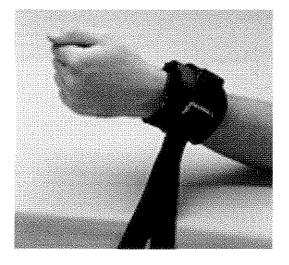


HOW TO USE THE RECOMMENDED MECHANICAL RESTRAINT METHODS ON MIDAS NUMBER 41869

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# POSEY T-A-T CUFF (WRIST) Posey Number 2790



### Applying the connecting straps

- 1. Use method a. or b. below to attach straps to the bed (repeat steps 1-2 on each side):
  - a. Triangulation process; to restrict patient's range of motion: separate the straps and attach them to different points along a movable part of bed frame, out of the patient's reach (fig. 1).
  - b. To increase patient's range of motion: Place the straps together and attach to a single point along a movable part of the bed frame, out of the patient's reach.
- 2. Wrap the connecting strap to the frame by pulling the strap back between the first and second D-ring (fig. 2), or attach with a quick release tie.

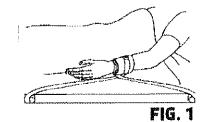
Applying the cuffs (repeat steps 1-4 for each limb):

- Wrap the neoprene piece (the blue side should be position against the skin) around the wrist. Attach the black hook and loop pieces together, followed by the blue hook and loop pieces. The fuzzy piece should be sandwiched between the two pieces of hook (Fig. 3). Be sure to overlap at least one inch (3cm).
- Press the hook and loop closure together firmly and make sure it adheres securely. Slide ONE finger (flat) between the cuff and inside of the patient's wrist to ensure proper fit. The cuffs must be snug enough to prevent escape, but not interfere with circulation.
- 3. Pass the end of the limb strap over the top of the cuff and through the two D-rings on the cuff. Bring the strap back over the first ring and through the two D-rings on the cuff.
- 4. Adjust the bed strap(s) to allow desired freedom of movement, without compromising patient or caregiver safety.

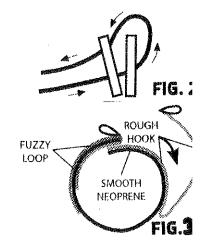
## **Expected Observations**

The need for continued use of the restraint will be continually monitored and regularly reviewed, to ensure it is applied for the minimum amount of time necessary.

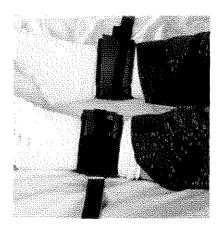
The frequency and extent of monitoring of the consumer during restraint will be determined by the risks associated with the consumer's needs and the type of restraint being used.



THREADING THROUGH D-RINGS



## POSEY T.A.T CUFFS (ANKLE) Posey Number 2791



Wrap the connecting strap to a moveable part of the bed frame, out of the patient's reach, by pulling the strap back between the first and second D-ring (fig. 1), or attach with a quick release tie.

Applying the cuffs (repeat steps 1-4 for each limb):

- 1. Wrap the neoprene piece (the red side should be position against the skin) around the ankle. Attach the black hook and loop pieces together, followed by the red hook and loop pieces. The fuzzy piece should be sandwiched between the two pieces of hook (fig. 2). Be sure to overlap at least one inch (3cm).
- 2. Press the hook and loop closure together firmly and make sure it adheres securely. Slide ONE finger (flat) between the cuff and inside of the patient's ankle to ensure proper fit. The cuffs must be snug enough to prevent escape, but not interfere with circulation.
- 3. Pass the end of the limb strap over the top of the cuff and through the two D-rings on the cuff. Bring the strap back over the first ring and through the two D-rings on the cuff.
- 4. Adjust the bed strap(s) to allow desired freedom of movement, without compromising patient or caregiver safety.

