

MOVEMENT RESTRAINTS USED IN NURSING HOMES FOR SENIORS

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Abstract: *Care services focused on seniors, namely resident services hold an important position in the system of contemporary social services in the Czech Republic. Admission to a Nursing Home is a major life transition for many older adults, which influences their lives significantly and almost always permanently. Because of inherent danger of misuse associated with movement restraints together with possible infringement of fundamental human rights and freedoms, there must be strict rules regulating their using.*

Present regulations are stipulated pursuant to Social Services Act No. 108/2006 as subsequently amended. However the law gives only a general specification, often leading care service providers to very difficult situations. Therefore, a highly important thing is how care service providers observe their obligation – to setup conditions for using physical restraints by internal regulations in individual nursing homes for seniors where it is adequate.

Keywords: *Nursing Homes for Seniors, Using Movement Restraints, Social Services Act, Reporting Use of Movement Restraints, Internal Regulations*

1. Introduction

Nursing Homes for Seniors, for details see Social Service Act No. 108/2006 § 49, as subsequently amended, - "Nursing Homes for Seniors provide residential nursing care for people with reduced self-care abilities, which are most frequently linked to old age, whose situation requires regular assistance of a nurse". [10] And also see Decree No. 505/2006, § 15 carrying into effect some provisions of the Social Service Act as subsequently amended specifying e.g. basic nursing care in Nursing Homes for Seniors. [9]

Out of all the people over 65 years of age in the Czech Republic, 2,6 % live in nursing Residential Facilities, compared to 4 % in Austria, 5 % Germany, 6 % France.

In my article I present not only theoretical knowledge but also, for comparison, statistical data based on the Register of the County Council in Pardubice. These problems are presented to the readers from my perspective as an inspector for care and social services.

2. Social Services Act No. 108/2006 as subsequently amended (hereinafter Social Services Act)

In the present time the Social Services Act (effective January 1, 2007), § 89 is the only regulation on restraint use. Generally, the use of movement restraints is prohibited

by law in Nursing Facilities except in emergency circumstances (to ensure physical safety).

Before using movement restraints, all other alternatives (verbal soothing, diverting attention, consoling, etc.) have been attempted and found inadequate. Possible restraints are specified in **§ 89 art. 3**.

In case of movement restraints use, careful documentation is required, for details see **§ 89 art. 6**. Requirements for documentation of such acute situations are regulated by Social Services Act. According to the Ombudsman for Human Rights, these requirements could be considered sufficient and recommended for use. Further he suggests that a Central Registry should be kept to make it possible to trace emergency situations and evaluate most frequently used physical restraints. [7]

3. Methodology of the Ministry of Labour and Social Affairs (MPSV) for using restraints

On the basis of repetitive suggestions from Social Services providers, arising from practical experience, regarding application of law in practice (Social services Act, § 89), the **recommended guideline** has been elaborated by the Ministry (MPSV): “Method of Application for Movement Restraints, MPSV CR”, [6] issued in July 2008. In my opinion this guideline did not give expected results for care service providers.

4. The Act No. 206/2009 to alter the Social services Act

In connection with the amendment to the Social Service Act, put into operation by Act No. 206/2009 (effective date August 1, 2009).[11] I should like to give notice of changes in **§ 89 art. 3**, where amended ... "it is possible to use medication on the basis of prescription and orders of a physician on duty". The aim of the new regulation is to put pressure on providers to stop overusing medication.

The Ombudsman highlights in his Report on nursing homes visits, that using calming medication represents a form of power misuse and evaluates the importance of the Amendment as a possibility to reduce overuse of medication. [8]

Further I should like to give notice of changes in **§ 89 art. 7**, the full text: “*Providers of the care services who used movement restraints in last six months are obliged to document and report in writing the number, type and frequency of restrains to the Registration Authority within 15 calendar days after the lapse of the six month’s period*“. In the year 2010, for the first time to January 15, 2010, the Registration Authority (appropriate County Council) has an overview of used movement restraints and is able to start checking and taking appropriate steps to increase protection of clients.

In the following part of my entry I deal with comparison of Reports on Movement Restraint Use in all Nursing Homes for Seniors registered at the County Council of Pardubice Region to January 15, 2010 and July 15, 2010.

