Experience in and attitude towards the use of restraints on demented patients among nursing staff
Survey Result

Jockey Club Centre for Positive Ageing
School of Public Health, CUHK
The Nethersole School of Nursing

September 2006
Chance of being restrained of the immobile patient during the stay in hospital

<table>
<thead>
<tr>
<th>Straitjackets</th>
<th>34%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bed drills</td>
<td>74%</td>
</tr>
<tr>
<td>Chair board</td>
<td>53%</td>
</tr>
</tbody>
</table>
Use of restraint when provided daily care for the inpatients in different countries
Introduction

To echo the World Alzheimer’s Day, JCCPA, School of Public Health and the Nethersole School of Nursing, the CUHK jointly conducted a survey on ‘Experience in and attitude towards the use of restraints on demented patients among nursing staff.'
Aims of this study

- To explore the universality of and attitude towards the use of physical restraints on demented patients among the nursing staff.
- To understand the reasons why nursing staff use restraints in the course of taking care of demented patients.
- To improve the medical service and to assist relevant departments and organization to impose corresponding measures.
Method

- A total of 168 nursing staff, comprising 121 nurses and 47 nursing assistants, having experience in taking care of demented patients participated in this study.
- The respondents’ ages range from 20 to 58 with an average of 37. The average length of experience was 9.5 years.
- Major focus of the questionnaire:
  - Experience in and reasons of using physical restraints in taking care of demented patients in the past three months.
  - Attitudes towards demented patients etc.
Experience in Using Physical Restraints

- 75% of the respondents indicated that they had used varying degrees of physical restraints in the past three months.
- 64.9% of the respondents had “used belts or other materials to tie patients to beds or chairs.”
- 51.8% of the respondents had “used other types of body restraints like straitjackets, safety vests and gloves etc.”
- 42.9% had “used bed drills against the patients’ wishes.”
- 31% had “segregated the patients.”
Table 1: Respondents’ Experience in Restraint Use in the Past 3 months

<table>
<thead>
<tr>
<th>Description</th>
<th>Total (N=168)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Using one or more of the below physical restraints</td>
<td>75.0%</td>
</tr>
<tr>
<td>Using belts or other materials to tie patients to the beds or chairs</td>
<td>64.9%</td>
</tr>
<tr>
<td>Using other types of body restraints like straitjackets, safety vests and gloves etc.</td>
<td>51.8%</td>
</tr>
<tr>
<td>Using bed drills against the patients’ wishes</td>
<td>42.9%</td>
</tr>
<tr>
<td>Segregating the patients</td>
<td>31.0%</td>
</tr>
<tr>
<td>Locking patients in a room</td>
<td>6.0%</td>
</tr>
</tbody>
</table>
Chart 1: Respondents’ Experience in Restraint Use in the Past 3 months

- Tie patients to beds or chairs: 64.90%
- Straitjackets, safety vests and gloves etc: 51.80%
- Bed drills: 42.90%
- Segregating the patients: 31.00%
- Locking patients in a room: 6.00%
Reasons of Using Restraints

- A vast majority of the respondents (98.4%) pointed out that an important factor leading them to use physical restraints was “to prevent demented patients from hindering medical activities”.
- 94.6% of the respondents pointed out that another important factor was “to protecting patients from falling down from chairs/beds.”
- 93% of the respondents said that they used restraints to “prevent demented patients from bothering other patients”.
- However, 42.6% of the respondents also indicated that “colleagues in favor of restraint use” and “Prevalence of restraint use” (41.9%) were important factors in determining whether restraints were to be used.
**Table 2: Reasons for using restraints**

