



Policy: PA.5001
Title: **Use of Physical and Chemical Restraints**
Department: CalOptima Health PACE
Section: Not Applicable

CEO Approval: /s/ Michael Hunn 05/09/2024

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Applicable to: ☐ Medi-Cal
☐ OneCare
☒ PACE
☐ Administrative

I. PURPOSE

This policy defines and identifies the appropriate implementation and termination of physical or Chemical Restraints by CalOptima Health Program of All-Inclusive Care for the Elderly (PACE) employees.

II. POLICY

A. CalOptima Health PACE shall only use restraints as follows:

1. To protect Participants from physically harming themselves or others;
2. To protect the employees and/or Participants from Participant violence; or
3. To facilitate medically necessary procedures for life-threatening symptoms or illness in uncooperative Participants.

B. CalOptima Health PACE shall make every effort to promote a safe environment for Participants minimizing the use of both Physical and Chemical Restraints. On occasion, the safety of Participants and others may require the use of Physical or Chemical Restraints on an emergency basis or as a temporary measure. In these instances, CalOptima Health PACE shall make every effort to use the least restrictive and most effective methods possible.

C. If the Interdisciplinary Team (IDT) determines that a restraint is required to prevent immediate harm to the Participant or other Participants, the use of the restraint shall meet the following conditions:

1. Be imposed according to the manufacturer's recommendations;
2. Be imposed for a defined, limited period of time based upon the assessed needs of the Participant;
3. Be imposed in accordance with safe and appropriate restraining techniques;
4. Be imposed only when other less restrictive measures are found to be ineffective to protect the Participant or others from harm; and
5. Be removed or ended at the earliest possible time.

- D. The CalOptima Health PACE IDT shall continually assess, monitor and reevaluate the condition of the restrained Participant. On the order of the Participant's Primary Care Provider (PCP), CalOptima Health PACE shall administer Chemical Restraints for a specified time and re-evaluate the use of Chemical Restraints at least every thirty (30) calendar days, or sooner as warranted. CalOptima Health PACE shall discontinue all restraints at the earliest possible time when their use is no longer warranted.
- E. CalOptima Health PACE believes that Participants have the right to be free from harm, including Physical or Chemical Restraints.
 - 1. Limit the use of restraints to those situations with adequate, appropriate clinical justification;
 - 2. Utilize the least restrictive and most effective restraint method available, and ensure it conforms to the Participant's plan of care; and
 - 3. Use restraints only as a last resort.
- F. CalOptima Health PACE does not believe that restraints of any kind should ever be used as a preferred approach to care and shall ensure that CalOptima Health PACE shall be 'restraint free' to the greatest extent possible.
- G. Examples of behaviors that may require the use of restraints include combative behavior or behavior that is self-injurious, like biting or head banging. In such situations, CalOptima Health PACE shall only use restraints after the Participant's targeted behavior has not responded to other measures, such as persuasion or being placed in a quiet area.
- H. CalOptima Health PACE shall periodically remove any restraints at a frequency specified by the CalOptima Health PACE Provider. When the restraints are removed, CalOptima Health PACE shall observe the Participant for the targeted behavior and make attempts to control the behavior by less extreme measures.
- I. When the use of restraints is necessary in emergency situations, CalOptima Health PACE shall ensure restraint use is terminated as soon as the emergency need for restraints ends.
- J. CalOptima Health PACE shall not use restraints as a means of coercion, discipline, punishment, retaliation, for the convenience of employees, or in any other manner inconsistent with this policy and applicable laws, rules, and regulations. Any use of restraints not in compliance with applicable laws, rules and regulations may be considered abuse, and CalOptima Health PACE shall report such abuse in accordance with the applicable state and local laws and regulations.

III. PROCEDURE

A. Restraint Assessment

- 1. The CalOptima Health PACE Provider is the CalOptima Health PACE employee designated to perform restraint assessments.
- 2. Any IDT member or Participant's caregiver may initiate a request for restraint assessment. The IDT shall address a request for a restraint assessment at the IDT meeting. The CalOptima Health PACE Provider shall initiate the assessment and complete the restraint assessment in accordance with the approved CalOptima Health PACE Restraint/Positioning Device Assessment/Order Form. The CalOptima Health PACE Provider shall complete the restraint assessment by the end of the Participant's second full attendance day at CalOptima Health PACE following initiation of the restraint assessment.

