

Section P

Restraints

Objectives

- State the intent of Section P Restraints.
- Describe what constitutes a physical restraint for the purpose of MDS 3.0.
- Explain how to assess residents for physical restraints for the purpose of the MDS 3.0.
- Code Section P Restraints correctly and accurately.

Intent of Section P



Record the frequency that the resident was restrained by any of the listed devices at any time during the day/ night over the look-back period.

Use of Physical Restraints

- Use not prohibited in nursing homes.
 - Cannot be imposed for discipline or convenience
 - Must be required to treat resident's medical symptoms
- Must assess resident needs and medical symptoms before using physical restraints
- Use of physical restraints should be the exception, not the rule.

Item P0100

Physical Restraints

P0100 Importance₁

- Play a limited role in medical care.
- Physical restraints limit mobility.
- Physical restraints increase risk of adverse outcomes.
 - o Functional decline
 - o Agitation
 - o Diminished sense of dignity
 - o Depressed mood
 - o Pressure ulcers

P0100 Importance₂

- Cognitively-impaired residents at higher risk due to physical restraints:
 - o Entrapment
 - o Injury
 - o Death
- Significant risk of restraint-related injury or death

Physical Restraints₁

Section P

Restraints

P0100. Physical Restraints

Physical restraints are any manual method or physical or mechanical device, material or equipment attached or adjacent to the resident's body that the individual cannot remove easily which restricts freedom of movement or normal access to one's body

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- Manual method or physical or mechanical device, material, or equipment
- Attached or adjacent to the resident's body that the individual cannot remove easily
- Which restricts freedom of movement or normal access to one's body

Physical Restraints₂

- Removes easily
 - Can be removed intentionally by the resident in the same manner as it was applied by the staff
 - Consider the resident's physical condition and ability to accomplish his or her objective.
- Freedom of movement
 - Any change in place or position for the body, or any part of the body, that the person is physically able to control or access

Examples of Physical Restraints

- Leg restraints
- Arm restraints
- Hand mitts
- Soft ties/vests
- Lap cushions
- Lap trays
- Facility practices
 - o Side rails
 - o Velcro on sheets
 - o Devices used with chairs (tray, table, bar, or belt)
 - o Placement of chair or bed

P0100 Conduct the Assessment₁

- Review resident's medical record.
 - Physician's orders
 - Nurses' notes
 - Nursing assistant documentation
- Consult the nursing staff across all shifts.
 - Resident's cognitive status and limitations
 - Physical status and limitations

P0100 Conduct the Assessment₂

- Observe the resident.
 - Determine the effect on the resident's normal function.
 - Do not focus on type, intent, or reason for use.
- Evaluate whether the resident can easily and voluntarily remove the device.
- Determine if the device restricts freedom of movement or access to the body.
- Determine if device meets criteria of the definition of a physical restraint for purpose of MDS 3.0.

P0100 Assessment Guidelines₁

- Do not focus on the intent or reason for using the device, material, or equipment.
- **Focus only on the effect of the device on the resident.**
- Assess each resident individually.
- Exclude devices typically used for provision of care.
- The complete definition of a restraint must be met.

P0100 Assessment Guidelines₂

- Any device that meets the definition of a physical restraint must have:
 - Physician documentation of a medical symptom that supports the use of the restraint
 - Physician's order for the type of physical restraint and parameters of use
 - Care plan and a process in place for systematic and gradual physical restraint reduction (and/ or elimination, if possible), as appropriate

P0100 Coding Instructions

- How often the physical restraint was used
- Location of the physical restraint
 - In bed
 - In a chair or out of bed
- Category of the physical restraint
 - Bed rails or chairs that prevent rising
 - Trunk or limb restraint
- Code all physical restraints used in the look-back period.

Frequency of Use

Section P		Restraints	
P0100. Physical Restraints			
Physical restraints are any manual method or physical or mechanical device, material or equipment attached or adjacent to the resident's body that the individual cannot remove easily which restricts freedom of movement or normal access to one's body			
		↓ Enter Codes in Boxes	
		Used In Bed	
		<input type="checkbox"/>	A. Bed rail
		<input type="checkbox"/>	B. Trunk restraint
		<input type="checkbox"/>	C. Limb restraint
		<input type="checkbox"/>	D. Other
		Used In Chair or Out of Bed	
		<input type="checkbox"/>	E. Trunk restraint
		<input type="checkbox"/>	F. Limb restraint
		<input type="checkbox"/>	G. Chair prevents rising
		<input type="checkbox"/>	H. Other

Coding:

- 0. Not used
- 1. Used less than daily
- 2. Used daily

Coding:

