

<b>Policy Number:</b> SE4.254	<b>Policy Section:</b> Supports and Services	<b>Effective:</b> May 15, 2012 <b>Amended:</b> April 1, 2025
<b>Title:</b> Behaviour Support and Safety Planning Policy		<b>Executive Sponsor:</b> Vice President, Service Delivery and Innovation Vice President, Quality Service and Indigenous Relations

## SUMMARY

This policy explains Behavioural Support Plans and Safety Plans.

It describes how 'restricted practices' may be needed to keep people safe and explains how their use is planned in certain situations.

The policy is part of a set of tools including the *Behaviour Support and Safety Planning: A Guide for Service Providers*.

The policy explains what CLBC staff, service providers, and individuals must do for a safety plan to be approved, and what to do after restricted practices are used.

## 1. PURPOSE

The *Behaviour Support and Safety Planning Policy* outlines the responsibilities of Service Providers who directly support individuals with challenging behaviours, and Behavioural Consultants who work with these individuals, their families and/or support networks, and CLBC staff.

This policy sets out requirements for the development, implementation, monitoring and review of Behaviour Support Plans and Safety Plans. Compliance with this policy is a service requirement of the *Service Terms and Conditions for Contracts Between Community Living British Columbia and Service Providers* (Service Terms and Conditions).

This policy will be reviewed annually together with the *Behaviour Support and Safety Planning: Procedures and Practice Guide for CLBC Staff* (the Procedures and Practice Guide), or the *Behaviour Support and Safety Planning: A Guide for Service Providers* (the Service Provider Guide). They are applied as one standardized set of requirements and guidance for behaviour support, including the development and implementation of Behaviour Support Plans and Safety Plans.

## 2. DEFINITIONS

**Behaviour Support:** The strategies and interventions used to reduce challenging behaviour, increase quality of life, and minimize harm. These behavioural interventions are functionally based and are integrated with person centred planning.

**Behaviour Support Plan:** An individualized, written document developed to inform and enhance the support provided to individuals who have been identified as requiring behaviour support. It outlines specific behaviour support interventions, strategies, and implementation requirements.

**Behavioural Consultant:**

- i) A professional with graduate qualifications (that is, has completed a Bachelor's **and** Master's or Doctoral degree in Clinical or Educational Psychology or Special Education), or
- ii) A Board Certified Behaviour Analyst, or
- iii) A person who has completed a Bachelor's degree and is under the clinical supervision of a professional with graduate qualifications (as above) and is either:
  - a. In the process of completing graduate work (as above), or
  - b. Has extensive demonstrated competence in functional behaviour assessment and the development and implementation of Behaviour Support Plans and Safety Plans.

**Committee:** An individual appointed by the Supreme Court of British Columbia under the *Patient's Property Act* to assume responsibility for managing either or both the personal (Committee of Person) and/ or financial and legal affairs (Committee of Estate) of an adult who has been found "incapable." Committees have the right and the duty to protect the adult or their property and assume full decision- making responsibility on behalf of the adult.

**Cultural Safety:** An outcome of respectful engagement based on recognition of the power imbalances inherent to service systems, and the work to address these imbalances. A culturally safe environment for Indigenous peoples is one that is physically, socially, emotionally, and spiritually safe without challenge, ignorance, or denial of an individual's identity. Practicing cultural safety requires having knowledge of the colonial, sociopolitical, and historical events that trigger disparities encountered by Indigenous peoples and perpetuate and maintain ongoing racism and unequal treatment.

**Functional Behaviour Assessment:** A structured process combining direct observation, data collection, and analysis to learn more about the individual, their behaviour, and its function.

**Licensed Facility:** Any facility licensed under the *Community Care and Assisted Living Act*, and subject to oversight by the Medical Health Officer through each regional Health Authority.

**Precursor Behaviour:** A behaviour that predictably occurs before a more challenging behaviour and can be used to identify that the challenging behaviour is about to occur.

**Prohibited Practice:** An action that is reliant on fear, pain, or threats, or that constitutes an infringement on the fundamental human entitlements or rights of an individual. Includes the use of any restricted practice in a manner other than authorized. A prohibited practice can never be used.

**Representative:** A trusted relative, friend or advocate authorized by an adult under the provisions of a Representation Agreement (see Sections 7 or 9 of the *Representation Agreement Act*), to support them with decision making or to make decisions on their behalf when they are incapable of making decisions independently.

**Restraint:** Use of physical, mechanical, environmental or other means to temporarily subdue or limit an individual's right to freedom of movement.

