Critical Thinking, Collaborative Practice and Enhanced Patient Safety with Restraint Reduction

An Evidence Based Practice Project by:
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Objectives
• Discuss the background of restraint use project on 7 West.
• Identify risks and complications associated with restraint use.
• Identify interventions utilized to reduce or eliminate restrictive devices.
• Review of restraint use quality data prior to interventions.
• Review of quality results and implications post intervention implementation.

PICOT Question
• Population: Medical-Surgical Patients on 7 West
• Interventions: Education and training of unit nurses and PTCAs
  • Tip Sheets on reducing restraint use
  • Daily huddle discussions
  • Inclusion in unit weekly updates
  • Restraint rounding
• Comparison: NDNQI restraint use data
• Outcomes: Decreased restraint use
• Time: Two month period

Current Research & Evidence on Restraint Use
• Restraint use can increase risk for patient delirium and agitation
• Restraint use can lead to deconditioning, functional decline, walking dependency and incontinence
• Restraint use can cause direct and indirect injury while hospitalized
• Restraint use also associated with patient death/orthopedic injury, increased LOS and direct/indirect costs.
• Restraint use can result in reduced patient satisfaction
• Restraint use can negatively impact the patient/nurse relationship by causing emotional distress while restrained

Implemented Interventions to Reduce Restraint Use
• Staff Education on Patient Interventions
  • Early mobilization
  • Distraction
  • Pain Management
  • Leaving patient’s door open
  • Placing patient in a chair close to the door
  • Regularly attending to patient needs
  • Bed alarms
  • Hourly peep rounds
  • Increased use of cognitive coaches
  • Removal of NGT’s as soon as possible

Comparative Restraint Use Data
• NDNQI data utilized…

![Graph showing comparative restraint use data](chart.png)
Before & After Implementation

**Monthly Restraint Use**

Interventions Implemented in September & October

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<th>July</th>
<th>August</th>
<th>September</th>
<th>October</th>
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Comparison of Restraint Types Utilized

Interventions Implemented in September & October

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<tr>
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**Discussion of Outcomes**

**Results**
- After implementation of interventions on 7W, restraint use significantly decreased during September and October.
  - Greater than 35% reduction in restraint utilization between August and September
  - Greater than 76% reduction in restraint use between August and October

**Conclusion**
- Staff education on interventions that can be utilized to reduce restraints helped to bring attention to restraint reduction
- Subjective observation suggests that there was no change in staff behavior in removal of restraints
- Adequate staffing to allow for increased utilization of "sitters" would be beneficial in the motivation of RN's to remove restraints sooner

**Further Implications**

- **General Implications**
  - Increased awareness of restraint use and the need for reduction in the medical-surgical environment to promote quality patient care
- **Expanding the Study**
  - Less passive interventions
  - Inclusion of additional treatment team members

**References**