




Restraint Reduction Scenarios



Restraint Reduction Scenarios

HSAG Nursing Home
Quality Improvement Collaborative
(NH-QIC)
Learning Session 2

The Medicare Quality Improvement Organization for California 




TRANSMITTER SERIAL # QUICK ASSIGN REGISTRATION

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Objectives

- At the end of this learning session, the attendee will be able to:
 - *Define a physical restraint*
 - *Describe alternative methods to restraints*
 - *Learn how to individualize each resident's care by trialing creative alternatives to restraints*

- **Physical Restraints**
 - Any manual method or physical or mechanical device, material, or equipment attached/adjacent to resident's body that,
 - Individual cannot easily remove, and/or
 - Restricts freedom of movement or normal access to one's body

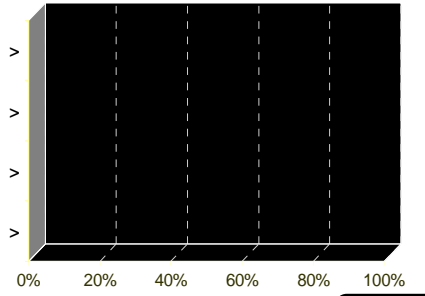
Restraint Reduction Scenarios

 **Scenario #1**


John has been immobile for several years. He requires assistance with any limb or trunk movement. It is decided he does not need side rails and will have a pillow propped against him as extra protection in his low bed. **What is another non-restrictive safety measure to minimize a fall-from-bed injury risk?**


A/1 = Floor Mat
B/2 = Additional Blanket
C/3 = Wrist Restraints
D/4 = Place Bed Next to Wall

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Responses: ~NR

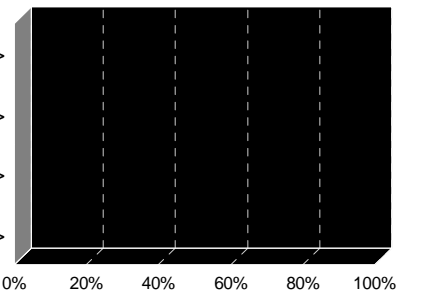
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 **Scenario #2**


Sally is alert and oriented. She has a fear of falling and of breaking a hip. She has no history of falls. **What non-restraint measure could be offered to Sally for “her peace of mind” and to minimize a fractured hip if she should accidentally fall?**

A/1 = Helmet
B/2 = Non-Skid Slippers
C/3 = Walker
D/4 = Hip Protector

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Responses: ~NR

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Hip Protectors

The diagram illustrates the effectiveness of hip protectors. On the left, labeled 'Un-Protected', a red arrow points to the hip area of a person's silhouette. On the right, labeled 'with Energy Shunting Hip Protector', a red arrow points to a hip protector device on the silhouette. Below the diagram are two photographs: one of a person wearing a black, rigid hip protector, and another of a person wearing a white, inflatable hip protector. Text at the bottom of the diagram includes 'Hip Protectors', 'www.hipprotector.com', and '800-549-0095'.

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Scenario #3

Tom likes to wander out of his room and into other residents' rooms at night. He walks very slowly but with a strong and balanced gait.

What measure could be taken to allow Tom freedom of movement while alerting staff when he leaves his room?


- A/1 = Video Camera
- B/2 = Cell Phone
- C/3 = Motion Detector
- D/4 = Whistle

Responses: ~NR

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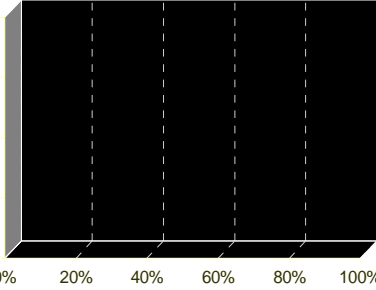
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 **Scenario #4**

Mary is forgetful and needs assistance getting to a standing position from bed. She has an enabler. **Because she has a history of falling with this independent transfer, what is an additional measure that could be provided to alert staff that Mary is trying to stand at her bedside?**

