

Minimum Data Set (MDS) 3.0 Instructor Guide

Section P Restraints

Objectives

At the conclusion of this lesson, the student will be able to:

- 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 MDS 3.0.
- Code Section P Restraints correctly and accurately.

Training Resources

- Instructor Guide
- Slides 1 30

Instructor Preparation

- Review the Instructor Guide for this lesson.
- Review learning objectives for the lesson.
- Rehearse with slide presentation.

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INSTRUCTIONAL GUIDANCE

Instructor Notes

Direct participants to turn to Section P in the MDS 3.0 instrument.

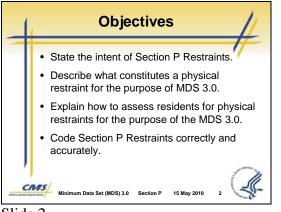
Instructor Notes



Slide 1

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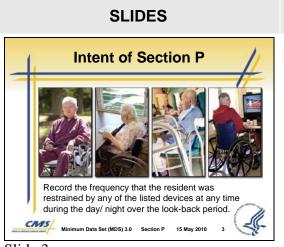
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I. Introduction/ Objectives

- A. Introduction
 - 1. This lesson addresses Section P: Restraints.
 - 2. Some key items we will cover include the definition of a physical restraint and as well as how to code the MDS.
- B. Objectives

At the conclusion of this lesson, you will be able to:

- 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 MDS 3.0.
- Code Section P Restraints correctly and accurately.



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II. Overview

- A. Intent of the section
 - 1. The intent of this section is to record the frequency that the resident was physically restrained by any of the listed devices at any time during the day or night over the look back period.
 - 2. Assessors will evaluate whether or not a device meets the definition of a physical restraint for the purpose of the MDS 3.0 according to the following three criteria:
 - Any manual method, physical or mechanical device, material or equipment
 - b. Attached or adjacent to the resident's body that the individual cannot remove easily
 - c. Which restricts the freedom of movement or normal access to one's body
 - 3. Only those devices categorized in Section P0100 that have the effect of restraining the resident will be coded for the MDS 3.0.



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- B. Use of Physical Restraints
 - 1. Use of physical restraints in nursing homes is not prohibited by federal regulations or CMS guidelines except:
 - a. Cannot be imposed for discipline or convenience
 - b. Must be required to treat the resident's medical symptoms

Text of federal regulation provided below.

- 2. The facility must assess the resident to properly identify the resident's needs and medical symptoms before using a physical restraint.
- 3. While a restraint-free environment is not a federal requirement, the use of physical restraints should be the exception, not the rule.

Instructor Notes

Federal Regulation Concerning Use of Restraints

The regulation specifically states, "The resident has the right to be free from any physical or chemical restraints imposed for the purposes of discipline or convenience and not required to treat the resident's medical symptoms" (42 CFR 483.13(a)).

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Discipline and Convenience

"Discipline" is defined as any action taken by the facility for the purpose of punishing or penalizing residents.

"Convenience" is defined as any action taken by the facility to control a resident's

Notes behavior or manage a resident's behavior with a lesser amount of effort by the facility and not in the resident's best interest.

Definitions obtained from the State Operations Manual Appendix PP.

http://www.cms.hhs.gov/manuals/downloads/som107ap_pp_guidelines_ltcf.pdf

Instructor Notes

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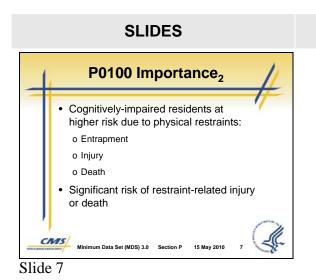
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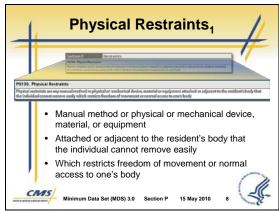


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III. P0100 Importance of Assessment

