

Family Connect

Restraint-Free Care

The Facts

- There are no known benefits of restraint use.
- Risks involve the actual use of restraints and the negative outcomes after using restraints.
- Residents of care facilities have the right to be free of restraints of any form that are not medically necessary or that are used as a means of coercion, discipline, convenience, or retaliation by staff. [Code of Federal Regulations: 42 C.F.R. §482.13]
- Seclusion or restraint can only be used in emergency situations to ensure a resident's physical safety and when less restrictive interventions have been determined to be ineffective. [Code of Federal Regulations: 42 C.F.R. §482.13]

Types of Restraints

Physical Restraints

Any device that restricts a person's movement and cannot be removed easily by the individual.

Examples:

- Locked geri-chairs/recliner chairs
- Restrictive side rails
- Vest/chest/jacket restraints
- Wrist or ankle ties, belts
- Hand mitts
- Sheet ties
- Tightly wrapped sheets or blankets



Medication Restraints

Medications used to control behavior and administered in addition to the person's regular drug regimen.

Seclusion Restraints

Confining someone to a room or an area so that the person is physically prevented from leaving.

Myths of Protection

- It is a misconception that restraints protect individuals and reduce liability of care staff and the institution.
- Some may try to use restraints to prevent harm, but the reality is that using them will likely *do* harm.

Risks of Restraint Use

While restraints have been used to protect persons from harm, there are many potential harmful outcomes. Besides the risk of violating a person's rights, other known risks include:

- Pneumonia
- Urinary incontinence and constipation
- Increased risk of falls with injuries due to loss of muscle and balance
- Emotional distress and lasting stress with long-term negative health consequences
- Death from being strangled or entrapped

Learning Instead of Restraining

Caregivers should learn to identify the reasons for a behavior. By carefully understanding the individual and the environment, the reasons for behaviors may be found and removed or reduced to resolve the situation for the persona and provide safe, restraint-free care.

Systematic Problem Solving

Systematic problem solving is a useful tool that can be employed by caregivers who know the individual:

1. Ask the person what they need.
2. Ask others who know or might understand what the person wants.
3. Identify contributing factors such as possible sources of pain or discomfort.
4. Evaluate medication use that can lead to the observed behaviors.
5. Assess the person's functional, mental, and psychological status.
6. Assess the environment for possible triggers.

Documentation

Use a behavior log to help understand the behavior.

- When did it start (date and time)?
- How long did it last?
- Where did it happen?
- Who was around?
- What was the person doing?
- What triggered the behavior?
- What improved the behavior?
- How many times did it happen?



Common Care Challenges & Behavioral Interventions

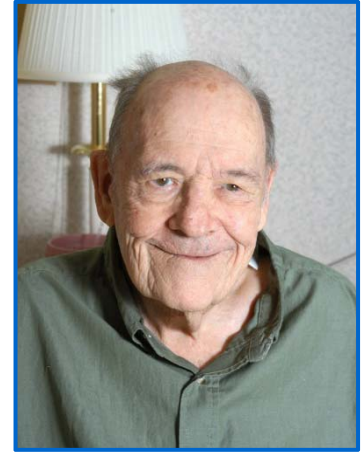
Persons with mental status changes, cognitive deficits, or sensory deficits may show challenging behaviors during activities of daily living. See the table on the last page for details about sources of stress and approaches.

Make a plan: Refer to the **A-B-C Model** to help understand and manage aggression

Tips for Restraint-Free Care

Help eliminate the need for restraints by understanding the person and the surrounding environment.

- Identify and use the least invasive and the least bothersome treatments.
- Cover IV or catheter sites with long sleeves.
- Keep IV bags and tubes out of the person's field of vision.
- Use distractions such as TV, music, activities, etc.
- Provide the most effective lighting (e.g., dimmer or brighter lights)
- Use relaxation techniques such as massages, warm baths, etc.
- Reduce noises that trigger the behaviors.
- Provide personal attention with active listening.
- Engage in conversations to help diminish anxiety.
- Invite people who are familiar to the individual to provide comfort.
- Minimize changes in caregivers.
- Be creative in helping the individual.



NEST Approach

A *nest* is a carefully created environment providing structures, safety, caring, and warmth. NEST training uses a non-pharmacological approach with specially trained providers serving as behavior specialists. These providers use evidence-based interventions for difficult behaviors in frail, older adults with dementia

- N** – *Needs* of the individual
- E** – *Environment* of the individual
- S** – Appropriate levels of *stimulation and rest*
- T** – *Techniques* and approaches by care providers

NEST Process

- Define and name the specific behavior observed.
- Review behavior patterns; consider possible causes and interventions with care team.
- Perform full behavioral evaluation.
- Do behavioral, functional, and leisure assessments.
- Select intervention/protocol based on Simple Pleasures (Buettner, 1999).
- In two weeks, reevaluate, reassess, and modify the intervention.

References

1. Buettner, L.L. (1999). Simple Pleasures: A multilevel sensorimotor intervention for nursing home residents with dementia. *American Journal of Alzheimer's Disease & Other Dementias*, 14(1), 41-52.
2. Smith, M. (2009). Understanding and Managing Aggression [Brochure]. Iowa Geriatric Education Center Info-Connect. Iowa City, Iowa.