A/1 = Floor Pressure Mat >
B/2 = Full Side Rails >
C/3 = Telephone on Bed Stand >
D/4 = Television Monitor >



0% 20% 40% 60% 80% 100%


9 # Responses: ~NR

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- **Full bed Rails**
 - Rails along both sides of bed that block $\frac{3}{4}$ length of mattress; includes bed placed against wall & other side of bed blocked by full rail(s); any enclosed bed system

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 **Scenario #5**

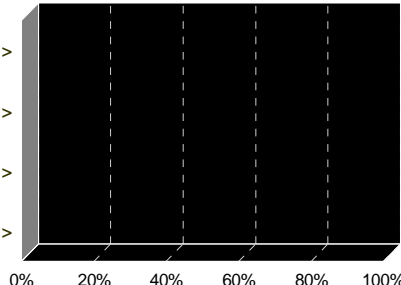
Barbara is very disoriented, wanders, and likes to work with her hands. She will play with objects for long periods of time. Her gait is slightly unsteady, so the staff attempts to always be present when she ambulates.

What could the staff provide to Barbara so that her wandering behavior may be decreased?

A/1 = Television
B/2 = Activity Apron
C/3 = Wheelchair
D/4 = Merry Walker

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Responses: ~NR




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Activity Apron



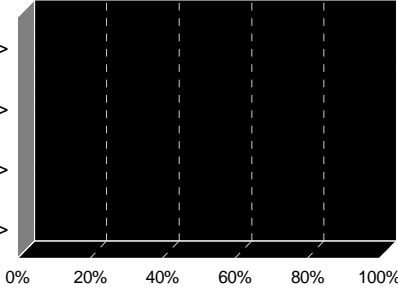
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 **Scenario #6**

Irene is incontinent because she does not recognize the urge to go in enough time to get to the bathroom without hurrying.


What could the staff provide to promote safety and bladder continence?

A/1 = Diaper
B/2 = Restriction of Fluids
C/3 = Timed Toileting Program
D/4 = Foley



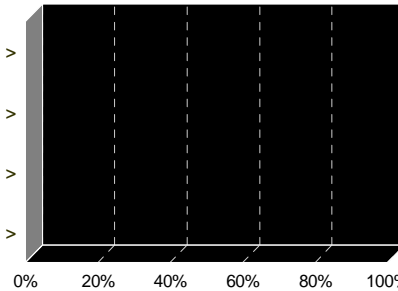
13 # Responses: ~NR

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 **Scenario #7**

Harold is often fidgety in the P.M. His daughter states he often relaxed when his wife would rub his arms and legs at night. **What could the staff provide to promote a relaxing atmosphere in which Harold can go to sleep at night?**