- Physical restraint – use of physical force by one or more persons to prevent, restrict, or subdue the normal movement of any part of the individual's body
- Mechanical restraint – use of a device to control an individual's movement
- Environmental restraint – restriction of an individual's free access to all parts of their environment, including limiting access to places or items

**Restricted Practices:** Techniques or strategies that limit an individual's rights, behaviour or freedom of movement, including:

- Restriction of rights and restraint, except
  - Where it is for **medical purposes** as prescribed by a regulated health care professional, and is not required for behavioural purposes

**Restriction of Rights:** This involves limiting or removing an individual's access to activities or actions that restrict an individual's autonomy, choices, and any action that impacts an individual's right to privacy.

**Safety Plan:** An individualized, written document designed to address situations where critical and unsafe behaviour has the potential to harm the individual or those around them and restricted practices are needed. The Safety Plan outlines the strategies and procedures to respond to the behaviours and reduce risk and is linked directly to the behaviour support strategies outlined in the Behaviour Support Plan.

**Service Provider:** For the purposes of this policy, a person or organization under contract with CLBC to deliver supports and services directly to individuals and implements Behaviour Support Plans and Safety Plans. This does not include agencies providing communication and behavioural support.

### 3. POLICY

#### 3.1 Guiding Principles

These principles are foundational to the behaviour support planning approach and guide the practice of CLBC staff, Service Providers and Behavioural Consultants.

##### ***Respect Individual Rights and Identity***

Individuals are treated with the same degree of respect and dignity that would be afforded to any citizen. In particular, the dignity, values, cultural safety, cultural identity, sexual orientation, gender identity and expression, and personal choices of the individual must be respected and safeguarded.

##### ***Focus on Quality of Life***

Behaviour support focuses on benefits for the individual by promoting quality of life in the areas of personal development, self determination, interpersonal relations, social inclusion, rights, and emotional, physical, and material wellbeing.

##### ***Prioritize Least Intrusive Interventions***

All interventions must be the least intrusive option for addressing the behaviour while ensuring the safety of the individual and others.

##### ***Continuous Assessment and Monitoring***

Behaviour Support Plans and Safety Plans should be continually assessed and monitored to ensure their effectiveness and to make necessary adjustments.

#### 3.2 Operational Context

**3.2.1** Behaviour support planning and safety planning is a collaborative approach between CLBC, Behavioural Consultants, Service Providers, individuals, their families and/or support networks, and community partners. It is an important element of improving individual quality of life that can be incorporated into both formal and informal supports.

**3.2.2** Legal authority for the implementation of Behaviour Support approaches that involve restricted practices is derived from individual consent, the *Community Care and Assisted Living Act – Residential Care Regulations*, or the *Adult Guardianship Act*. How CLBC obtains consent for implementation of these approaches differs across scenarios and applicable legislation.

**3.2.3** This policy will be reviewed on an annual basis, led by CLBC Quality Assurance working in collaboration with the CLBC Policy department.

### **3.3 Behaviour Support Plans**

Behaviour Support Plans, as defined above, **may** be developed and implemented for individuals who exhibit behaviour that is difficult or unconstructive. They **must** be developed and implemented for individuals who exhibit behaviour that is serious or critical and unsafe.

Behaviour Support Plans:

- Outline an approach for reducing challenging behaviour while enhancing an individual's quality of life.
- Are developed with the involvement of the individual, their family and/or support network, Service Provider staff, and others as necessary.
- Must include a functional behaviour assessment.
- Must not include restricted practices.
- Are led in their development by a person with training and expertise in completing functional behavioural assessments and Behaviour Support Plans.
- Must be made available to Service Provider staff for use and reference.
- Must have copies of plans developed by Service Providers available to CLBC upon request.

### **3.4 Restricted Practices**

Restricted practices:

- May only be used as a planned intervention when they are outlined in a Safety Plan and required authorizations have been provided. See *3.5 Safety Plans* for further details.
- Must not be included in a Behaviour Support Plan.
- May be used without a Safety Plan or authorizations in an emergency, where a person's safety is at imminent risk.

Use of a restricted practice is reportable as outlined in the *Critical Incidents Policy* even when used as part of a Safety Plan. See the *Critical Incidents Policy* for further information.

Restricted practices needed for behavioural **and** medical purposes must be included in a Safety Plan.

### **3.5 Safety Plans**

**3.5.1** Safety Plans, as defined above, **must** be developed and implemented when restricted practices are needed in response to critical or unsafe behaviour.

