

CHALLENGING BEHAVIOUR TOOLKIT

**TOOL 3**

**Example Terms of Reference for a  
health service Challenging Behaviour  
Prevention and Response committee**



**Government  
of South Australia**

SA Health

## The following is an example of Terms of Reference, and roles and responsibilities, of a health service's Challenging Behaviour Prevention and Response Committee

Each site or health service committee will produce minutes, agendas and reports that demonstrate that the committee:

- > works towards implementing the SA Health Preventing and Responding to Challenging Behaviour, and Minimising Restrictive Practices in Health Care policies, guidelines and accompanying toolkits, to ensure that patients, carers and consumers receive safe and high – quality healthcare, in a safe environment.
- > has designated responsibility for challenging behaviour prevention, recognition and response activities:
  - uses [Tool 2 – Organisation-wide Self-assessment Audit Tool for challenging behaviour committees](#) to identify areas for improvement in the prevention, recognition and response to challenging behaviour within the Health Service
  - develops and works to an action plan approved annually by the Local Health Network (LHN) Clinical Governance Committee (or equivalent LHN peak decision making committee)
  - escalates unresolved challenging behaviour matters to the LHN Clinical Governance Committee (or equivalent LHN Peak decision making committee), and endorsed by the LHN /Health Service CEO and Governing Board.
  - at a minimum provides the Local Health Network (LHN) Clinical Governance Committee (or equivalent LHN Peak decision making committee) with a quarterly report , and the LHN Governing Board with an annual report
  - uses quality improvement or similar methodology to lead / undertake and document activities to address safety risks and ensure the effectiveness of these activities and these are inclusive of carer and consumer input
- > receives data, information and reports about progress against the action plan from members, Safety Learning System (SLS), Quality Information Performance Hub (QIP Hub) and other relevant sources
- > has membership including a range of relevant skills, knowledge and expertise, and representation from areas including, but not limited to:
  - Consumers
  - Carers
  - Emergency Response Team (or equivalent for Regional LHNs)
  - Safety and Quality, Risk Manager (data and actions arising from incidents)
  - Security Services (or equivalent for Regional LHNs)
  - Wards and units, health care teams (hospital and community based), particularly where incidents are most common
  - Medical and pharmacy services, allied health
  - Workforce Development (education and training)
  - Workforce (WHS professionals)
  - Procurement (equipment supplies)
- > provides expert advice and reports to management, clinical governance committees, carer and consumer groups and other staff, including:
  - assisting with preparation and analysis of data and other information for reports to LHN peak decision making committees (for example, LHN Clinical Governance Committee) and executive as required
  - providing expert advice about priority strategies, education and training requirements, service design and procurement of relevant equipment / device and other
  - providing reports and evidence that demonstrate compliance with the requirements of the Policy Directive and National Safety and Quality Health Service Standards.

- > develops, implements and monitors systems of care, procedures, work instructions and protocols that are in accord with person-centred care, relevant best practice guidelines and other clinical guidance for:
  - prevention, including screening and assessment, observation and monitoring, symptom management and provision of interdisciplinary care and treatment (including referral and escalation pathways), de-escalation and other intervention as required
  - during an incident, including clinical, emergency response team (or equivalent for Regional LHNs) and security staff actions to respond, protect and resolve
  - after an incident, de-brief and support for all workers, review, open disclosure and other strategies to optimise recovery and learning by all persons
- > develops and implements strategies to review and improve the safety of service design and environment, workflow and work practices, and patient journey within the service
- > ensures that incident reporting, investigation and other data capture is in accordance with policy. Uses data to inform the planning and evaluation of strategies
- > ensures that there is collaboration and communication across the service and with other agencies
- > assists with planning and delivery (where possible) of workforce training, including determining staff training needs.
- > Monitors the training conducted (numbers of sessions, topics, numbers and type of staff trained, proportion and spread of staff trained and effectiveness of training)
- > develops and implements mechanisms for communication about challenging behaviour prevention to staff
- > develops and implements mechanisms for patient, carer and family engagement around:
  - individual patient care
  - the development of information materials for patients, carers and consumers
  - service planning, design and evaluation.

## For more information

SA Health

Safety and Quality Unit

Telephone: (08) 8226 9599

[sahealth.sa.gov.au/challengingbehaviourstrategy](https://sahealth.sa.gov.au/challengingbehaviourstrategy)

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