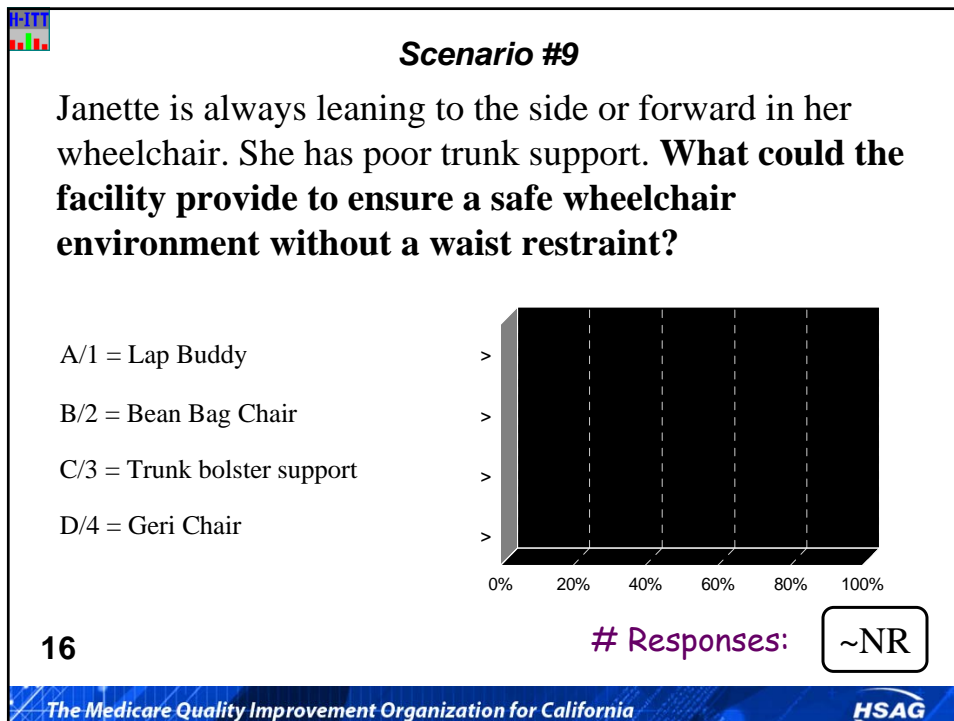
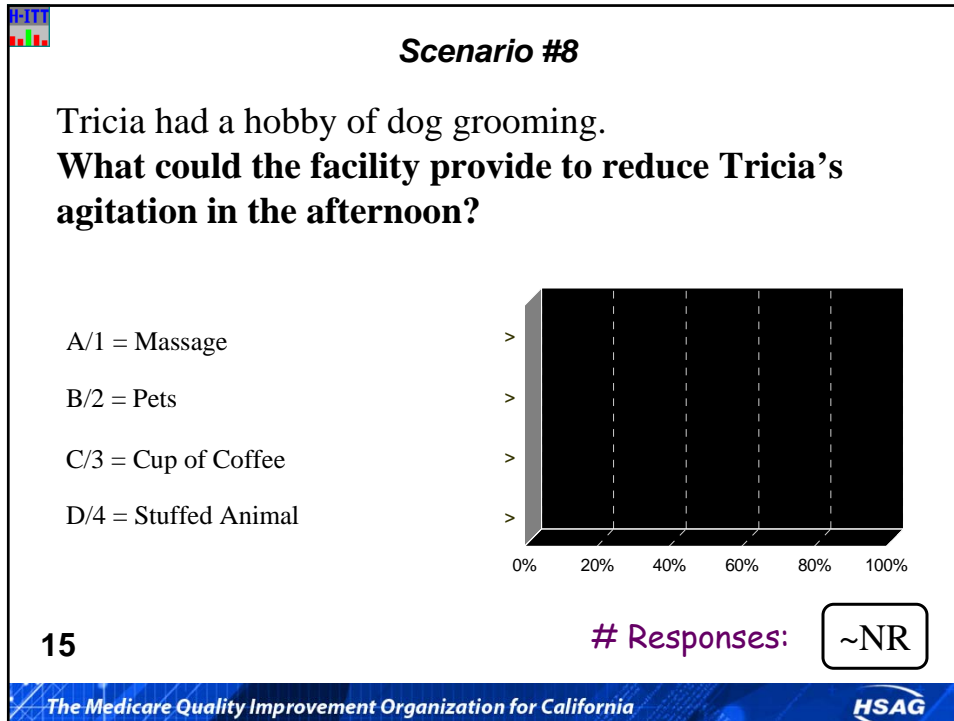
A/1 = Night Light
B/2 = Massage
C/3 = Cup of Coffee
D/4 = Call Light in Reach



14 # Responses: ~NR

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Snug Supports or lateral trunk supports



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Scenario #10

Steve is always sliding down in his wheelchair. The staff thinks the reason is the slick surfaces between his khaki pants and the wheelchair cushion.

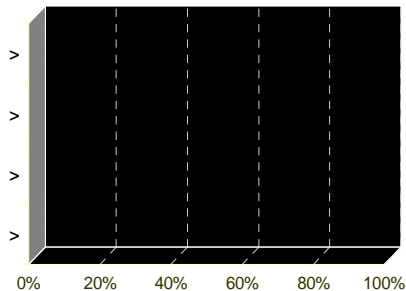
What could the staff provide to help Steve stop sliding down in his wheelchair?