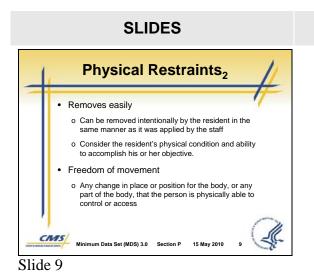
- A. P0100 Importance
 - 1. Although the requirements describe the narrow instances when physical restraints may be used, growing evidence supports that physical restraints have a limited role in medical care.
 - 2. Physical restraints limit mobility.
 - 3. Physical restraints increase the risk of adverse outcomes.
 - a. Functional decline
 - b. Agitation
 - c. Diminished sense of dignity
 - d. Depressed mood
 - e. Pressure ulcers





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- 4. Residents who are cognitively impaired are at a higher risk of entrapment and injury or death caused by physical restraints.
- 5. The risk of physical restraintrelated injury and death is significant.
- **B.** Physical Restraints
 - 1. A definition of physical restraints for the purpose of the MDS is provided on the MDS form in item P0100.
 - 2. A physical restraint is defined by three criteria:
 - Any manual method, physical or mechanical device, material or equipment
 - b. Attached or adjacent to the resident's body that the individual cannot remove easily
 - c. Which restricts the freedom of movement or normal access to one's body
 - 3. An item must meet all three of these criteria to be considered a physical restraint for the purpose of the MDS 3.0.



Examples of Physical Restraints · Leg restraints Facility practices o Side rails · Arm restraints o Velcro on sheets · Hand mitts o Devices used with Soft ties/vests chairs (tray, table, bar, or belt) Lap cushions o Placement of chair Lap trays or bed CMS/ Minimum Data Set (MDS) 3.0 Section P 15 May 2010

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- 4. Removes Easily
 - a. The manual method, device, material, or equipment can be removed intentionally by the resident in the same manner as it was applied by the staff.
 - Side rails are put down, not climbed over.
 - Buckles are intentionally unbuckled.
 - Ties or knots are intentionally untied.
- 5. Freedom of movement means 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.
- 6. Consider the resident's physical condition and ability to accomplish his or her objective.
 - a. Transfer to a chair
 - b. Get to the bathroom in time
- C. Examples of Physical Restraints
 - 1. The Interpretive Guidelines for 42 CFR 483.13(a) Restraints, states that "Physical Restraints" include, but are not limited to:
 - Leg restraints
 - Arm restraints
 - Hand mitts
 - Soft ties or vests
 - Lap cushions
 - Lap trays the resident cannot remove easily

SLIDES INSTRUCTIONAL GUIDANCE 2. Physical restraints also include facility practices that meet the definition of a physical restraint: a. Using side rails that keep a resident from voluntarily getting out of bed b. Tucking in or using Velcro to hold a sheet, fabric, or clothing tightly so that a resident's movement is restricted c. Using devices in conjunction with a chair, such trays, tables, bars or belts, that the resident cannot remove easily, that prevent the resident from rising d. Placing a chair or bed so close to a wall that the wall prevents the resident from rising out of the chair or voluntarily getting out of bed" etc. D. Conduct the Assessment P0100 Conduct the Assessment. 1. Check the resident's medical Review resident's medical record. record to determine if any o Physician's orders physical restraints listed in o Nurses' notes P0100 were used during the o Nursing assistant documentation look-back period. Consult the nursing staff across all shifts. o Resident's cognitive status and limitations Physician's orders a. o Physical status and limitations b. Nurses' notes

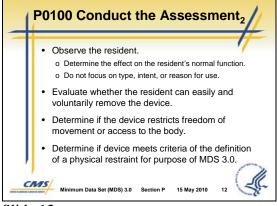
- c. Nursing assistant documentation
- 2. Consult the nursing staff across all shifts.