## Safety Plans:

- Must be developed by a Behavioural Consultant.
- Can only be put in place as an adjunct to a Behaviour Support Plan with clear links between the behaviour(s) identified in the Behaviour Support Plan and the restricted practice required. Are developed with the participation of individuals, their families and/or support networks, who must be fully informed about the rationale for their use, including any proposed restricted practices.
- Must include the key content identified in the *Service Provider Guide - Appendix III: Key Elements of Behaviour Support and Safety Planning*.
- Must include a *Safety Plan: Medical Considerations Form* to ensure consideration of medical factors that may influence behaviour.
- Must be reviewed every six months and submitted to CLBC.
- Must develop a new Safety Plan when restricted practices are added or changed.
- Must be discontinued if the restricted practice(s) identified within have not been used for 12 months, as indicated by critical incident reporting, and/or other data collected.
- Must not have more than one active Safety Plan per individual.

**3.5.2** Before a Safety Plan can be implemented, it must be authorized in writing by each of the following:

- The individual and/or their Committee of Person or Representative (as established under Section 9 of the *Representation Agreement Act*). For all licensed settings, consent requirements under the *Residential Care Regulation* apply.
- A qualified Behavioural Consultant, as defined above in section 2: Definitions.
- A medical practitioner or nurse practitioner **if** the Safety Plan includes restraint(s), as defined in this policy, excluding environmental restraints.
- The Service Provider.
- A CLBC Service Delivery Manager.

**3.5.3** Where an individual resides in an unlicensed setting and consent cannot be obtained or in cases of abuse, neglect or self-neglect, CLBC will determine whether an order made under Section 54 of the *Adult Guardianship Act* is needed to authorize the implementation of a Safety Plan. Prior to making an application for an order, CLBC must follow the Safety Plan development process.

## 3.6 Temporary Safety Plans

**3.6.1** Temporary Safety Plans may be put into place without a Behaviour Support Plan in place where restricted practices are required, and a functional behaviour assessment is being conducted to develop a Behaviour Support Plan. A Temporary Safety Plan can only be in place for **up to 60 days**.

**3.6.2** Temporary Safety Plans require authorization from:

- The individual and/or their Committee of Person or Representative (as established under Section 9 of the *Representation Agreement Act*). For all licensed settings, consent requirements under the *Residential Care Regulations* apply.
- A medical practitioner or nurse practitioner **if** the Safety Plan includes restraint(s), as defined in this policy, excluding environmental restraints.

## 3.7 Roles

### 3.7.1 Service Provider Requirements

Service Providers must:

- Comply with this policy and the *Behaviour Support: A Guide for Service Providers* when developing, implementing, and reviewing a Behaviour Support Plan or Safety Plan.
- Have written internal policies, procedures, and documentation requirements outlining their behaviour support approach.

#### **Safety Plan Development**

When a Safety Plan is needed, Service Providers work with CLBC and a Behavioural Consultant to support the development of a Safety Plan.

When restricted practice(s) in one individual's Safety Plan impacts or has potential to impact others, the Service Provider must develop mitigation strategies to limit this impact.

#### **Behaviour Support Plan and Safety Plan Implementation**

Service Providers implement Behaviour Support Plans and Safety Plans.

Service providers ensure their staff have access to the plans for implementation and review and that they receive and maintain the necessary training and certifications to implement the plans.

#### **Behaviour Support Plan and Safety Plan Review and Evaluation**

Service Providers:

- Review and evaluate Behaviour Support Plans at least every 12 months and update as necessary. Service providers document and track these reviews internally.
- Collect data as per requirements identified in the Behaviour Support Plan and Safety Plan.
- Where there is a Safety Plan, work with the Behaviour Consultant to conduct the Behaviour Support Plan review at six-month intervals to coincide with the Safety Plan review using the *6- Month Safety Plan Review Form*.
- Share data with Behaviour Consultants as part of Safety Plan review process.

### 3.7.2 Behavioural Consultant Requirements

Behavioural Consultants must comply with this policy and the *Guide for Service Providers* when:

- Developing, reviewing, supporting, and evaluating the implementation of a Behaviour Support Plan or Safety Plan, and
- Working with Service Providers to develop and enhance their capacity for behaviour support planning.

Behavioural Consultants must provide CLBC with finalized copies of all Behaviour Support Plans and Safety Plans.

#### **Behaviour Support Plan Development**

Behavioural Consultants must work with the Service Provider, the individual, their family, and/or support network to consider the individual's quality of life when developing a Behaviour Support Plan.

### **Safety Plan Development**

Behavioural Consultants develop Safety Plans to comply with the requirements outlined in 3.5 *Safety Plans* of this policy.