Table 1: Reports on use of physical restraints January 2010, nursing Homes for seniors in Pardubice Region

Number of Nursing Homes for Seniors	Physical Restraints YES	Physical Restraints NO	No report sent	Fixation by holding	Seclusion room	Medication	Other restraints
16	1	13	2	0	0	0	5*

5* = bed rails - 5 clients

Source: Registry records – County Council Pardubice, Department of Social Affairs [1]

Table 2: Reports on use of physical restraints July 2010, nursing Homes for seniors in Pardubice Region

Number of Nursing Homes for Seniors	Physical Restraints YES	Physical Restraints NO	No report sent	Fixation by holding	Seclusion room	Medication	Other restraints
16	2	12	2	0	0	0	25*, 1**

25* = bed side rails - 25 clients

1** = cardio-chair 1 client

Source: Registry records – County Council Pardubice, Department of Social Affairs [2]

In total, side rails were used in 6 cases and cardio-chair in 1 case (it is a mechanically positioning chair *suitable* also for resting and *relaxation of cardiac* patients, clients with *circulatory problems*, with *varicose veins*, diabetic patients, etc.). In the second Nursing Home for Seniors were used side rails in 19 cases.

The presented information shows that it is evident that Nursing Homes for Seniors almost do not use movement restraints, or, to be precise, do not report such use of restraints.

In my opinion this can be caused partly by different views of “movement restraints” in practice, and whether it is generally required to follow provisions of Social Services Act, § 89 for long-term using of various devices (e.g. bed side rails, support people to enable them to sit up, etc.).

Theological interpretation of Social Services Act, § 89 says that devices used for other purposes than due to imminent danger to life or health to self or others do **not mean movement restraints according to the § 89**. However, this does not imply that all of them are acceptable. [4] Restraint devices cannot be used without client’s prior permission and agreed rules of using.

Special attention is needed to ensure dignified care for clients with late-stage of Alzheimer’s disease, which leads to increase in demands for immediate care services in Nursing Homes for Seniors. It is necessary to find the ways of communication with these people, understand their problematic behaviour and possible aggressive reactions. [5] These clients are more frequently in danger of potential misuse of

movement restraints. Individual plans including emergency plans can help eliminate these incidents in effective ways.

5. Internal regulations for using movement restraints when providing Care Services

Social service providers are, apart from other things, obliged to continuously increase quality of provided services and protect and respect clients' rights more than their well being. The law does not show clear and unambiguous guideline with steps that could be taken to avoid potential faults in all cases. According to the Social Services Act, § 88 letter d), providers are obliged to „*make internal regulations regarding care services, including rules for nursing staff in the form understandable to all*“. Provider is, according to the Decree No. 505/2006, annex No. 2 Standards for Quality in Social Services, namely Standard No. 1, criteria c/ and standard No. 2, criteria a/ and b/, obliged to specify conditions under which movement restraint can be used in internal regulations.

Relevant Quality Standards bring all the important guidelines for nursing staff for the use of restrains in specific situations. [3] Structure of the Quality Standards represents one of three key component parts of the system to guarantee social service quality.

6. Conclusion

Considering the above mentioned, care providers should create internal regulations for possible use of movement restraints in particular Nursing Homes for Seniors where it is relevant and reflect specifics of particular types of care and facilities. Residential care can bring a kind of *power* over a client. Despite the qualitative shift in terms of regulations for using movement restraints in Nursing Facilities, it is possible to say that we still can find ambiguous wording in present law. I understand that it is not possible to regulate the entire field in details by law; it is necessary to offer space for individual evaluation of the situation of the client and specific measures and techniques for providers. However, to safeguard clients and providers better in terms of law and legislation, it is necessary to determine, by law, what can be considered by “movement restraints”. According to the present provisions of Social Services Act, § 89, art. 1, it is not clear if this legislation regulates short-time use of restraints, calming down aggressive behaviour, or if it also includes long-term use of devices (e.g. bed side rails, etc.).

The problem, in my point of view, also lies in the fact that under the law the care givers are bound to report only the use of movement restraints. In case of no use it is up to the provider's decision if they send reports of “no incident” to the County Council or not. In the present time the care givers use movement restraints in Nursing Homes for Seniors often on the basis of their own explanation of law, which can diminish effective protection of clients' rights in Nursing Homes for Seniors.

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- [9] Vyhláška č. 505/2006 Sb., kterou se provádějí některá ustanovení zákona o sociálních službách, ve znění pozdějších předpisů
- [10] Zákon č. 108/2006 Sb., o sociálních službách, ve znění pozdějších předpisů
- [11] Zákon č. 206/2009 Sb., kterým se mění zákon o sociálních službách, ve znění pozdějších předpisů

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