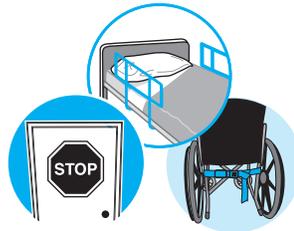


About the author...



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Ms. Renault has a bachelor's degree in nursing, a master's degree in education and has been working as a specialized clinical nurse at Vigi Santé since 1992. She acts as clinical resource-person for nurses, nursing aides and attendants. She designs clinical and training programs to help improve the quality of care and is an expert in clinical situations requiring special care.



THE USE OF CONTROL MEASURES

For a number of years, Vigi Santé has been concerned with the problems encountered when using physical restraints and isolation. Policies and procedures were instituted to regulate the use of such measures in Vigi Santé centres. The advent of new legal provisions and the ensuing ministerial orientations have served to support the approach used in Vigi Santé's residential and long term care centres and reassess the use of alternative measures and means of control.

WHAT DOES THE LAW SAY?

Article 118.1 of the Law on Health Services and Social Services addresses the exceptional use of control measures, defined as **physical restraints, isolation and chemicals all used to control.**

This article stipulate that *“Force, isolation, mechanical means or chemicals may not be used to place a person under control in an installation maintained by an institution except to prevent the person from inflicting harm upon himself or others. The use of such means must be minimal and resorted to only exceptionally, and must be appropriate having regard to the person's physical and mental state.”*

In other words, the Law says that such measures are not common practice, but only used **exception-**

ally, after having assessed all **other less restrictive solutions.** The resident's situation must be carefully studied with due consideration for his physical and psychological state to determine the most appropriate intervention.

WHAT ARE THE MINISTERIAL ORIENTATIONS?

The ministerial orientations which stem from Article 118.1 state, among others, that the use of control measures, and more specifically the abuse made of them at times, have led to serious questions about their purpose and use in institutions within the health care system.

The orientations go on to say that **measures other than control measures must be used more of-**

ten, specifying that control measures are to be **used solely as a last resort and temporarily**.

It is evident that the use of a control measure, even if seemingly justified, hinders movement. The concern to **limit as minimally and exceptionally as possible the liberty and autonomy** of a resident must guide any measure taken in his very interest.

The use of control measures must be done safely within certain techniques and procedures. All the staff in the institution must be trained in the use of such measures so that they are used according to the rules and with due consideration for the resident's comfort.

WHAT IS A PHYSICAL RESTRAINT?

It is a control measure that consists in preventing or limiting a person's freedom of movement by using human force, mechanical means or depriving him of the means he uses to overcome a handicap. (Definition, ministerial orientations).

In *Vigi Santé* centres, physical restraints are the two sides of a bed, abdominal restraints in chairs and magnetic restraints in bed.

WHY RESORT TO PHYSICAL RESTRAINTS?

One of the main reasons is the fear that the person who wants to get out of his chair or his bed does not have the ability to stand alone and might therefore fall.

A physical restraint must be used only as a last resort after having tried other less restrictive ways and assessing the **real** chance of a fall. We must not forget that restricting someone seriously impedes his freedom and autonomy and that there are other less dras-

tic ways as effective in dissuading the person. These other ways are called alternative measures.



One alternative measure is to try a movement sensor which rings when the person is trying to get up. This measure allows us to intervene with the resident and remind him not to get up alone but to call for assistance. Another way is to place an edged cushion in the resident's chair which will prevent him from falling. There are other ways that do not restrict the resident to his bed or chair.

WHAT IS AN ISOLATION MEASURE?

It is a means of control that consists in confining a person for a certain length of time to a place which he is not able to leave. (Definition, ministerial orientations).

In *Vigi Santé* centres, the isolation measure is a half-door installed at the entrance of the resident's room.

There are other means available before resorting to this type of measure. For example, a *Arrêt/Stop* sign at the entrance of a room may discourage someone from entering. A small magnetic chain at the entrance of a room may have the same effect.

WHAT DO WE MEAN BY CHEMICALS USED TO CONTROL?