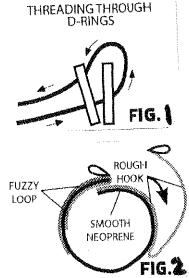
#### To limit patient range of motion

- 1. Attach the cuff that is secured to the bottom right corner of the bed to the left ankle.
- 2. Criss-cross the straps and attach the cuff secured to the bottom left corner of the bed to the right ankle.
- 3. Adjust connecting straps as necessary.

#### Expected Observations

The need for continued use of the restraint will be continually monitored and regularly reviewed, to ensure it is applied for the minimum amount of time necessary.

The frequency and extent of monitoring of the consumer during restraint will be determined by the risks associated with the consumer's needs and the type of restraint being used.



# POSEY PURCHASED MITTENS Posey Number 2813



## Application Instructions

- 1. Open the wrist cuff attachment on the Mitt by releasing the quick-release buckle and hook and loop closure.
- 2. Insert the patient's hand into the Mitt, separating the fingers so they fit in each finger slot.
- 3. Close the padded cuff around the wrist and secure with the hook and loop fasteners.

**CAUTION:** Over tightening will compromise circulation. Leave enough room to easily insert one finger between the device and the patient's limb. Remove Mitt to check circulation at regular intervals.

4. Pull the mesh flap of the Mitt down over the wrist cuff and secure the quick-release buckle. Adjust strap so it is snug, but will not impair circulation.

#### Expected Observations

The need for continued use of the restraint will be continually monitored and regularly reviewed, to ensure it is applied for the minimum amount of time necessary.

The frequency and extent of monitoring of the consumer during restraint will be determined by the risks associated with the consumer's needs and the type of restraint being used.

# POSEY BODY HOLDER Posey Number 1731



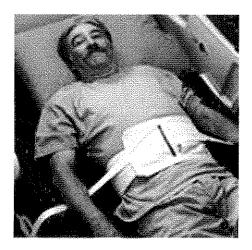
#### Application Instructions: Chair

- 1. Position the patient so their hips are against the back of the chair.
- 2. Put the belt around the hips, flannel side in toward the patient.
- 3. Bring the straps through the slot in front of the patient, down under the chair at a 45° angle, around the back post, and secure them at a juncture of the frame which will not allow the straps to slide in any direction and change the position of the product. Secure them out of the patients reach to tilt bars or bottom rail of the chair.
- 4. Straps should always be snug, but not interfere with breathing. You should be able to slide your open hand (flat) between the device and the patient.
- 5. Insure that the patient's hips rest comfortably against the back of the chair, to preclude sliding forward or down, and that the belt does not tighten or loosen if the chair is repositioned.

#### **Expected Observations**

The need for continued use of the restraint will be continually monitored and regularly reviewed, to ensure it is applied for the minimum amount of time necessary.

The frequency and extent of monitoring of the consumer during restraint will be determined by the risks associated with the consumer's needs and the type of restraint being used.



### Application Instructions: Bed

- 1. Put the Posey Body Holder around the patient with the slot in front.
- 2. Put the long belt around the patient's waist with the soft flannel side facing in.
- 3. Bring the straps through the slot, and secure them diagonally to the movable part of the bed frame, with quick release ties. Always secure to a juncture of the frame which will not allow the straps to slide in any director and change the position of the product.
- 4. If freedom of movement is desired, the slot may be positioned in back of the patient. This allows them to turn from side to side.
- 5. After passing the straps through the slot, secure them to the movable part of the bed frame with a quick-release tie out of the patient's reach.
- 6. When the straps are secured together, the patient has limited movement toward the head or foot of the bed. If the straps are "triangulated" and secured to different parts of the bed frame, the movement is even more restricted.
- 7. DO NOT triangulate the straps if the position of the bed is to be changed. If the head or foot of the bed is raised or lowered, it will cause the straps to tighten or loosen because they are secured to the movable part of the bed frame. If they tighten they cause the patient to suffocate. If they loosen, the patient could gain enough slack in the straps to climb over the side rails, suspend themselves above the ground and suffocate or become entangled.
- 8. Straps should always be snug, but not interfere with breathing. You should be able to open you hand (flat) between the device and the patient. Make sure straps are secured at a juncture of the frame and will not slide in any direction, changing position of the device.

