

Making the Right Choice

**HELPING NURSING HOME
RESIDENTS EXPERIENCE
FREEDOM FROM RESTRAINTS**

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RESTRAINTS DO NOT HELP PREVENT FALLS. IN FACT...

Restraints are often actually the *cause of injuries or even death*.

Nursing homes are responsible for caring for people and helping them stay as healthy and happy as possible. Restraints may or may not be a part of their care.

No one likes to feel helpless or trapped. A restraint can cause your loved one to become *depressed, confused, agitated, angry or withdrawn*.

Restraints may be necessary in a very few cases, but *most nursing home residents can be safely cared for without using restraints*.

What is a restraint?

A restraint is any method that restricts a person's movement. Two kinds of restraints may be used: physical and/or chemical. The use of any type of restraint is a medical decision and must be ordered by a physician.

Physical restraints

A physical restraint is anything used to keep a person from moving around or moving a part of the body, like the arms or hands. Restraints must never be used to punish a person or to make a person easier to handle.

Physical restraints can include:

- Wrist bindings
- Ankle bindings
- Mittens
- Special chairs, such as geriatric chairs or chairs with trays
- Anything that keeps a person from getting out of a chair or bed, such as: trays, bars, belts, vests, lap cushions

Chemical restraints

A chemical restraint is a drug given to keep a person from striking out or acting in a way that could be harmful. These drugs are helpful when they are used for the right reasons. But they shouldn't be used just to keep a person from pacing or wandering or to make them compliant.

Chemical restraints can include:

- Sedatives make a person relaxed or drowsy.
- Antipsychotics calm a person with mental problems.

As a family member, can I ask a nursing home to use restraints on my loved one?

No. Only a physician can order a restraint for a patient. Staff members may not use restraints when they are not medically needed, even if the person's family members request or approve their use. A restraint is like any other medical treatment. You need to know what medical symptoms are being treated. If there is not a medical reason for the restraint, it should not be used.

Do restraints have risks?

The absence or reduction of mobility can cause health problems or serious complications, such as:

- Death
- Pneumonia
- Falls
- Bed sores or bruises
- Constipation
- Poor nutrition
- Loss of appetite
- Weak bones and muscles
- Stiff joints
- Anxiety
- Lack of sleep
- Depression
- Loss of dignity
- Dehydration (not getting enough to drink)
- Bladder infections (cannot get to bathroom)
- Incontinence (lack of bladder or bowel control)

MY LOVED ONE IS IN RESTRAINTS, WHAT CAN I DO AS A FAMILY MEMBER?

Know the dangers of using restraints. Each restraint has its own risk. To get a better understanding, you can:

- Discuss the current restraint use with the physician and staff, especially if you don't think they are needed.
- Ask about the different things that were tried before restraints were used.
- Ask the physician and staff about the plan for the restraint. How long will it be used? When will it be taken off?
- Ask if the restraint has more benefits than side effects or risks.
- Talk to the staff about your loved one's habits and routines.
- Bring items from home to comfort your loved one.



HOW CAN NURSING HOMES AVOID USING RESTRAINTS?

It's important to know ways to care for people without using restraints. Some of the ways that nursing homes might work to avoid restraints are listed. This list does not contain all possible options.

- Help them get to the bathroom regularly, so they won't fall trying to go on their own.
- Provide a bedside toilet and a low-watt night light.
- Select the right size chair or wheelchair.
- Keep personal items within reach.
- Make sure shoes fit and have non-skid soles.
- Provide your loved one opportunities to be around other people who enjoy the same activities and hobbies.
- Focus on the person's needs and try to provide for them.
- Try to find out why a restraint seems necessary to the staff.
- Use automatic wheelchair locks, if indicated by assessment.
- If your loved one falls when getting out of bed, the bed can be placed at a lower level. A special mat can also be placed at the side of the bed to help avoid injury.

Remember...

Everyone deserves as much freedom and dignity as possible. Restraints should only be used as a last resort. If people are able to move around on their own, it helps them:

- Keep their dignity.
- Feel more content and independent.
- Dress, walk and feed themselves.
- Interact with others and the world around them.
- Keep their muscles working and keep their strength.

To compare local nursing homes' use of restraints, visit www.medicare.gov then select "Compare Nursing Homes in Your Area."

For more information on bed rail safety, see the brochure provided by the Food & Drug Administration, "A Guide to Bed Safety" available at www.primaris.org.



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