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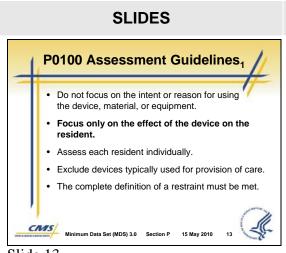
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Minimum Data Set (MDS) 3.0



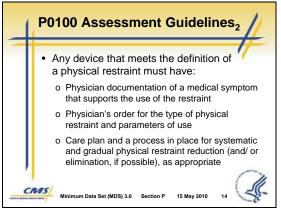
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- a. Resident's cognitive status and limitations
- b. Resident's physical status and limitations
- 3. Observe the resident.
 - a. Determine the effect the device, material, and/ or equipment has on the resident's normal function.
 - b. Do not focus on the type, intent, or reason behind the use of the device, material, or equipment.
- 4. Evaluate whether the resident can easily and voluntarily remove the device, material, or equipment.
- 5. If the resident cannot easily and voluntarily remove the device, material, and/ or equipment, continue with the assessment to determine whether or not the device, material or equipment restricts freedom of movement or the resident's access to their own body.
- 6. Determine if the device, material or equipment meets the full definition of a physical restraint for the purpose of MDS 3.0.
- 7. This can only be determined on an individual, case by case basis.



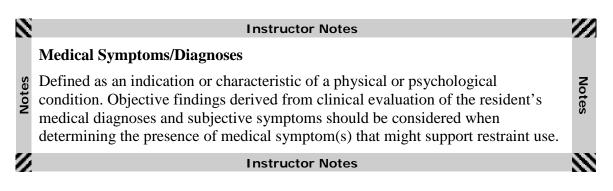
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- E. P0100 Assessment Guidelines
 - 1. Do not focus on the intent or reason for using the device, material, or equipment.
 - 2. The decision about coding any device, material, equipment, or physical or manual method as a restraint depends on the effect the device, material, or equipment has on the resident.
 - 3. Assess each resident individually.
 - a. The same device may have the effect of restraining one individual but not another, depending on the individual resident's condition and circumstances.
 - b. For example, partial rails may assist one resident to enter and exit the bed independently while acting as a restraint for another.
 - c. It is possible for a device to improve the resident's mobility and also have the effect of restraining him or her.
 - 4. Exclude devices, materials, or equipment that are typically used in the provision of medical care.
 - Includes catheters, drainage tubes, casts, traction, leg, arm, neck, or back braces, abdominal binders, and bandages that are serving in their usual capacity to meet medical need(s)



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- 5. The device, material, or equipment must meet all criteria of the definition of a physical restraint as identified below:
 - a. Attached or adjacent to the resident's body
 - b. Cannot be easily removed by the individual
 - c. Restricts freedom of movement or normal access to one's body
- 6. Any device, material, or equipment that meets the definition of a physical restraint must have the following:
 - a. Physician documentation of a medical symptom that supports the use of the physical restraint
 - b. Physician's order for the type of physical restraint and parameters of its use
 - c. A care plan and process in place for systematic and gradual physical restraint reduction (and/ or elimination, if possible), as appropriate



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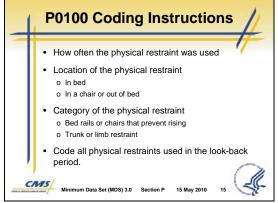
INSTRUCTIONAL GUIDANCE

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Medical Symptoms/Diagnoses cont'd

The resident's subjective symptoms may not be used as the sole basis for using a restraint. In addition, the resident's medical symptoms/diagnoses should not be viewed in isolation; rather, the medical symptoms identified should become the context in which to determine the most appropriate method of treatment related to the resident's condition, circumstances, and environment, and not a way to justify restraint use.

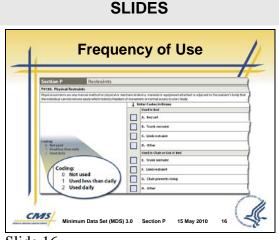
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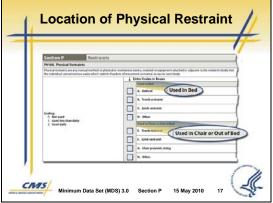
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- F. P0100 Coding Instructions
 - 1. When coding the MDS 3.0, you will be providing three pieces of information.
 - a. How often the physical restraint was used during the look back period
 - b. Location where the physical restraint was used
 - In bed
 - Chair or out of bed
 - c. Category of the physical restraint
 - Bed rails or chairs that prevent rising
 - Trunk or limb restraint
 - Other type of restraint
 - 2. Code all physical restraints that were used during the look-back period.
 - a. Multiple items may meet the definition of a physical restraint.



