

Restraints



Every resident deserves person-centered care!

Unfortunately, restraints are sometimes used improperly to stop or change behaviors that staff may find undesirable. Staff may mistakenly believe restraints ensure safety when, in fact, they create their own dangers and risks. Restraints are used most often on residents who are at risk of falls and residents who are living with dementia and other cognitive decline.

Read on to learn more about the use of **Restraints...**

Nursing Home Reform Act

Federal law states that residents have the right to be free from physical and chemical restraints used for discipline or convenience and not required to treat a resident's medical symptoms.

If a restraint is used, the law requires the facility to use the least restrictive alternative for the least amount of time and document on-going re-evaluation of the need for restraints.



Physical Restraints

Physical restraints are any object or device that a person cannot remove easily, which limits their freedom of movement or normal access to his or her body. Examples include:

- ⇒ Vest restraints
- ⇒ Waist belts
- ⇒ Geri-chairs
- ⇒ Hand mitts
- ⇒ Lap trays
- ⇒ Side rails used to prevent a resident from getting out of bed
- ⇒ Soft ties
- ⇒ Wheelchair moved against a wall
- ⇒ Tucking in a bedsheet so tightly that a resident can't move



Even bars, tables, trays, and belts can be restraints when used to restrict movement or if the resident cannot easily remove them.

Chemical Restraints

Chemical restraints are medications that are used to stop or change the way a resident is acting, to subdue a resident, or for staff convenience, rather than used to treat a medical condition.

Certain meds, like antipsychotic drugs (used to alter emotions or behavior), are often used for this purpose. These can be dangerous for older adults with dementia, and may increase the chance of death.



Residents Deserve Dignity and Respect

Residents who are restraint-free can eat, dress, and move freely, maintain their muscle strength, interact with others, and maintain their freedom and dignity. Nursing homes have many options to help improve resident safety **without resorting to restraints.**



Restraint-Free Care

Examples of using restraint-free care for your residents:

- ◆ Train staff on how to calm residents who are anxious or upset
- ◆ Use person-centered planning to understand the issues that are leading residents to be anxious or restless and respond creatively to those concerns
- ◆ Use pads or pillows to support comfortable and safe body positions in beds and in chairs
- ◆ Respond timely to residents' physical needs for toileting, food, exercise, etc.
- ◆ Provide care and caregiving based on what the resident prefers
- ◆ Help residents get in and out of bed as often as they needed and want to
- ◆ Remove accident hazards (such as clutter and equipment with wheels), wherever possible
- ◆ Make all areas safe for residents to walk in

(Source: http://www.canhr.org/factsheets/nh_fs/html/fs_RestraintFreeCare.htm)

To Report Elder Abuse, Neglect, or Exploitation

Of a nursing home resident by a staff member:
Call State of Michigan LARA: **(800) 882-6006**

Of an adult living anywhere in the community or an adult in a nursing home, if the abuse is by anyone who is *not* a staff member:

Adult Protective Services (APS) Centralized Intake: (855) 444-3911

If you think a crime has occurred: Call your local police/sheriff department (and LARA)

For More Information...

Long Term Care Ombudsman: (517) 394-3027
Tri-County Office on Aging: (800) 405-9141



**Thank
you for
all you
do!**

The Michigan Elder Justice Initiative (MEJI)'s **Excellence in Caring** newsletter is published with grant funds from the **Tri-County Office on Aging.**

Written by: **Tammy Cordes**
Michigan Elder Justice Initiative
15851 S. U.S. 27; Suite 73
Lansing, MI 48906
517-827-8030

Questions or comments? Contact Tammy Cordes at: tcordes@meji.org

Content is for educational purposes and does not represent professional advice.