

Making the Right Choice

Information for People Living in Nursing Homes & Their Families



What You Need To Know About Choice, Falls, & Restraints in Nursing Homes



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What Is A Physical Restraint?

A restraint is anything used to keep a person from moving around or moving a part of the body, like the arms or hands.

Physical Restraints Can Include:

- 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, side rails, or seat belts
- Wrist or ankle bindings, mittens

A restraint is like any other medical treatment. You need to know what medical symptoms are being treated and the many risks related to restraint use. They are not

harmless safety devices as is often thought. If there is not a medical reason for the restraint, it should not be used.

Restraints must never be used to punish a person or to make a person easier to handle.

A physician order is needed before any restraint can be used.



Myths About Restraints:

Myth: Restraints prevent falls and injuries.

Fact: Studies show restraints do not prevent falls and often cause more injuries and even deaths.

Myth: It is a nursing home's moral responsibility to keep people safe and prevent all falls.

Fact: Nursing homes are responsible for caring for people and helping them stay as healthy and happy as possible. There are no absolute ways to ensure safety. Unless you can find the reason for the falls and fix them, it is unrealistic to think any set of interventions can prevent all falls.

Myth: Residents do not mind being restrained. It makes them feel secure.

Fact: No one likes to feel helpless, trapped, or demeaned. A restraint can cause your loved one to become angry, depressed, confused, agitated, or withdrawn. Few of us would ever choose restraint use for ourselves.

Myth: There are not any other options to protect my loved one.

Fact: Rarely is this true. Most people that living in nursing homes are better cared for without using restraints and more effective safety methods can be substituted for restraints.

Do Restraints Have Risks?

When a person has his or her freedom limited with restraints, it can cause health problems or serious complications, such as:

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



What can I do as a family member?

- Recognize that risks are a part of life and few of us would ever find quality of life having our movements restricted by devices. Ask yourself, “Would I want to be restrained?”
- Talk to the staff about your loved one’s habits and routines. Share information about past interests, hobbies, previous occupation, likes and dislikes, sleep and behavior patterns. These things help the team create a plan of care that meets the needs of your loved one and lessens the need for restraints.
- Bring items from home that provide comfort for your loved one, especially when he or she is getting used to new surroundings. This might include a favorite chair or blanket, pictures, books, or special foods. Keep personal items within reach.
- Work with the nursing home staff as a team member. Your concern, interest, and input are invaluable in providing the best possible care for your loved one.
- Spend time with your loved one if and when possible. You can be an extra pair of eyes and hands. You also provide the relationship that maintains his or her sense of identity.
- Know the risks of restraints.

If your loved one is in restraints:

- Ask to see the total safety plan developed for your loved one and discuss any questions and/or concerns you may have.
- Ask about the different things that were tried before restraints were used.
- Ask what the risks are related to the restraint use and how they are being addressed.
- Ask the staff to identify how the use of restraints is a benefit to the person.
- Ask the physician and staff about their plan for decreasing restraint use. How long will it be used? When will it be removed?

For more information on
“**Safety Without Restraints**” from the
Minnesota Department of Health:
www.health.state.mn.us/divs/fpc/safety.htm

A word about siderails....

Although some people think that siderails are safety devices, there is no evidence to support that claim. In fact, evidence shows that siderails are a danger. Alternatives to siderail use may be to lower the bed or change the environment in some other way.

Maintaining mobility, choice, and safety

It's important to care for people in ways that support choice and mobility as well as address their safety needs. The less mobile people are, the more likely they are to be injured when and if they do fall. The key to improving safety is individualizing care. Safety plans for frail at-risk elders need to be individualized. They need to address internal risk factors like fatigue, weakness, pain, and osteoporosis, as well as environmental risk factors such as inappropriate wheelchairs, poor lighting, and shoes that don't fit well.

Each person's safety plan should be unique and based on a complete assessment.



How can nursing homes improve safety and mobility?

- Develop a plan for safety and mobility based on a complete assessment of the person.
- Ask the resident, family members, and direct care staff to be a part of care planning conferences.
- Assess for and treat pain
- Be sure that all staff know the people they are caring for and honor their wishes, habits, and needs.
- Create and support a daily routine that meets unique needs and wishes of the individual.
- Ask for a physical therapy or occupational therapy assessment for mobility and the best restorative and safety devices (walkers, wheelchairs, grab bars, bed height, shoes).
- Know about the risks of restraints

- Include the person in a care program that focus on maintaining mobility.
- Include residents and invite them to participate in regular exercise programs.

Remember...

Everyone deserves as much freedom and dignity as possible. Restraints should only be used as a very 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 <http://www.medicare.gov> then select Compare Nursing Homes in Your Area.