- 0 Not used**
- 1 Used less than daily**
- 2 Used daily**

Location of Physical Restraint

Section P		Restraints
P0100. Physical Restraints		
Physical restraints are any manual method or physical or mechanical device, material or equipment attached or adjacent to the resident's body that the individual cannot remove easily which restricts freedom of movement or normal access to one's body		
Coding: 0. Not used 1. Used less than daily 2. Used daily	↓ Enter Codes in Boxes	
	Used In Bed	
	<input type="checkbox"/>	A. Bed rail Used in Bed
	<input type="checkbox"/>	B. Trunk restraint
	<input type="checkbox"/>	C. Limb restraint
	<input type="checkbox"/>	D. Other
	Used In Chair or Out of Bed	
	<input type="checkbox"/>	E. Trunk restraint Used in Chair or Out of Bed
	<input type="checkbox"/>	F. Limb restraint
	<input type="checkbox"/>	G. Chair prevents rising
<input type="checkbox"/>	H. Other	

Category of Physical Restraint

- Bed rails
- Trunk restraints
- Limb restraints
- Chair that prevents rising
- Other
 - Any device that does not fit listed categories
 - Meets the criteria of physical restraints
 - Should be care-planned and monitored

P0100 Coding Example #1

Section P		Restraints	
P0100. Physical Restraints			
Physical restraints are any manual method or physical or mechanical device, material or equipment attached or adjacent to the resident's body that the individual cannot remove easily which restricts freedom of movement or normal access to one's body			
Coding: 0. Not used 1. Used less than daily 2. Used daily	↓ Enter Codes in Boxes		
	Used In Bed		
	<input type="checkbox"/>	A. Bed rail	
	<input type="checkbox"/>	B. Trunk restraint	
	<input type="checkbox"/>	C. Limb restraint	
	<input type="checkbox"/>	D. Other	
	Used In Chair or Out of Bed		
	<input type="checkbox"/>	E. Trunk restraint	
	<input type="checkbox"/>	F. Limb restraint	
	<input checked="" type="checkbox"/>	G. Chair prevents rising	
<input type="checkbox"/>	H. Other		

1	G. Chair prevents rising
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P0100 Coding Example #2

Section P		Restraints	
P0100. Physical Restraints			
Physical restraints are any manual method or physical or mechanical device, material or equipment attached or adjacent to the resident's body that the individual cannot remove easily which restricts freedom of movement or normal access to one's body			
		↓ Enter Codes in Boxes	
		Used In Bed	
		<input type="checkbox"/>	A. Bed rail
		<input type="checkbox"/>	B. Trunk restraint
		<input checked="" type="checkbox"/>	C. Limb restraint
		<input type="checkbox"/>	D. Other
Coding: 0. Not used 1. Used less than daily 2. Used daily		<input checked="" type="checkbox"/>	C. Limb restraint
		of Bed	
		<input checked="" type="checkbox"/>	F. Limb restraint
		<input type="checkbox"/>	G. Chair prevents rising
		<input type="checkbox"/>	
		<input type="checkbox"/>	

Section P

Q&A Activity

What is the intent of Section P?

- A. Identify any device, material, or equipment that serves to restrain the resident in any way.
- B. Document the number of devices that are used to restrain the resident at any time during the look-back period.
- C. Record the frequency the resident was restrained by the listed devices at any time over the look-back period.
- D. Specify the types of restraints that are used on the resident to meet medical requirements.

Which of the following does not meet the criteria for coding a physical restraint?

- A. Any manual method or physical or mechanical device, material, or equipment
- B. Used for a purpose other than to treat medical symptoms or improve patient mobility
- C. Attached or adjacent to the resident's body that the individual cannot remove easily
- D. Restricts the freedom of movement or normal access to one's body

When determining if a device, material, or equipment meets the definition of a physical restraint, what is the key factor to consider?

- A. Type of device used
- B. Intent or reason the device is being used for the resident
- C. How often the device is used
- D. Effect the device has on a resident's normal function

You must code all devices you identify that meet the definition of a restraint for the purpose of the MDS 3.0.

- A. True
- B. False

If devices, materials, or equipment meet definition of a physical restraint but increase mobility for the resident, do not code as a restraint.

- A. True
- B. False

The code you select for a physical restraint indicates what?

- A. Frequency with which the restraint was used or observed during the look-back period
- B. Type of restraint observed in use during the look-back period
- C. How the restraint was used to limit resident mobility during the look-back period

Section P

Summary

Section P Summary₁

- Intent is to code the frequency in which the resident was restrained at any time over the look-back period.
- The definition of a restraint must be met.
 - Device, material, or equipment.
 - Attached or adjacent to the body and cannot be removed easily.
 - Restricts freedom of movement or normal access to the body.

Section P Summary₂

- Do not focus on the purpose of the restraint but the effect on the resident.
- Check the medical record, consult with staff, and observe the resident.
- Select a code that reflects the frequency in which each restraint was used.
- Enter the code in the box that indicates the correct category for the restraint.