

# NC Department of Health and Human Services NC Nurse Aide I Curriculum

## Module K Restraint Elimination, Reduction, Appropriate Use

July 2024

# Objectives

1. Understand the need for restraints and laws that regulate their use
2. Discuss Resident's Rights and the Nurse Aide's role
3. Identify alternatives to restraint use
4. Explore risks encountered from use of restraints
5. Discuss the use of different types of restraints used in health care
6. Discuss the importance of safe application and need for close observation

# Restraints – Federal and State Laws

- Federal and state laws are in place to protect residents
- The accrediting agencies help oversee and enforce the laws
  - Code of Federal Regulations
  - North Carolina Administrative Code
  - Centers for Medicare and Medicaid Services
  - Food and Drug Administration
  - The Joint Commission
  - The Safe Medical Devices Act

# Resident Rights

- The resident has the right to be free from any physical or chemical restraints
- Unnecessary restraints are false imprisonment



# Restraint-free Care and Alternatives

- Restraint-free care is an environment in which restraints are not kept or used for any reason
- Restraint alternatives are measures used instead of physical or chemical restraints



# Facility Restraint Practices

- Facilities may unintentionally use methods to help ensure resident safety which may be viewed as restraints
- Recognize items that can restrict residents
- Communicate concerns regarding:
  - Over-bed table
  - Sheets
  - Geri-chair
  - Wheelchair locked



# Facility Restraint Practices

- Facilities have practices that are considered forms of restraints
  - Side rails
  - Tucking in a sheet or using Velcro
  - Placing a resident in a chair to prevent from rising
  - Placing a walker out of reach



# Restraints – Understanding the Need

- Communicate, explore, observe and inquire about the resident's current and past medical history to gain understanding of the need for restraints
- Consider how the following may influence the decision for the use of restraints:
  - Pain, mental or physical impairments, injury, discomfort, wound dressings
  - Anger, loss of control, fear, phobias, obsessions
  - Sleep disorders, confusion, disorientation
  - Hunger, thirst, temperature changes



# Restraints – Criteria for Use

- Restraints must protect the person
- A doctor's order is required
- Restraints are used only in the event other measures fail to protect the resident
- The least restrictive method is used
- Informed consent is required from the resident or designated legal representative
- Residents' vital signs, respiratory and hydration status must be monitored

# Restraints – Risks

- Using restraints may result in health risks or injuries to the resident
  - Cuts, bruises, skin damage, fractures
  - Aspiration or death from strangulation
  - Constipation, incontinence, dehydration
  - Contractures, decreased ability to walk
  - Infections
  - Swelling in the limbs, nerve damage
  - Mental health issues
  - Self-esteem issues

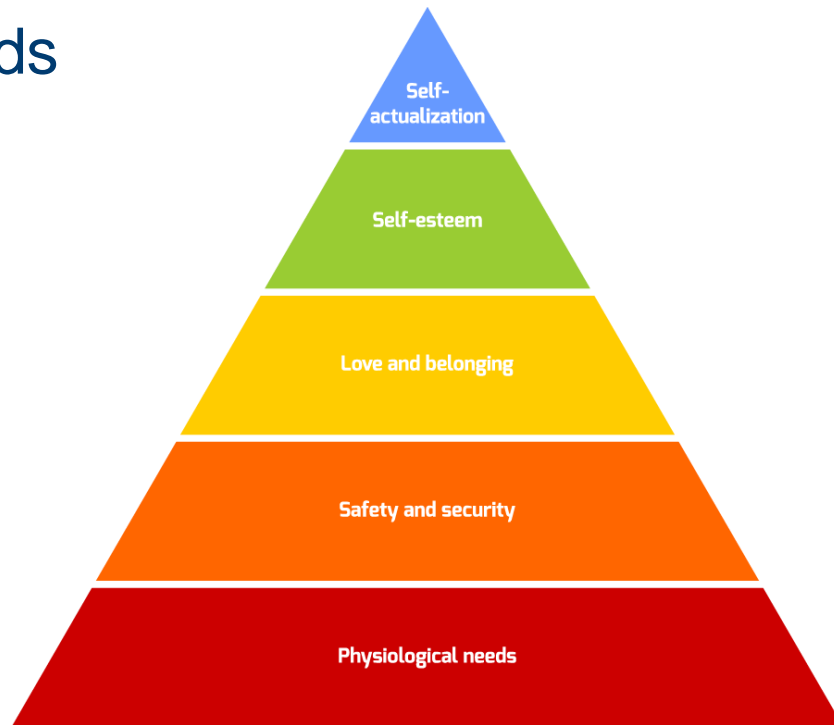
# Types of Restraints

- Chemical: drugs or drug doses used to control behavior or restrict movement
- Physical: any manual method, physical or mechanical device, material or equipment attached to or near an individual that cannot be removed easily and restricts freedom of movement or normal access to one's body
- May be cloth, mesh, leather, or a combination