It is a means of control that consists in limiting a person's ability to move by giving him medication. (Definitions, ministerial orientations).

This point is of concern to the *Collège des médecins du Québec* (College of physicians). According to them, the minimal use of drugs as a form of treatment to stop a

disturbing behaviour so as to allow the resident to fully participate in activities, is appropriate. However, the resident must be very closely monitored so that the medication given to him does in fact let him participate, with few side-effects. It is essential to be vigilant in such cases and reevaluate the medication when the resident's situation changes.

WHAT IS AN ALTERNATIVE MEASURE?

As previously mentioned, alternative measures are simple or more complicated interventions that call upon the skills and creativity of the medical staff, family and resident. They are a recourse to physical restraints or isolation. These measures can be used to prevent, eliminate or reduce the causes of a resident's behaviours that may be harmful to him or others.

Alternative measures must be personalized since what is good for one person may not necessarily be so for another. It is therefore important to know the resident's particular situation. The resident or his guardian or family must work with the nursing team to find appropriate solutions.

CONSEQUENCES OF THE USE OF A CONTROL MEASURE

It's much easier to imagine the consequences of a fall than to understand the physical, psychological and even social repercussions of physical restraints or isolation used on a resident. The use of measures of control can lead the resident to have:

- *a feeling of loneliness and abandonment*
- *a feeling of loss of freedom and dignity*



- *a feeling of being punished*
- *some agitation and depression*
- *some anger and humiliation*
- *a loss of mobility causing bone fragility and loss of muscle tone*
- *skin problems*
- *increased dependency and deteriorating health*
- *injuries often caused when the person tries to free himself of the restraint.*

Additionally, close relatives may feel:

- *sad*
- *powerless*
- *guilty.*

HOW IS THE DECISION MADE?

The decision to use or not use a control measure is made after an **evaluation** by the members of the nursing team with the resident, his guardian or family. The input of all these people will help find solutions best suited to the resident's needs.

This decision **must be based on events that are real and have been witnessed, and not on suppositions or fears from the nursing team or family.**

For example, when there is a risk of falling, it's important to know the person's problem. Why does he risk falling? What are the causes of the problem? Why does the resident try to get out of bed? Under what circumstances did the fall happen? What triggers the fall? These questions can help find solutions that will help reduce or eliminate the risk and in doing so, avoid having to use a means of control.





NECESSARY CONSENT

The decision to use an alternative measure or all the more so in the case of a means of control, **is made with the resident, his guardian or family.** If a measure of control is going to be used, the resident's or his guardian's free and informed consent is required. This consent means that the situation has been clearly and fully explained and all previous interventions detailed. A measure of control **may not be used without consent except in an emergency situation.**

IMPLEMENTING THE SOLUTION

Whether an alternative measure or a measure of control, all measures are used according to specific rules and are noted in the resident's personalized health care and service plan.

The head nurse must make sure that he staff applying the measure knows how to do so and is aware of the resident's specific case.

Furthermore, the nursing team monitors the resident when an alternative measure or a control measure is put into place.

REEVALUATION

When a control measure is in place, an assessment process begins. This assessment

will evaluate the need to maintain the measure and modify the solution if need be.

Assessments are made as long as the measure is in place and of course, whenever the resident's situation changes.

If the measure is no longer deemed necessary or if it is no longer adequate, it is gradually and permanently removed. This can only be done if **the resident or guardian is informed of the situation and have given his consent.**

In closing, the ministerial orientations recommend that all nursing institutions reduce their use of control measures. Vigi Santé's program is based on this goal and respects the guidelines set forth in the ministerial orientations. Vigi Santé is promoting this approach in all its residential and long term care centres and intends to reduce the use of restraints and isolation by determining other measures which improve the residents' quality of life.



The involvement and cooperation of residents, their families as well as the whole nursing team are both instrumental in finding better solutions so as to respect the residents' right to autonomy and dignity.

The Collection "Between You & I" is published by a group of Residents' Committees (Users' Committee in accordance with the Act) from some Residential and long term care centres (CHSLD).

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The masculine form used in this document implies the feminine form and has been used solely to facilitate reading.

