

Restraints

- Patient and Family Information

Sometimes a patient can respond in a way that may risk injury to themselves or others. This may be caused by their illness and/or being in an unfamiliar place. In order to reduce the risk of injury, the health care team will make every effort to support the patient using a variety of methods. The **temporary** use of restraints may be considered as a last option.

Being restrained can be a stressful experience for patients and families. This information will help families learn:

- how the decision is made to apply restraints and what to do if there is a disagreement with this decision.
- ways they can support the patient and what care to expect during the time restraints are used.
- behaviours the patient must show so that the restraint can be removed.

What are some other options that can be used INSTEAD of restraints?

Families can help by:

- sitting and having a relaxing conversation with your family member.
- walking with your family member to get rid of pent-up or stored energy (check with staff first).
- playing your family member's favourite music at the bedside.
- providing favourite snacks (check with staff first).
- communicating your family member's needs to the health care team.

We welcome and encourage family involvement in patient care. Let us know if there is anything that may upset or cause stress to your family member or ways that may be helpful to calm them.

What are restraints?

A restraint is a device, technique or intervention used by the staff to manage or calm the behaviour that can cause injury to self or others.

What are some types of restraints?

Physical	A device that restricts patient to move freely or any “hands-on” technique used to restrict patient’s mobility.
Chemical	Any medications used to decrease behaviours that put the person or others at risk for harm.
Environmental	A barrier or device which restricts patient’s movement from one area to another.

Who makes the decision to use a restraint?

In most cases, both the health care team and patient or Substitute Decision Maker (SDM), make the decision to use a restraint. If the patient is not capable to make the decision to use a restraint, then the SDM makes the decision on patient’s behalf.

The health care team will assess the patient’s safety risk and the possible alternatives to restraints, and develop a plan of care with the patient or SDM. If a restraint is needed, it will be discussed with the patient and the health care team will obtain the informed consent.

Before consenting to the use of restraints, the patient or SDM needs to be aware of the risks of using restraints that may include bruising, skin abrasions, loss of balance, negative emotional responses and serious life threatening complications including death.

Can a patient receive restraints without giving consent from the patient or Substitute Decision Maker?

Yes, in an emergency, a restraint may be applied right away without obtaining the patient or SDM's consent. In this case, the health care team will obtain consent as soon as possible afterwards.

If there are any questions about the decisions being made, the patient or SDM need to discuss it with the health care team.

If you feel that your concerns are not being addressed you can ask to speak to the Manager of the Unit or contact our Patient Experience department at 905-521-2100, ext. 75240.

Patient Experience staff will work with you and the health care team, to help answer your questions.

How will the patient be cared for while he/she is restrained?

The health care team will regularly:

- reassess the need for restraints
- provide the patient with information about the behaviour that needs to be shown in order for the restraint to be removed
- monitor the patient for their comfort and safety
- encourage the patient to change positions in bed

In general, the restraint will be removed at least every 2 hours. The patient can eat, drink and use the bathroom during these times.

When are restraints no longer used?

Restraints will be removed and no longer used when the patient does not behave in a way that risks injury to him/herself or others.

What can family and friends do to help the patient WHILE they are restrained?

Family and friends play an important role in providing support for the patient while being restrained.

Please ask the health care team if the restraint can be removed while you are visiting. Family or friends may be able to calm the patient with activities such as walking or other activities the patient enjoys. Let a member of the health care team know before you leave so that we can reassess if the restraint needs to be reapplied.

Please talk to the health care team to learn what role you can play to further support the patient.

What happens after a restraint is removed?

The patient and family are often emotional and may have questions after a restraint has been removed. Our health care team will provide support to the patient and family afterwards as needed.

Thank you for your support in helping us provide a patient centered, safe environment.