



USE OF RESTRAINTS

A Guide for Residents & Families

In accordance with The Brenda Strafford Foundation's philosophy and with respect for the quality of life for all of our residents, we have a policy of least restraints and these interventions will be used for exceptional circumstances only.

Exceptional circumstances are acceptable if the resident's safety or the safety of others is/are put at risk. The decision to use a restraint will be made following consultation with resident and their agent once all other alternatives have been tried.

A diagnosis of dementia does not support the use of anti-psychotic, anti-anxiety and/or anti-depressant medications on its own. Behavioural symptoms which cause a risk to the resident and/or others must also be present.

If a resident and/or family insist on the use of a restraint that is not recommended by a health professional, a Managed Risk Agreement must be reviewed and signed by the resident or agent before the restraint is implemented.

Assessment and investigation of the causes of the resident's behaviours include:

- Cognitive function Physical status
- Environmental factors
- Psychosocial factors
- Medication review
- Pain

Physical and Mechanical Restraint is defined as any manual method, or any physical or mechanical device, material or equipment attached or adjacent to the resident's body, that the resident cannot remove easily and restricts the resident's freedom of movement or normal access to his or her body. It is the effect the device has on the resident that classifies it into the category of restraint, not the name or label given to the device, nor the purpose or intent of the device.

The following would be considered a physical restraint:

- Seat belts (front/back/side) on wheelchairs that can not be opened by resident
- Lap tray on a wheelchair which the resident cannot remove
- Reclining chairs used specifically to immobilize a resident (i.e. Broda Chair)
- Full bed side-rails that the resident cannot put down

A **Pharmacological Restraint** is defined as the use of medication primarily intended to control behavioral symptoms, voluntary movement, and/or sedation, rather than to treat a medically diagnosed condition.

Environmental Restraint is defined as a barrier or device that limits locomotion, or confines a person to a specific area.

**BEFORE ANY RESTRAINT IS
CONSIDERED, THE FOLLOWING
STEPS MUST BE TAKEN:**

1. Assessment and investigation of an individual's behaviours including documentation.
2. Behaviour mapping will be completed.
3. A consultation will take place with the resident/agent and the multidisciplinary team to discuss all options.
4. The resident or agent will be involved in the decision to use a restraint.
5. A Consent for Restraint Use Form is required to be signed by the resident or agent.
6. A Physician's Order must be obtained.
7. Restraints shall be re-assessed regularly (chemical restraints on a monthly basis and physical restraints on a quarterly basis). Documentation on the resident's health record is required.
8. Residents with a restraint device will be checked every hour and repositioned every two hours.