A/1 = Dycem

B/2 = Geri Chair

C/3 = Self Releasing Seat Belt

D/4 = Bean Bag Chair



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Responses:

~NR

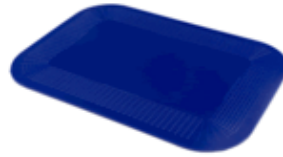
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dycem wheelch



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Scenario #11

Jann is always angry and uncooperative during A.M. care putting her at risk for injury. Jann's daughter reports that her mother was never uncooperative at home and that she used to stay up late at night and get up late in the A.M.

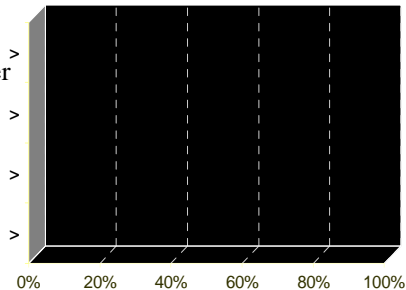
What could the staff do to avoid this period of uncooperativeness with A.M. care?

A/1 = Allow Her to Stay Up Later & Sleep Later

B/2 = Provide More Appetizing Breakfast

C/3 = Increase Medications

D/4 = Offer a Bubble Bath



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Responses:


~NR

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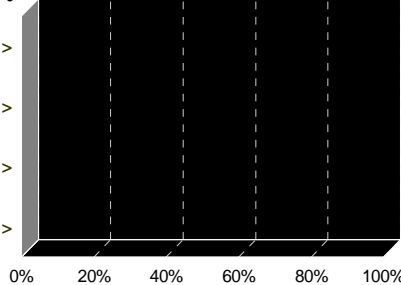
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 **Scenario #12**


Megan has cataracts and often holds her hand over her eyes. The staff is concerned she may not be able to see where she is walking and her balance may be impeded. **What could the staff provide that may enhance Megan's vision to allow her to ambulate safely?**

A/1 = Broad Rimmed Hat
B/2 = Anti-glare Eyeglasses
C/3 = Dim the Lights
D/4 = Walker



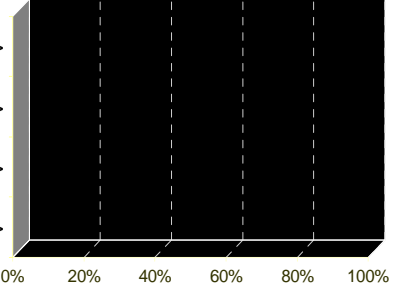
21 # Responses: ~NR

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 **Scenario #13**

Joe is alert and can do safe transfers from bed to wheelchair to toilet. He fell once when he tripped over his wheelchair when going to the bathroom in the dark. **What could the staff do to promote safety while also allowing this independent activity to continue?**


A/1 = Night Light
B/2 = Cane
C/3 = Wheel Chair
D/4 = Merry Walker



22 # Responses: ~NR


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Merry Walker

- An enclosed, framed wheeled-walker, with or without a posterior seat, may or may not be a restraint
- Don't focus solely on device name, intent or reason for device, but on **device's effect** on resident
- Carefully assess before considering restraint use with residents who are confused and/or cognitively impaired
- Then**Care Plan** if necessary

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Objectives Review

- *Define a physical restraint*
- *Describe alternative methods to restraints*
- *Learn how to individualize each resident's care by trialing creative alternatives to restraints*

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Congratulations

Individual Achievement

Highest Score ~WN1 ~WS1 %

Runner Up ~WN2 ~WS2 %

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Over 1 million drug-related injuries occur every year in health care settings. The Institute of Medicine estimates that at least a quarter of these injuries are preventable.

To find out how to prevent medication errors, go to http://www.hsag.com/ca_drugsafety/.



www.hsag.com

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