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- 3. Frequency of Use
 - a. Select a code by determining the frequency of use (how often the physical restraint was used during the look-back period).
 - Code 0. Not used

If the device, material, or equipment was not used during the look-back period **or** it was used but did not meet the definition

- Code 1, Used less than daily If the device, material, or equipment met the definition and was used less than daily during the look-back period
- Code 2, Used daily

If the device, material, or equipment met the definition and was used on a daily basis during the look-back period

- 4. Location of Physical Restraint
 - a. Determine the location of the physical restraint.
 - b. Code devices, material, or equipment as used in bed or used in a chair or outside of the bed separately.
 - c. Enter the code for the frequency of use of the physical restraint in the correct section of the form to reflect where the physical restraint(s) was used.
 - Used in Bed
 - Used in Chair or Out of Bed



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INSTRUCTIONAL GUIDANCE

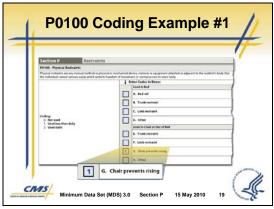
- d. If trunk or limb restraints are used in both the bed and a chair, code the MDS in both sections.
- 5. Category of Physical Restraint
 - a. Determine the category of the physical restraint.
 - b. Enter the code in the correct box to indicate the category that applies to the physical restraint.
 - c. Bed rails
 - Include any combination of partial or full rails (e.g., oneside half-rail, one-side full rail, two-sided halfrails or quarter-rails, rails along the side of the bed that block threequarters to the whole length of the mattress from top to bottom, etc.).
 - Include enclosed bed systems.
 - d. Trunk restraints

Includes any device or equipment or material that the resident cannot easily remove such as, but not limited to, vest or waist restraints, or belts used in a wheelchair.

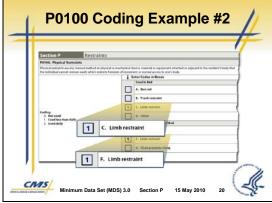
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- e. Limb restraints
 - Includes any device that the resident cannot easily remove that restricts movement of any part of an upper extremity (i.e., hand, arm, wrist) or lower extremity (i.e., foot, leg).
 - This includes mittens
- f. Chair that prevents rising
 - Include any type of chair with a locked lap board, that places the resident in a recumbent position that restricts rising, or a chair that is soft and low to the floor.
 - Include chairs that have a cushion placed in the seat that prohibit the resident from rising.
 - Enclosed-frame wheeled walkers, with or without a posterior seat, and other devices like it should not automatically be classified as a restraint.

These types of walkers are only classified as a restraint if the resident cannot exit the gate.



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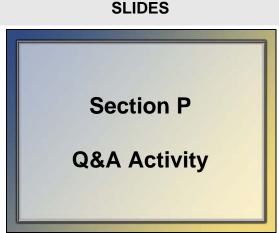
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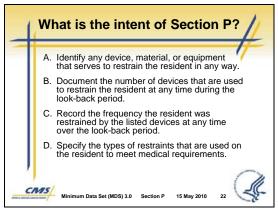
g. Other

Any device that does not fit into the listed categories and meets the criteria of physical restraints should be coded here and should be care-planned and monitored.