## Expected Observations

The need for continued use of the restraint will be continually monitored and regularly reviewed, to ensure it is applied for the minimum amount of time necessary.

The frequency and extent of monitoring of the consumer during restraint will be determined by the risks associated with the consumer's needs and the type of restraint being used.

# POSEY PELVIS SOFT BELT Posey Number 4125C



#### **Application Instructions**

- 1. Put belt over the patient's lap, label side up.
- 2. Bring the straps over the hips, down under the chair at a 45° angle, attach around the back post, and secure them at a juncture of the frame which will not allow the straps to slide in any direction and change the position of the product.
- 3. Secure the straps out of the patient's reach with a quick release tie (see end of this document for instructions) or buckle.
- 4. Put the pelvic strap between the legs of the patient.
- 5. Take the pelvic strap ties under the patient's buttocks, down behind the chair, and secure the ends out of the patient's reach.
- 6. "Snug up" tightness by pulling the strap around the back post, cross and twist before securing. The patient's hips should be against the back of the chair.
- 7. Straps should always be snug, and not interfere with breathing. You should be able to slide your open hand (flat) between the device and the patient. Make sure the straps are secured at a juncture of the frame which will not slide in any direction, changing position of the device.
- The straps must be secured with a quick-release tie (see end of this document for instructions) or buckle to the wheelchair tilt bar, out of reach of the patient (see below)



9. If the chair has an adjustable seat, secure the straps to the movable part of the chair frame that will move the seat when the

seat is repositioned, keeping the belt snug, but not tight. This will prevent the belt from tightening and possibly suffocating the resident. If the belt loosens when the chair is repositioned, it may allow the patient to slide forward or down in the chair, become suspended I the restraint, and result in chest compression and suffocation.

## Expected Observations

The need for continued use of the restraint will be continually monitored and regularly reviewed, to ensure it is applied for the minimum amount of time necessary.

The frequency and extent of monitoring of the consumer during restraint will be determined by the risks associated with the consumer's needs and the type of restraint being used.

## POSEY WRIST RESTRAINT Posey Number 2750



Application instructions: Connecting Straps (repeat steps 1-4 for each side)

- 1. Place the cuffs on the bed at the wrist or ankle position.
- 2. Bring the ends of the strap down through the inside of the side rails so they do not interfere with the movement of the side rails. Thread the end of the strap over the top, around the frame, and connect the blue and red hook and loop together.
- 3. Pull the strap snug.
- 4. Position the patient on the bed.

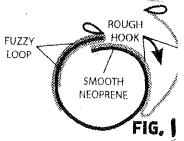
Applying the Cuffs (repeat steps 1-2 for each limb)

- Wrap the neoprene piece (the blue or red side should be positioned against the skin) around the wrist/ankle. Attached the black hook and loop pieces together, followed by the blue or red hook and loop pieces. The fuzzy piece should be sandwiched between the two pieces of the hook (fig. 1). Be sure to overlap at least one inch (3cm).
- Press the hook and loop closure together firmly and make sure it adheres securely. Slide ONE finger (flat) between the cuff and the inside of the patient's wrist/ankle to ensure proper fit. The cuffs must be snug enough to prevent escape, but not interfere with circulation.

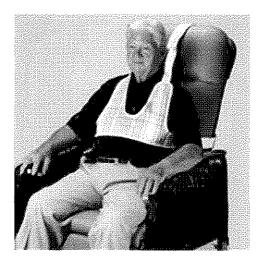
#### **Expected Observations**

The need for continued use of the restraint will be continually monitored and regularly reviewed, to ensure it is applied for the minimum amount of time necessary.

The frequency and extent of monitoring of the consumer during restraint will be determined by the risks associated with the consumer's needs and the type of restraint being used.