3. The CalOptima Health PACE Provider assessing the Participant shall discuss their recommendations/orders to the IDT following initiation of the restraint assessment.
4. Upon completion of the Restraint/Positioning Device Assessment Order form, which includes the provider order, CalOptima Health PACE shall file a scanned copy in the Medical Record.
5. CalOptima Health PACE shall instruct all CalOptima Health PACE employees who have direct contact with Participants in the proper application of the designated device(s). Prior to the device being sent home with the Participant, CalOptima Health PACE shall instruct the Participant's caregiver in the appropriate use and application of the device. If the device is to be used for CalOptima Health PACE Center and/or transportation use only, CalOptima Health PACE shall inform the caregiver of its use and obtain consent.
6. The CalOptima Health PACE Provider shall review restraint orders and appropriateness of continued use and/or recommend discontinuation or changes in use on a weekly basis and document their findings in the progress notes.
7. Emergency Restraint Use: If circumstances require emergency restraint use for the protection of a Participant or others for the administration of medical treatment, rehabilitation employees or other employees who have demonstrated competency in restraint application may apply an appropriate restraining device or safely seclude the Participant. Emergency restraint use shall be terminated as soon as the emergency need ends. The CalOptima Health PACE Provider shall provide a verbal order followed by a written order for emergency restraint use to be entered in the medical record no later than one (1) business day after application. CalOptima Health PACE shall initiate the restraint assessment procedure, in accordance with this policy, if restraint use is ongoing.

B. Documentation and Monitoring

1. When restraints are used, CalOptima Health PACE shall draft a report on its use for review by the IDT within twenty-four (24) hours. Continued use of such restraint can only be done under Provider orders. CalOptima Health PACE shall track the use of restraints. The CalOptima Health PACE Quality Improvement Committee shall review and study the use of restraints for opportunity for improvement at the scheduled quarterly meetings.
2. CalOptima Health PACE shall only use a longer acting medication as a Chemical Restraint when there is documented evidence that a shorter acting medication is deemed ineffective.
3. CalOptima Health PACE shall follow appropriate procedures for notifying any external agencies, as required by law and/or regulation, when a death or serious injury is a result of restraint use.
4. CalOptima Health PACE medical and nursing employees shall document and record use of restraints in the medical record and on the Restraint/Positioning Device Order/Assessment Form. Information on restraint use shall include but not be limited to:
 - a. The reason for use;
 - b. Less restrictive methods considered or attempted at the time of the initial order and periodically thereafter;
 - c. Observations - physical and mental behavior of Participant;
 - d. Date, time, duration, type of restraint;