<table>
<thead>
<tr>
<th>Reason</th>
<th>Total (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>To prevent the demented patients from hindering medical activities</td>
<td>98.4%</td>
</tr>
<tr>
<td>Preventing the demented patients from pulling out a catheter</td>
<td>95.3%</td>
</tr>
<tr>
<td>Preventing the demented patients from tearing open a recovering wound</td>
<td>94.6%</td>
</tr>
<tr>
<td>Preventing the demented patients from pulling out feeding tubes</td>
<td>94.6%</td>
</tr>
<tr>
<td>Preventing the demented patients from pulling out inter vascular drip</td>
<td>93.8%</td>
</tr>
<tr>
<td>Preventing the demented patients from removing dressing</td>
<td>86.0%</td>
</tr>
<tr>
<td>To avoid the demented patients from falls</td>
<td>94.6%</td>
</tr>
<tr>
<td>Protecting the elderly from falling down from chairs</td>
<td>94.6%</td>
</tr>
<tr>
<td>Protecting the elderly from falling down from beds</td>
<td>93.8%</td>
</tr>
<tr>
<td>Protecting the elderly from falling down because of their shaky legs</td>
<td>91.5%</td>
</tr>
<tr>
<td>To prevent the demented patients from harassing other patients</td>
<td>93.0%</td>
</tr>
<tr>
<td>Keeping confused patients from bothering others</td>
<td>98.4%</td>
</tr>
<tr>
<td>Protecting other patients from suffering from physical abusiveness</td>
<td>82.9%</td>
</tr>
<tr>
<td>Preventing patients from taking other people's belongings</td>
<td>62.8%</td>
</tr>
<tr>
<td>Colleagues in favor of restraint use</td>
<td>42.6%</td>
</tr>
<tr>
<td>Prevalence of restraint use</td>
<td>41.9%</td>
</tr>
</tbody>
</table>
Comparing the personal characteristics of those respondents using and not using restraints

- Characteristics of those respondents using restraints
  - Shorter tenure
  - Many of them considered that they did not have sufficient training for taking daily care of demented patients
  - Had more positive attitude towards demented patients
Table 3: Personal Characteristics of Respondents using and not using Restraints

<table>
<thead>
<tr>
<th></th>
<th>Used Restraints (N=135)</th>
<th>Did not use restraints (N=33)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tenure*</td>
<td>8.8</td>
<td>11.5</td>
</tr>
<tr>
<td>Considered training insufficient for them to take daily care of demented patients*</td>
<td>81.7%</td>
<td>63.6%</td>
</tr>
<tr>
<td>positive attitude towards demented patients *</td>
<td>55.5%</td>
<td>39.3%</td>
</tr>
</tbody>
</table>

Note: * Significant Group Differences
Jockey Club Centre for Positive Ageing
Immerge of the Centre

- In 1997, the Hong Kong Jockey Club identified care for elderly with dementia as an area requiring urgent attention.
- Funded HK$81.23 million for the centre to start off and running of the first 3-year.
- Managed by the Chinese University of Hong Kong.
- Inaugurated in 2000.
Mission and Vision

- Provide high quality community-based care
- Promote healthy living
- Train the caregivers
- Research on dementia and the care
Philosophy of Care

- Every person is unique
- Focus on individual strength and needs
- Recognize the needs of love and joy
- Maintain and improve functional independence
- Care with respect and treasure
- Enhance self-identity through memories and life experience
- Provision of enriched environment
- Provision of flexible program and choice of activities
- Support the care-givers by
- Enhance quality of life of all during the caring process
Provision of Safe Activity Area

- Magnetic door lock system
- A Combination lock
Use of Alarm
Restrain Free Environment

- Barrier-free walking path
Restraint Free Environment

- Movement detecting system
- Resident monitoring system
Restraint Free Environment

- Padded paving
- Handrails
Environmental design

Round edge furniture
Sufficient lighting
Night Light
Recommendation

- More training in relation to taking care of demented patients to frontline nursing staff should be provided.
- Improve the overall safety of ward environment by using disabled friendly designs
- Special ward or unit for the confused patients should be provided.
- Curtail the inappropriate use of restraints through audit and administrative procedures.
- Avoid the use of invasive interventions in confused patients if possible