# POSEY VEST RESTRAINT Posey Number 3705



### Application Instructions for Chair

- 1. Position the patient as far back in the seat as possible with the buttocks against the back of the chair.
- 2. Place the device on the patient with the "U" neck in front.
- 3. Position the straps through the bottom loops on each side of the vest.
- 4. Secure the straps to the chair out of the patient's reach.
- 5. Slide an open hand flat between the device and the patient to ensure a proper fit. The device must be snug, but not interfere with breathing.

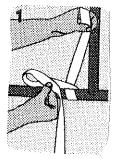
#### **Expected Observations**

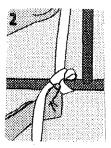
The need for continued use of the restraint will be continually monitored and regularly reviewed, to ensure it is applied for the minimum amount of time necessary.

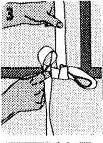
The frequency and extent of monitoring of the consumer during restraint will be determined by the risks associated with the consumer's needs and the type of restraint being used.

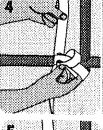
# HOW TO TIE THE POSEY QUICK-RELEASE TIE

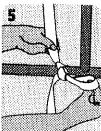
- 1. Wrap the strap once around a movable part of the bed frame leaving at least a 16" (40cm) tail. Fold the loose end in half to create a loop and cross it over the other end.
- 2. Insert the folded strap cross over each other, as if tying a shoelace. Pull on the loop to tighten.
- 3. Fold the loose end in half to create a second loop.
- 4. Insert the second loop into the first loop.
- 5. Pull on the loop to tighten. Test to make sure the strap is secure and will not slide in any direction.
- 6. Repeat on other side. Practice quick-release ties to ensure the knot releases with one pull on the loose end of the strap.

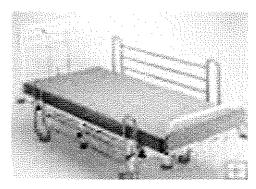












# **BED SIDES**

Details of Restraint Type of restraint Objective Clinical indication for use	Area Restraint can be used: General Use Bed sides To reduce threat of harm to patient from a fall or unrestrained movement • Disorientation, confusion, impaired judgement leading to patient	
Objective Clinical indication		
	<ul> <li>attempting to mobilise when clinically inappropriate.</li> <li>Disorientation etc may be related to sepsis, hypoxia, Alzheimer's, head injury and unfamiliar environment.</li> </ul>	
Clinical risks if restraint used	<ul> <li>Potential for patient to become increasingly agitated, distressed, confused</li> <li>Injury e.g. skin tears, bruises and fractures if patient attempts to exit the bed over the bed sides or from the foot of the bed</li> <li>Decreased patient autonomy and independence</li> <li>Other related medical risks to the patient – please document on incident form</li> </ul>	
Clinical risks if restraint not used	<ul> <li>Risk of patient mobilising when clinically inappropriate resulting in increased risk of injury</li> <li>Unable to effectively administer vital treatment that would assist in resolving the situation</li> </ul>	
How to use	Raise on both sides of the bed. Provide patient will patient call bell and explain how and when to use. Check ability to understand instructions. If unable to use bell adjust frequency of observations to ensure patient needs are met in a timely manner.	
General comments	Provide an explanation to the patient/family/whanau of the purpose of bed sides.	
When a bed side is used as an ENABLER:	<ul> <li>A bed side is an enabler when patient(s) are</li> <li>requesting that bed sides are put into use</li> <li>transferred to and from theatre</li> <li>technically positioned to facilitate a clinical procedure to be undertaken or when positioning aids are used in theatre</li> <li>recovering from anesthesia</li> <li>unconscious</li> <li>using raised bedsides to assist their mobility in bed or to aid in the positioning of pillows for comfort</li> </ul>	
When a bed side is used as a RESTRAINT	<ul> <li>A bed side is a restraint when it is used to prevent a patient from falling from the bed.</li> <li>Reference: Restraint Policy Midas 16691</li> </ul>	