- e. Conditions and parameters for use, who ordered, who implemented; and
 - f. Any resulting injury or harm.
5. When a Participant is placed in Physical Restraints, the CalOptima Health PACE Provider shall prescribe the following monitoring procedures:
- a. The Participant shall be placed under constant observation;
 - b. The CalOptima Health PACE Nurse or designee shall assess the Participant for vital signs at defined time intervals, as appropriate, and at the frequency of monitoring determined by the Participant's clinical condition, as judged by the CalOptima Health PACE Provider;
 - c. The CalOptima Health PACE Nurse or designee shall monitor the need for restraints at defined time intervals, as appropriate, at the frequency determined by the CalOptima Health PACE Provider;
 - d. The CalOptima Health PACE Nurse or designee shall complete the CalOptima Health PACE Restraint Removal/Release schedule;
 - e. The Participant shall be observed for skin discoloration, temperature changes, and/or skin breakdown at the restraint application sites; if any of these symptoms persist, CalOptima Health PACE employee shall contact the CalOptima Health PACE Provider for orders;
 - f. Peripheral pulses at restraint application sites shall be checked, pursuant to the CalOptima Health PACE Provider order, along with an assessment of circulation via an examination of the fingers and toes for discoloration. The CalOptima Health PACE Provider shall be notified of any changes.
6. When a Participant is given psychotropic medication as a means of restraint, the CalOptima Health PACE Provider shall order the frequency of monitoring vital signs and level of permissible physical activity as determined by the Participant's medical and psychiatric condition.
7. The CalOptima Health PACE Quality Improvement Committee shall monitor the general use restraints by CalOptima Health PACE, as coordinated by the Quality Improvement Coordinator. The Quality Improvement Committee shall meet quarterly and utilize continuing education opportunities, including demonstration, policy review, Quality Assessment and Performance Improvement (QAPI) projects, and videos.
8. Restraint procedures shall be part of initial orientation and ongoing training, monitoring and competency evaluation for all CalOptima Health PACE employees and caregivers who may be involved in the use of restraints. Specific training topics include:
- a. Types of restraints permitted by CalOptima Health PACE;
 - b. Hazards associated with restraint use, including hand or body holds and how to recognize signs of physical distress in Participants who are being restrained;
 - c. Monitoring requirements and Participant care while restraints are in use;
 - d. Education in the use of alternative approaches – de-escalation, mediation, or redirection;

- e. Reduction or elimination of restraint use once imposed;
- f. The potential for abuse and neglect;
- g. Being alert to circumstances in the home which may represent use of restraints for punishment by family members or caregivers;
- h. Underlying causes of threatening behaviors exhibited by Participants, including emotional and physiological condition (e.g., threatening behavior may result from delirium in fevers or hypoglycemia); and
- i. How their own behaviors can affect the behavior of Participants, and protection of self to avoid injury while engaging Participants who require restraint.

C. Use of Restraints for Participants in Skilled Care Facilities

1. CalOptima Health PACE shall provide oversight of Participants who reside in extended care facilities, including oversight of the management of Participants where restraints may be implemented and active ongoing dialogue with the facility.
2. Upon admission to a care facility, the CalOptima Health PACE RN Case Manager will review the Participant goals with the appropriate representative of the care facility. The use of restraints will be a part of this discussion emphasizing that the least restrictive restraint should be considered and that alternatives (i.e. Participant sitters) are looked for whenever possible.
3. Restraints are to be imposed only for a defined limited period of time based on the needs of the Participant. Restraints need to be safe and appropriate and be removed at the earliest possible time. The CalOptima Health PACE RN Case Manager will assure that the extended care facility employees are instructed in the proper procedure for applying, assessing, monitoring, and reevaluating the Participant in a restraint.
4. If Physical Restraints are indicated, the following steps need to be taken:
 - a. The CalOptima Health PACE Provider must complete the CalOptima Health PACE Restraint/Position Device/Order/Assessment form (Attachment A);
 - b. Proposed use must be reviewed by CalOptima Health PACE IDT and meet the following criteria:
 - i. Imposed in accordance with safe and appropriate restraining techniques.
 - ii. Imposed only when other less restrictive measures have been found to be ineffective to protect Participant or others from harm.
 - iii. Remove and discontinue use at the earliest time possible.
 - c. The attending care facility physician must place an order in the facility's chart in accordance with CalOptima Health PACE guidelines.
 - d. All restraint orders must include the following:
 - i. The reason for use;

- ii. The frequency and duration of restraint use; and
- iii. The conditions and parameters for use.

5. The CalOptima Health PACE RN Case Manager will review on a weekly basis, the medical records of all Participants residing in extended care facilities. The weekly review will include the monitoring of any potential use of restraints. The findings will be documented in the Weekly Restraint Log and presented at the quarterly PQIC meetings.

