

Restraints and Restrictive Interventions

Residential Licensing

Written Procedure

- An assisted living home **may not physically restrain** a resident unless the home has a **written physical restraint procedure** that has been **approved by the licensing agency**.
- **Regulations regarding the use of restraint can be found in 7 AAC 75.295.**

Use of Physical Restraints

- An assisted living home may use physical restraint **if a resident's actions present an imminent danger to the resident or others**, but only after other interventions, including the use of a time out, have failed.
- A time out or physical restraint may not be used
 - **as a punishment**
 - **as a substitute for a less restrictive form of intervention**
 - **as a convenience for the home's staff.**

Physical Restraint

- For purposes of this section, physical restraint is a manual method that restricts body movement, or a physical or mechanical device, material, or piece of equipment that is attached or adjacent to the resident's body, that prevents the resident from easily removing it, and that restricts movement or normal access to the body.

Examples of Physical Restraint

- Bed Rails
- Lifts on Recliners
- Seat Belts
- Food trays/lap buddies
- Wheel Chair Locks
- Baby Gates
- Weighted Vests
- Door Locks, window locks
- Mittens
- Holds

Less Restrictive Intervention

- Behavior Modification techniques
 - MANDT
 - CPI (Crisis Prevention Intervention)
 - PBS (Positive Behavior Supports)
- De-escalation techniques
- Redirection
- Reward Systems
- Voluntary Time Outs
- Removal of Stimuli

Inappropriate Restraints/Interventions

- Prone Restraints – Where the individual is lying face down
- Seclusion – involuntary confinement where an individual is prevented from leaving or having contact with others.
- Withholding Services – day habilitation
- Restricting access to basic needs – food, toilet
- Using PRN medication for staff convenience
- Position objects out of residents reach – like their walker
- Using furniture to restrict movement – blocking doors or hall ways.

Use of Time Outs

- A time out is the restriction of a resident, with that resident's consent, to a quiet area or unlocked quiet room for a period not to exceed 30 minutes.
- A home may not require a resident to take a time out without that resident's consent, and may not use a time out that exceeds 30 minutes, with or without that resident's consent.

Terminating a Restraint

- A time out or physical restraint **must be terminated** as soon as the resident no longer presents an imminent danger to that resident or others.

Use of Safety Equipment

- The use of the following safety equipment will not be considered physical restraint if **authorized in writing by the resident's primary physician**, and if the necessity for its use is set out in the resident's assisted living plan:
 - self-release safety belts;
 - lap-top trays;
 - wedge chair cushions;
 - concave mattresses; and
 - bedside rails if used for a resident who lacks independent mobility but has involuntary movement, including a seizure disorder, that could cause the resident to fall from bed; or needs the rails to assist in mobility.

Admission

- At the time of a resident's admission to the home, the home shall
 - Explain its approved physical restraint procedures to the resident or resident's representative.
 - Perform an assessment at the time of admission regarding the potential need for the use of time outs or physical restraint.
- The assessment shall include the following information;
 - About the resident's prior behavior that might indicate a need for the use of time outs or physical restraint; and
 - That might help minimize use of time outs or physical restraint;

Assisted Living Plan

- The Home must address the need for using time outs or physical restraint in the resident's assisted living plan if the home has reason to believe that time outs or physical restraint may be necessary because the resident's prior behavior or medical condition indicates that the resident may occasionally present an imminent danger to the resident or others.
- The plan must include the following information;
 - When time outs or physical restraint should be used.
 - What forms of physical restraint should be used, based on recommendations from **the resident's primary physician**.
- Always follow what is in their plan of care if the resident has one.

Notification Requirements

- If physical restraint is used, the assisted living home shall
 - Notify the resident's representative within 24 hours, unless the representative has agreed, as reflected in the resident's assisted living plan, that notification under (2) of this subsection is sufficient.
- If the 24-hour notice required by **7 AAC 75.295(d)(1)** of this section is unsatisfactory to the representative the home must establish pre-notification procedures requested by the resident's representative

Documentation of Restraints

- Document any use of physical restraint in a written report that includes;
 - The resident's name;
 - A description of the incident that led to the decision to use physical restraint;
 - A brief description of any other form of intervention used or attempted before the use of physical restraint;
 - The type of physical restraint used;
 - The time when physical restraint began; and
 - The time when physical restraint ended.

Prohibitions

- An assisted living home, including staff of the home, may not
 - place a resident under physical restraint unless the resident's own actions present an imminent danger to the resident or others;
 - place a resident under chemical restraint; this paragraph does not prevent a resident from voluntarily taking tranquilizers, or other medication, prescribed by a licensed physician;