision at the beginning of supervision is important.
- **Establish roles and responsibilities** – Discussing and agreeing on expectations around roles and responsibilities at the beginning is important. How much and what preparation will be done before sessions; follow-up and agreed actions between sessions; contact between sessions; and additional support.
- **Establish a Supervision Agreement** – Once you have found the person who will provide the supervision, it is important to put an agreement in place. The agreement sets the boundaries and expectations of the relationship and ensures transparency from the beginning of the relationship. The agreement should also include the meeting length and frequency (one hour, once a month is a good benchmark).
- **Determine the venue or technology platform** – If supervision is to be face-to-face, it is important to ensure that the space where it takes place is private, free from distraction and a space where both the supervisor and practitioner feel safe. If the supervision is to be delivered remotely, then the technology platform used should be something both the practitioner and supervisor are able to access.
- **Communication and Feedback** – Supervision is a two-way interaction. The skill of giving and receiving constructive feedback is important for both the supervisor and practitioner. Feedback should be clear, regular, non-threatening and balanced with both positive and constructive elements.
- **Reflective Practice** – This is an important part of supervision. In one-on-one professional supervision, it can be a good final agenda item. The practitioner can prepare the tool provided in section 3.13 prior to the supervision session. The action plan section is completed collaboratively during supervision.
- **Building on the relationship** – effective supervision relies on a relationship based on mutual respect, trust and rapport. It is important to continue to build on the relationship. Reviewing the supervision relationship regularly can be an important part of building the relationship. An example supervision evaluation tool is at section 3.12.

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3.13 Supervision Record

Supervisee		Standard Agenda Items	
Supervisor		1.	4.
Date		2.	5.
		3.	6.

Opening Round: What is one thing that has been working well for you at work over the past month?		
Discussion	**Action**	**Person Responsible**
Discussion	**Action**	**Person Responsible**

Opening Round: What is one thing that has been working well for you at work over the past month?		
Agenda items for next session	**Preparation required**	**Person Responsible**

Supervisee signature: _____

Supervisor signature: _____

Next supervision date: _____

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3.14 Supervision Evaluation

Supervision evaluation				
1. The method of clinical supervision I receive is meeting my needs				
Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
☐	☐	☐	☐	☐
Comments:				
2. The frequency and duration of clinical supervision I receive is meeting my needs				
Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
☐	☐	☐	☐	☐
Comments:				
3. I have a good working relationship with my supervisor				
Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
☐	☐	☐	☐	☐
Comments:				
4. Supervision encourages me to talk about my work in ways that are comfortable for me				
Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
☐	☐	☐	☐	☐
Comments:				
5. Supervision encourages me find my own solutions to challenges I experience in my work				
Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
☐	☐	☐	☐	☐
Comments:				

Supervision evaluation				
6. Supervision supports me to develop the knowledge and skills identified in my Self-Assessment.				
Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
☐	☐	☐	☐	☐
Comments:				
7. I receive positive reinforcement when I acquire new skills and knowledge				
Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
☐	☐	☐	☐	☐
Comments:				
8. My supervisor and I are both meeting the expectations we set out in the supervision agreement				
Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
☐	☐	☐	☐	☐
Comments:				
9. Supervision follows a plan and each session results in an action plan				
Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
☐	☐	☐	☐	☐
Comments:				
10. Other comments regarding supervision over the past 12 months				

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3.15 Reflective Practice Tool

Reflective practice tool
Description – What happened (be factual)
Feelings – What were you thinking and feeling at the time?
Evaluation – What was good and bad about what happened?
Analysis - What sense can you make out of what happened?
Conclusion – What else would you have done or perhaps should have done?
Action Plan – If this happens again, what would you do differently; or is there something you need to do now to ensure if does not happen again (or to minimise the risk)?

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Appendix: Legislative and related references for the PBS Capability Framework Self-Assessment Tool

1. Interim Response Capability

- *NDIS (Restrictive Practices and Behaviour Support) Rules 2018*: sections 11 (2)(a), 12 (2)(c), 13 (2)(a) and 19 (2)(a)
- *NDIS (Provider Registration and Practice Standards) Rules 2018*: Schedule 3, clause 9; and Schedule 4, clause 10
- *NDIS (Quality Indicators) Guidelines 2018*: sections 39 (7), 44 (1) and (2), 53 (5) and 54 (1), (2) and (3)

2. Functional Assessment Capability

- *NDIS (Restrictive Practices and Behaviour Support) Rules 2018*: sections 20 (3)(b) and (5) and 29(2)
- *NDIS (Provider Registration and Practice Standards) Rules 2018*: Schedule 1; and Schedule 3, clause 3
- *NDIS (Quality Indicators) Guidelines 2018*: sections 9(4), 14(1), 20(1), 40 (1) and (2) and 49(1)

3. Planning Capability

- *NDIS (Restrictive Practices and Behaviour Support) Rules 2018*: sections 18 to 21, 23 and 24
- *NDIS (Provider Registration and Practice Standards) Rules 2018*: Schedule 1, clause 19; and Schedule 3, clause 5
- *NDIS (Quality Indicators) Guidelines 2018*: sections 19, 40 and 49

4. Implementation Capability

- *NDIS (Restrictive Practices and Behaviour Support) Rules 2018*: section 21(1)
- *NDIS (Provider Registration and Practice Standards) Rules 2018*: Schedule 3, clause 6; and Schedule 4, clause 6
- *NDIS (Quality Indicators) Guidelines 2018*: sections 41(1)-(7) and 50(1)-(7)

5. Know It Works Capability

- *NDIS (Restrictive Practices and Behaviour Support) Rules 2018*: section 21
- *NDIS (Provider Registration and Practice Standards) Rules 2018*: Schedule 1; Schedule 3, clause 7; and Schedule 4, clauses 7 and 8
- *NDIS (Quality Indicators) Guidelines 2018*: Part 2; and sections 42, 51 and 52

6. Restrictive Practices Capability

- *NDIS (Restrictive Practices and Behaviour Support) Rules 2018*: sections 8 to 15 and 18 to 24
- *NDIS (Provider Registration and Practice Standards) Rules 2018*: Schedule 1; Schedule 3, clauses 4 and 8; and Schedule 4, clauses 4 and 7 to 9
- *NDIS (Quality Indicators) Guidelines 2018*: Part 2; and sections 39, 43, 48, 51 and 53

7. Continuing Professional Development and Supervision Capability

- *NDIS (Quality Indicators) Guidelines* 2018: Part 2; Part 4, section 38; and Part 5, sections 47 and 50