When developing a Safety Plan, Behavioural Consultants:

- Must develop a behavioural support plan if one is not present when a Safety Plan is required.
- Are responsible for ensuring all the required authorizations are obtained. They can work with Service Providers to collect these authorizations.
- Complete the *Safety Plan: Medical Considerations Form* and obtain the medical practitioner or nurse practitioner's authorization signature.

### **Behaviour Support and Safety Plan Implementation**

Behavioural consultants work with Service Providers on the implementation of each plan and transfer knowledge and/or behavioural skills training to support Service Provider readiness and ability.

### **Behaviour Support and Safety Plan Review and Evaluation**

When there is a Safety Plan in place, Behavioural Consultants must review the Safety Plan and the associated Behaviour Support Plan every six months. This includes:

- Reviewing and, as necessary, renewing any requests for exemption from critical incident reporting requirements as per the *Critical Incidents: Restricted Practice Exemption Framework*.
- Reviewing incident data and other information collected by the Service Provider to evaluate how effectively the behaviour support approaches have been used, and whether the plan is meeting the individual's needs.
- Submitting documentation of this review to CLBC using the *Six Month Safety Plan Review Form* to present a summary and analysis of information and data collected over the six-month period.
- Planning for the discontinuation of the Safety Plan together with the Service Provider at the next six-month review if a restricted practice has not been used in the previous six months.

## **3.7.3 CLBC Requirements**

### **Facilitators**

When behavioural services are required, facilitators:

- Work with individuals, their families and/or support networks to identify potential need for behaviour support planning when assisting with and reviewing an individual's Personal Summary as per the *Support and Planning Policy*.
- Work with Quality Service Analysts to support Service Providers to access behavioural services for the individuals they support as per requirements and process outlined in the *Resource Allocation Policy*.
- Immediately report any alleged use of prohibited practices to the Service Provider's liaison analyst.

### **CLBC Analysts**

CLBC Analysts, either as liaison to the Service Provider or to the Behavioural Consultant, carry out the processes necessary to support vendors' policy compliance and the implementation of

Behaviour Support and Safety Plans. Through their review and monitoring activities, analysts have an important role in understanding whether progress toward or achievement of expected outcomes outlined in the individuals' Behaviour Support and/or Safety Plan(s) is occurring.

When Safety Plans are required, analysts:

- Review all Safety Plans and Behaviour Support Plans to ensure that they meet the requirements set out in this policy and in the *Guide for Service Providers*,
- Ensure that all required authorizations have been provided,
- Obtain Service Delivery Manager authorization, and
- Escalate issues in Safety Plan development or implementation with regional leadership.

### **Service Delivery Managers**

- Authorize Safety Plans to ensure they are compliant with all requirements.
- Review service delivery approach.
- Flag issues that may require follow-up. This does not apply to temporary Safety Plans.
- Works with analysts and, as necessary, the Quality Assurance team to resolve or escalate issues in Safety Plan development or implementation that cannot be resolved with Behavioural Consultants and Service Providers.

### **Quality Assurance**

- Ensures organizational compliance with this policy by supporting regions with the review of complex behavioural support and safety planning issues.
- Leads and schedules the annual *Behaviour Support and Safety Planning Policy* review and evaluation. The review is completed with the CLBC Policy department.

## **4. REFERENCES**

### **CLBC**

[Adult Guardianship Policy](#)

[Behaviour Support and Safety Planning: A Guide for Service Providers](#)

[Behaviour Support and Safety Planning: Procedures and Practice Guide](#)

[CLBC Service Standards and Expectations](#)

[CLBC Service Standards: Optional Guidance for Service Providers](#)

[CLBC Service Standards Policy](#)

[Critical Incidents Policy](#)

[Critical Incidents: Request for Exemption Form](#)

[Critical Incidents: Restricted Practice Exemption Framework](#)

[Cultural Safety Policy](#)

[Ethics Code for Behaviour Analysts](#)

[Role of Formal and Informal Representatives Policy](#)

[Service Terms and Conditions for Contracts Between CLBC and Service Providers](#)

[Safety Plan: Six Month Review Form](#)

[Standards for Home Sharing Standards for Home Sharing Policy](#)

[Standards for the Coordination of Home Sharing](#)

[Standards for the Coordination of Home Sharing Policy](#)

[Support and Planning Policy](#)

**BC Government**

[Adult Guardianship Act](#)

[Community Care and Assisted Living Act – Residential Care Regulations](#) [Community Care Licensing Regulations](#)