

CONNECTICUT VALLEY HOSPITAL OPERATIONAL PROCEDURE MANUAL

SECTION I:	PATIENT FOCUSED FUNCTIONS
CHAPTER 2:	Provision of Care, Treatment, and Services
Procedure 2.45:	Use of the Humane Isolation Bed/Rolling Bed
REVISED:	09/28/12; 12/12/13; 08/14/17; 02/18
Governing Body Approval:	12/12/13; 8/24/17; 04/18

PURPOSE: To delineate all standards for the provision of safe use of the Humane Duramax Bed (hereafter referred to as the Rolling Bed) when necessary to safely transport the patient from a public area to the restraint room after all less restrictive measures (i.e. secure guide escort) have failed or are determined to be unsafe.

It is expected that use of the Rolling Bed will result in decreased staff injuries in the act of transporting patients to the Restraint Room.

SCOPE: All Physicians; RNs; FTS; LFTS, Rehabilitation Therapists and other clinical staff applying and transporting a patient in mechanical restraints on the Rolling Beds.

POLICY:

The Rolling Bed may be used to transport any patient for whom the use of mechanical four point restraints has been ordered and consistent with all other aspects of the CVH [Operational Procedure 2.27 Restraint Use for the Management of Violent or Self Destructive Behavior](#).

The hospital is committed to preventing, reducing, and striving to eliminate, to the degree possible, injuries to patients, staff and others that may be sustained during the transport of a restrained patient to the restraint room.

Definitions:

Four Point Restraints – four point locked ankle and wrist restraints that immobilize or reduce the ability of a patient to move his or her arms and legs freely.

Rolling Bed – a restraint bed that is movable and may be used to transport a patient from another location on the treatment unit to the restraint room and/or can be used as the restraint bed when secured to the floor in a restraint room.

PROCEDURE:

- I. Permitted Mechanical Restraints for use with Rolling Bed:
 - A. Four point locked (wrist and ankle) mechanical restraints secured to the patient's body using (wrist and ankle) locked restraint belts may be used during transport of a patient on the Rolling Bed to the Restraint Room.

II. Assessment for Use of the Rolling Bed

- A. An assessment of the patient is conducted by a Registered Nurse (RN) or Physician immediately following the order to place a person in four point mechanical restraints to determine the safest method for transporting the person to the restraint room.
- B. The assessment identifies:
 - 1. The coping strategies, techniques, methods or tools that would help the patient control his/her behavior and eliminate the need for restraint or enable him/her to safely walk attended and/or assisted to the restraint room.
 - 2. The pre-existing medical conditions or physical disabilities/limitations that would place the patient at risk by being placed in four points on the floor and transported to the restraint room using the Rolling Bed; and
 - 3. The risk of injury to patient, staff or others by walking with the person or carrying the person who is not in four point restraints to the restraint room.

III. Initiation of Use of the Rolling Bed

- A. Nursing staff offer the patient the opportunity to walk (or to lie directly on the Rolling Bed) to the designated area before using the Secure Guide Escort, Third Person Assist or Takedown.
- B. In the presence of immediate physical danger to the patient, staff or others, a Physician or, in the Physician's absence, a Registered Nurse (RN) may initiate the use of four point restraints.
- C. The RN ensures that sufficient staff is available to assist in the restraint and transport process in order to prevent injury to the patient, staff, or others.
- D. The RN assesses the situation and employs the following techniques (based on the assessment findings) after all efforts to engage the patient in self managing dangerous behavior have failed or have been determined to be ineffective or when safety issues require an immediate response.
 - 1. All efforts shall be made to encourage the patient to lie directly on the Rolling Bed. In the event that these efforts fail or are determined to be ineffective or when safety issues require an immediate response, lower the patient to the floor using the Take Down.
 - 3. Rolling Bed Procedure:
 - a. Lift patient from the floor to the rolling bed.
 - b. Attach 4 points to the (and the patient if not already done) rolling bed.
 - c. Wheel the patient to the Restraint Room using at least 4 staff members positioned at the head, foot and both sides of the Rolling bed.
 - d. Secure the Rolling Bed to the floor with a strap on either side, remove chest restraint belt and then lock the bed wheels.

IV. Orders

- A. The RN obtains a Telephone Order from the physician no later than 15 minutes after initiating four point restraints and the Rolling Bed when the physician is not immediately available.
 - B. The RN follows all related procedures from [Operational Procedure 2.27 Restraint Use for the Management of Violent or Self Destructive Behavior](#) pertaining to Physician orders, and documentation requirement.
 - C. The four point restraint order may not exceed two hours.
- V. Documentation
- A. The medical record contains documentation of the use of any of the approved restraints for each bed device, and the patient response to the procedure.
- VI. Infection Control: Cleaning Procedure
- A. For regular cleaning, wipe the leather with a mild soap and warm water. The webbing can be scrubbed with a soft brush and the same solution. When decontaminating blood borne pathogens, remove gross/visible material first. Spray Clorox Bleach Germicidal Cleaner 6"-8" from surface until surface is completely wet. Let stand for one minute. Wipe with a clean damp cloth or paper towel. After wiping leather, allow to air dry and apply neat's-foot oil.
- VII. Staff Education and Training
- A. All identified clinical staff must be trained in the use of four point restraints and the Rolling Bed at least annually. This training will be conducted in addition to Restraint Application Training provided during Collaborative Safety Strategies Training (CSS) and will include the following:
 - 1. lifting the patient from the floor to Rolling Bed and to the restraint bed;
 - 2. transporting the Rolling Bed to the restraint room; and
 - 3. securing the Rolling Bed to the floor.
 - B. All staff involved in applying restraints and assessing, caring for and monitoring patients in restraint will be trained in CSS, Restraint Application, CPR/AED and First Aid. Training will be provided and competence validated annually.
- VIII. Performance Improvement
- An analysis of restraint related injuries to staff and patients associated with the use of the Rolling Bed will be tracked and reported to the QRS Committee.