# Restraints – The Nurse Aide’s Role

- Follow the Nursing Care Plan
- Whenever possible, schedule care to align with the resident’s past routines, likes and preferences
- Consider the resident’s needs based on Maslow’s Hierarchy of Needs



# Restraints – The Nurse Aide’s Role

- Nutrition, elimination, breathing, sleep, exercise
  - Take time with meals, encourage fluids
  - Assist to the bathroom, encourage self-hygiene, place bedpan or urinal within reach
  - Allow time for bathing, back rubs and grooming
  - Make the bed comfortable, position pillows, remove unwanted items
  - Place items at arm’s reach whenever possible
  - Reduce or eliminate noise, odors, other distractions

# Restraints – The Nurse Aide’s Role

- Safety and security
  - Check on the resident every 15 minutes or more often per Nursing Care Plan
  - Position bed at lowest height, lock wheels
  - Place floor cushions next to bed
  - Remove or relocate furniture with sharp corners
  - Provide or eliminate lighting to promote sleep
  - Place call bell within reach
  - Be attentive to the resident’s fears

# Restraints – The Nurse Aide’s Role

- Love and belonging
  - Spend time with the resident, encourage pleasant conversation, walk with the resident
  - Provide diversion – TV, literature, books, videos, games
  - Encourage visits from family, friends and clergy
- Self-esteem and self-actualization
  - Encourage, compliment and reassure the resident

# Restraints – Safety Guidelines

- Resident safety is the highest priority
- Restraints must be applied properly
  - Check size and condition of restraint (must be free from defect)
  - Ensure the restraint fastens correctly and securely
  - Secure straps out of the resident’s reach, under the seat or wheelchair
  - Secure the restraint to movable parts of the bed frame so it does not tighten or loosen when the head or foot is raised or lowered



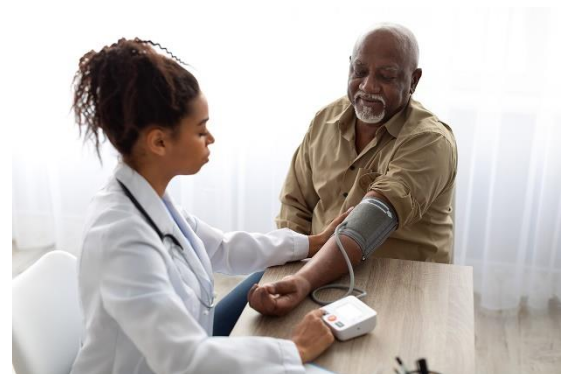
# Restraints – Safe Application

- Follow manufacturer's directions and the facility's policies and training
- Leave 1 to 2 inches of slack in the straps to allow some movement of the part, unless instructed otherwise
- Pad bony areas as instructed by the nurse to prevent pressure and injury
- Observe the resident closely; every 15 minutes or as directed by the Nursing Care Plan



# Recording Time

- Remove or release the restraint, reposition the resident and attend to their basic needs (food, water, elimination, comfort, safety, hygiene and skin care) at least every 2 hours for at least 10 minutes, or as directed in the Nursing Care Plan
- Monitor vital signs and perform range of motion (ROM) at intervals per the Nursing Care Plan



# Restraints – Observe, Report and Act

- Report observations and communication accurately
- Report to the nurse every time you check the resident and release the restraint
- Keep scissors with you at all times, in case the resident's safety is compromised as in choking, aspiration, strangulation, seizures or other emergencies
- Place the call light within the resident's reach

# Remember

- Restraints are NEVER used as a convenience
- Unnecessary restraint is false imprisonment
- Restraints are used as a last resort to protect the resident and safety of others
- Restraints require a doctor's order
- Always ask for clarification before applying a restraint
- Practice patience, show kindness and be empathetic to residents who are restrained

**The End**