

Jonathan Rosenfeld's Nursing Homes Abuse Blog

Use Of Restraints Amongst Nursing Home Patients Has Been Reduced More Than 50% Over The Last Decade. Is It Enough?

Posted on July 27, 2010 by [Jonathan Rosenfeld](#)

When you consider forms of cruel treatment, maybe you consider beds of nails or solitary confinement? However, another form of cruel treatment-- the use of restraints, is commonly used with innocent nursing home patients. At some facilities, patient restraints are a commonly used tool used by facilities in lieu of providing actual hands-on patient care by facility staff.

In the past, nursing homes used physical restraints such as: bed rails, lap belts, vests, wrist ties and special chairs to assist them in literally controlling their patients. In addition to de-humanizing patients, the use of restraints was attributed to rapid physical deterioration and increased rates of patient injury.

In response to the poor publicity and family outrage, many skilled nursing facilities have made great efforts to reduce use of restraints. The reduction in restraint usage was recently discussed in an [article](#) by Megan Brooks on [Medscape](#).



Jonathan Rosenfeld represents victims of nursing home abuse and neglect throughout the country. For more information please visit Nursing Homes Abuse Blog (www.nursinghomesabuseblog.com), Bed Sore FAQ (www.bedsorefaq.com) or call Jonathan directly at (888) 424-5757.

Ms. Brook's article analyzed data from a News and Numbers report from the Agency for Quality Improvement and Patient Safety (AHRQ), which was part of a 2009 National Healthcare Disparities Report. In short the reduction in use of restraints seems promising-- from 1999 to 2007, the number of nursing home patients who were restrained dropped more than 50%.

By most estimates, just 5% of nursing home patients are restrained by facilities. Restraint usage varies significantly based on the following factors such as ethnicity, age and sex.

Certainly this is promising news for nursing home patients in general.

However, the data contained in the AHRQ report does not contain enough specifics regarding nursing home patient demographics to assess if restraints are being improperly utilized.

To restrain or not?

This really is a very difficult question to answer and the answer varies significantly amongst experts. I feel restraints may be justified when the patient is at risk for harming themselves or others.

In my experience, I have witnessed facilities slow to utilize restraints--- even after repeated episodes of falls. In one of my cases, the facility refused to restrain a patient despite fourteen reported falls (many with associated injuries) at the facility. Unfortunately, the patient's fifteenth fall resulted in a head injury which ultimately cost the patient her life. In the course of litigation, I asked the director of nursing why the patient was not restrained, she advised that the facility was a 'no restraint facility'.

In this case, I think there certainly is a very strong argument that I can (and will make) that with a no restraint policy, the facility was not properly equipped to care for this patient due to her extensive history of falls.

In another restraint case I worked on, a patient was seriously injured when she was left unattended in her geri-chair with an improperly placed lap belt.

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Apparently, the belt was too loose and when the woman slipped down in her chair, she became entangled and choked. Again, in the course of litigation, the facility disclosed that lap belts were used on all patients --- regardless of their physical abilities.

Certainly, regardless of a facilities restraint usage policy, it is up to the facility adequately supervise patients to ensure the usage / non-usage of restraints doesn't interfere with the patients well being. Further, this is an important issue for families to discuss and know where the facility caring for their loved ones stands on this issue.

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