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| RESTRAINTS AND SECLUSION | | | | NO. 248 | |
| POLICY:  Winning Wheels, in accordance with federal and state laws, has a very stringent policy regarding the use of physical and chemical restraints on residents. Our philosophy of providing residents with the highest possible quality of care and life is reflective of our belief that is essential for our residents to maintain their dignity and independence by being permitted to take "normal risks of everyday life". Restraints used in an attempt to remove these normal risks of living violate the rights of residents, greatly reduces their quality of life, and presents significant physical and psychological risks.  For these reasons, and in accordance with federal and state laws, restraint use in our facility will only be considered to treat a medical symptom/condition that endangers the physical safety of the resident or other residents and under the following conditions:  1. As a last resort measure after a trial period where less restrictive measures have been undertaken and proven unsuccessful.  2. With a physician's order.  3. With the consent of the resident (or legal representative).  4. When the benefits of the restraint outweigh the identified risks. If restraint used is deemed necessary, the goal will be to use the least restrictive type of restraint for the shortest period of time possible.  Every resident at Winning Wheels will be individually assessed upon admission regarding the need for appropriate safety measures, and will be periodically reassessed as their needs change throughout their stay at our facility.  PROCEDURES:  1. No form of seclusion shall be permitted, even if the resident desires it. | | | | | |
| Approved: | Effective Date: | Revision Date: | Change No.: | | Page:  1 of 2 |

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| RESTRAINT AND SECLUSION, continued | | | | NO. 248 | |
| 2. Restraints shall be used only in an emergency to protect the resident from harming himself or harming other residents, visitors, or staff. If it is necessary to use restraints for this purpose, the attending physician shall be contacted immediately for his orders for this emergency. In the event the attending physician is not immediately available, the facility's advisory physician shall be contacted for such orders. This emergency use of restraints shall be used only temporarily. In a single emergency, restraints shall not be used for a period of more than four hours. If a restraint is used for more than two hours, it must be released for a few minutes at least once every two hours, or more often if necessary. There must be constant observation of the resident while a restraint is being used. No restraints with locking devices may be used.  3. The reason for ordering and using restraints shall be recorded in the clinical record.  4. Neither physical restraints nor confinements shall be employed for the purpose of punishment or for the convenience of any facility personnel. No physical restraints or confinements shall be employed except as ordered by a physician who documents the need for such restraints or confinements in the resident’s clinical record.   1. Restraints and confinements may be employed only when necessary to prevent a resident from injuring himself or others. The physician’s written authorization shall specify the precise time periods and conditions in which any restraints and confinement shall be employed. 2. No chemical, medication or tranquilizer shall be used by a facility as a restraint or confinement in lieu of or in addition to any physical restraint or confinement. Such chemicals, medications or tranquilizers may only be employed as part of a duly prescribed therapeutic medical treatment program authorized by the resident’s physician and documented in the resident’s clinical record. Along with an appropriate monitored reduction program and corresponding behavior modification interventions. 3. No resident shall be subjected to any behavior modification program which utilizes restraints, confinements, or aversive stimuli of any nature unless and until the informed consent of such resident, resident’s guardian, or parent of a minor resident has been obtained. | | | | | |
| Approved: | Effective Date: | Revision Date: | Change No.: | | Page:  2 of 2 |