IV. ATTACHMENT(S)

- A. Restraint/Positioning Device Order/Assessment form for Care Resources
- B. Care Resources Restraint Release/Removal Schedule

V. REFERENCE(S)

- A. CalOptima Health PACE Contract with the Department of Health Care Services for the PACE Program
- B. CalOptima Health PACE Program Agreement
- C. Centers for Medicare & Medicaid Services (CMS) PACE Manual, Ch.5, Section 30 - Restraints
- D. Title 42, Code of Federal Regulations, § 460.114

VI. REGULATORY AGENCY APPROVAL(S)

None to Date

VII. BOARD ACTION(S)

None to Date

VIII. REVISION HISTORY

Action	Date	Policy	Policy Title	Program(s)
Effective	10/01/2013	PA.5001	Use of Physical and Chemical Restraints	PACE
Revised	10/01/2014	PA.5001	Use of Physical and Chemical Restraints	PACE
Reviewed	01/01/2015	PA.5001	Use of Physical and Chemical Restraints	PACE
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IX. GLOSSARY

Term	Definition
Chemical Restraint	Medication used to control behavior or to restrict the Participant's freedom of movement that is not standard treatment for the Participant's medical or psychiatric condition. Guidelines as to the selection and dosage of drugs that may be used as Chemical Restraints shall be based on Best Practices for older individuals. Examples of Chemical Restraints that may be used are haloperidol, clonazepam, alprazolam, and olanzapine.
Employee Interventions	Behaviors in which CalOptima Health PACE employee provide restorative nursing, meaningful activities such as assisting with non-laborious tasks and skilled therapy services, to reduce the need for restraints or discontinue their use altogether for certain Participants. Every employee has the ability and the responsibility to respect Participants' dignity while creating the safest possible functional environment.
Enabling Device	A device that supports any of four (4) major functional categories: bed mobility, transfers, ambulation, and wheelchair locomotion.
Environmental Adaptations	Manipulations of the environment that reduce Participant agitation, wandering, fall risk, or other behaviors that might have historically resulted in the use of Physical Restraints. Examples include, but are not limited to, sound reduction, use of "soft" lighting, painting of hall handrails and doorways with sharp, contrasting colors, "fooling/blinding" cognitively-impaired Participants to reduce wandering, and furniture height adjustment.
Interdisciplinary Team (IDT)	<p>A team composed of members qualified to fill, at minimum, the following roles, in accordance with 42 CFR 460.102. One individual may fill two separate roles on the interdisciplinary team where the individual meets applicable state licensure requirements and is qualified to fill the two roles and able to provide appropriate care to meet the needs of Participants:</p> <ol style="list-style-type: none"> 1. Primary Care Provider; Primary medical care must be furnished to a Participant by any of the following <ol style="list-style-type: none"> a. A primary care physician. b. A community-based physician. c. A physician assistant who is licensed in the State and practices within his or her scope of practice as defined by State laws with regard to oversight, practice authority and prescriptive authority. d. A nurse practitioner who is licensed in the State and practices within his or her scope of practice as defined by State laws with regard to oversight, practice authority and prescriptive authority. 2. Registered Nurse; 3. Master's – level Social Worker; 4. Physical Therapist; 5. Occupational Therapist; 6. Recreational Therapist or Activity Coordinator; 7. Dietician; 8. CalOptima Health PACE Center Manager; 9. Home Care Coordinator; 10. Personal Care Attendant or his or her representative; and 11. Driver or his or her representative.
Participant	An individual enrolled in the CalOptima Health PACE program.

Term	Definition
Physical Restraint	Any manual method or physical or mechanical device, materials, or equipment attached or adjacent to the Participant's body that he or she cannot easily remove that restricts freedom of movement or normal access to one's body. Examples of physical restraints include special types of vests, chairs with lap trays, lap belts, and enclosed walkers. Bed rails (side rails) are also considered restraints in certain situations.
Positioning Device	Any device used to align the Participant's body in order to treat a specific medical condition or to meet a specific functional need that does not meet the definition of Physical Restraint. If a positioning device is recommended, a CalOptima Health PACE Provider order is not required.
Restraint Release	Removal of a restraint from a Participant with assistance or offer of one (1) or more of the following interventions, as appropriate: toileting, incontinent care, range of motion, ambulation, repositioning, oral hydration, or provision of oral nutrition. CalOptima Health PACE shall Restraint Release utilizing the Restraint Removal Form.