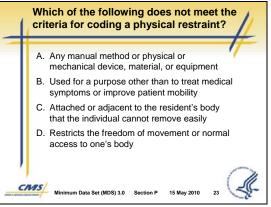
- G. P0100 Coding Example #1
 - 1. In this sample, you see a "1" coded on the MDS.
 - 2. This code indicates that a chair that prevents rising was used for the resident during the look-back period.
 - 3. Remember to code every restraint identified during the look-back period.
- H. P0100 Coding Example #2
 - 1. In this sample, you see a "1" coded on the MDS for a limb restraint used both in bed and out of bed.
 - 2. This example reflects two possible situations.
 - a. If a trunk or limb restraint is used in both bed and chair, it should be marked in both sections.
 - b. This coding indicates that two different restraints were identified for this resident. Code the MDS 3.0 for all physical restraints used during the look-back period.



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IV. Section P Q&A Activity

Ask students to retrieve their polling devices for the following activity.

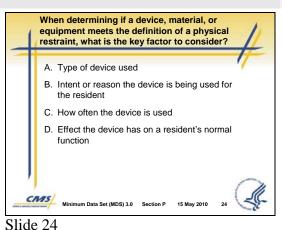
Another option for conducting this activity is to separate participants into teams and track which team answers the most questions correctly.

This is a question/answer exercise to help gauge retention of the course material and provide an opportunity for follow-up and reinforcement.

This activity consists of 6 questions.

- 1. What is the intent of Section P?
 - a. Correct answer is C.
 - b. Record the frequency the resident was restrained by the listed devices at any time over the look-back period.

- 2. Which of the following does not meet the criteria for coding a physical restraint?
 - a. Correct answer is B.
 - b. Used for a purpose other than to treat medical symptoms or improve patient mobility

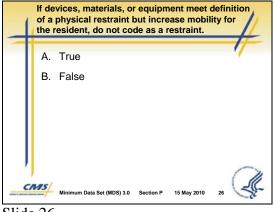


 You must code all devices you identify that meet the definition of a restraint for the purpose of the MDS 3.0.

 A. True

 B. False

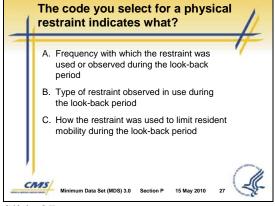
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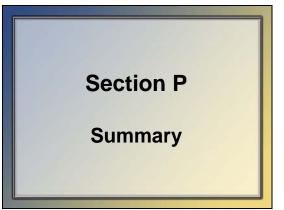
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- 3. When determining if a device, material, or equipment meets the definition of a physical restraint, what is the key factor to consider?
 - a. Correct answer is D.
 - b. Effect the device has on a resident's normal function
 - c. Do not consider the type of device, material, or equipment that is being used or the intent or reason for its use.
 - d. Only consider the effect the device, material, or equipment has on a resident's normal function.
- 4. You must code all devices you identify that meet the definition of a restraint.
 - a. Correct answer is A. True.
 - b. All devices, materials, or equipment identified as a physical restraint must be coded in the MDS.

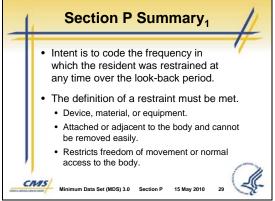
- 5. If devices, materials, or equipment meet the definition of a physical restraint but increase mobility for the resident, do not code as a restraint.
 - a. Correct answer is B. False
 - b. It is possible for a device, material, or equipment to improve the resident's mobility and also have the effect of restraining him or her.
 - c. If a device, material, or equipment meets the definition of a physical restraint, it must be coded as a restraint.



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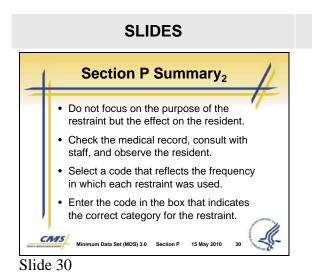
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- d. Focus only on the effect of the device, material, or equipment on the resident.
- 6. The code you select for a physical restraint indicates what?
 - a. Correct answer is A.
 - b. Frequency with which the restraint was used or observed during the look-back period.
 - c. Select a code that reflects the frequency of use for each physical restraint identified for the resident.
 - d. Enter that code for the applicable location and category for the physical restraint.

V. Section P Summary

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



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