Nurses’ Perception on the use of Physical Restraints among Elderly Patients

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Abstract

This study aimed to identify the nurses’ perception on the use of physical restraints. The study evaluated the perception of the nurses in three of the largest private hospitals in Ozamiz City utilizing the modified Perception on Restraints Use Questionnaire (PRUQ). This study utilized a descriptive type of research as it described the perception of nurses regarding the use of physical restraints. It was found that nurses consider the use of physical restraints as most important in ensuring client’s safety and adherence to treatment. The study found out that nurses perceived physical restraints use as not at all important in preventing an older patient from getting things from others. Based on the findings, it was highly recommended that a nurse must follow institutional protocols in applying physical restraints and that this study may serve as a primer in providing awareness regarding physical restraints.

1. Introduction

Aging, as defined by Tortora and Derrickson in 2011, is a normal process accompanied by a progressive alteration of the body’s homeostatic adaptive responses. It produces observable changes in structure and function and increases vulnerability to environmental stress and diseases. They often have very poor regenerative abilities and more prone to diseases and sickness compared to younger populations. It is associated to biological aging or senescence, which implies gradual deterioration of function characteristics of most complex life forms. It is where nursing care is done with utmost caution. Since nursing involves care of patients across the life span, care of elderly seems to be one of the most
critical. According to Abraham Maslow, the elderly are often in the stage of self-actualization, but this stage cannot be possibly met if they are unsafe. To fully protect them, this may involve necessary restrictions of activity to limit the risk for further complications and injury. Physical restraint is one of the commonly used materials to provide effective care among elderly. Its use has been practiced along with the belief that it would promote client safety. Furthermore, Filipinos are known for their exceptionally strong respect for their elders, thus, applying physical restraints may be perceived as form of disrespect.

This study is conducted to identify the nurses’ perception on the use of physical restraints among elderly clients. These perceptions may affect their way of rendering holistic care to the elderly. Aside from that, several cases were noted involving registered nurses facing legal, ethical and moral dilemma. They struggle with conflicts stemming from patients’ rights of freedom, feelings of obligation to protect clients and pressure to use restraints. According to a study conducted by Canadian researcher, elderly abuse is a growing social concern but is no longer new.

In the Philippine setting, uses of physical restraints are often associated with negative perceptions. High-level-need clients and short staffing can increase the chances for error, but nurses can minimize their liability by focusing on risk management which is very common in the Philippines. This leads nurses to resort on the use of physical restraints.

Restraints, as defined by Mosby (2002), are physical, chemical or environmental measures used to control the physical or behavioral activity of a person or a portion of his/her body. Physical restraints may be defined as any device, material or equipment attached to or near a person’s body and which cannot be controlled or easily removed by the person, and which deliberately prevents or is intended to prevent a person’s free body movement to a position of choice and/ or a person’s normal access to their body, according to Australian Society for Geriatric Medicine, 2012. On the other hand, no client may be kept in restraints against his or
her will unless the client’s behavior indicates the existence of safety issues (Black and Hawks, 2005). Documentation is an important component of applying restraints to provide tangible data on the performed procedure. Along with it, proper education for significant others, such as, family members and caregivers of clients is a protocol. Meanwhile, elderly care commonly involves the use of physical restraints. According to Black and Hawks, older adults are more likely to suffer from multiple chronic and disabling illnesses associated with physical deterioration.

Alvarez, et.al., 2009 conducted a study that evaluated the registered nurses and nursing attendants perception on the use of physical restraints. It was found out that the staff members had a neutral perception of physical restraints use with a small difference between the scores of RN (2.6) and NA (3.0), where, the overall Perceptions on Restraints Use Questionnaire score for the sample was 2.8. Restraint use has come under harsh scrutiny from both federal regulatory agencies and accrediting agencies because of evidence regarding the hazards of restraint use.

Nurses have to abide with the regulations of the institution in order to avoid legal misconduct regarding the use of physical restraints. Moreover, Ligget, N.L. (2008) stated that a hospital’s decision to use restraints on patient is a difficult one, involving complex issues which can pose a significant risk to the hospital. It may be sued due to negligence for not taking adequate precautions to protect impaired, elderly, incapacitated or unstable patients.

This study intended to determine the nurses’ perception on the use of restraints among elderly patients. Specifically, it sought to present nurses’ perceptions on the use of physical restraints among elderly patients, find out the most important reason for applying physical restraints as perceived by the nurses and explore alternative measures suggested by the nurses which could be used instead of physical restraints.

This study thrusts to determine the nurses’ perception on the
use of physical restraints among elderly patients, it was also carried out hoping that it would benefit the following:

**Staff Nurses.** This study would be beneficial to all staff nurses especially those who were assigned in the care of elderly, as it opens various perceptions on restraints use and aid them in identifying new alternatives rather than restraining the patient.

**Hospital / College of Nursing Administrators.** It will serve as prime literature to administrators in disseminating further awareness regarding the use of physical restraints.

**To Future Researchers.** The study will serve as a related literature for those who may be interested to explore a similar study with varied variables.

The study focused on the nurses’ perception on the use of physical restraints among elderly patients. It is limited to the perceptions of nurses assigned in Misamis University Medical Center, Medina General Hospital and Faith Hospital in Ozamiz City. This study was conducted from October 2013 to February 2014.

2. Method

This study utilized descriptive research design as it aimed to identify the nurses’ perception on the use of physical restraints. It also aimed to identify alternatives in providing clients’ safety other than applying physical restraints, thus, preventing any legal charges/ obligations against nurses. This study was conducted in major private hospitals in Ozamiz City namely; Faith Hospital, Medina General Hospital and Misamis University Medical Center. Faith Hospital is a privately owned secondary hospital situated in Brgy. Aguada. Meanwhile, Medina General Hospital and Misamis University Medical Center are both tertiary hospitals located in Brgy. Carmen Annex and Brgy. Bagakay, respectively.
This study took 48 nurses as research respondents (Faith Hospital= 16; Medina General Hospital=16; Misamis University Medical Center= 16). These nurses have worked in the area for more than 2 months, assigned in the medical-surgical area and generally cared for adults more than 65 years of age.

Prior to actual data gathering, permission letters to conduct the study were forwarded to hospital directors. Upon approval, data were collected through the distribution of the modified Perceptions of Restraint Use Questionnaire (PRUQ). The tool was revised and tested for reliability. The questionnaire was 82.8% reliable. Each tool consists of 17-item questions with a three-point Likert response scale. A score of three (3) is interpreted verbally as the most important reason for using restraints. While scores two (2) and one(1) are interpreted as somewhat important and not at all important, respectively.

For the analysis and interpretation of data, weighted mean was utilized to identify the nurses’ perception on the use of physical restraints among elderly patients.

3. Results and Discussion

Nurses’ Perception on the Use of Physical Restraints

Table 1 below reflects the nurses’ perception on the use of physical restraints from various institutions. It also depicted the highest number of responses which they perceived as the most important. Thus, the lowest response score would imply as not at all important.
Table 1

The nurses’ perception on the use of physical restraints

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Nurses’ Perception</th>
<th>Hospital A</th>
<th>VI</th>
<th>Hospital B</th>
<th>VI</th>
<th>Hospital C</th>
<th>VI</th>
<th>Grand Mean</th>
<th>VI</th>
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<tbody>
<tr>
<td>Protecting an older person from falling out of bed</td>
<td>2.81 Most important</td>
<td>2.80</td>
<td>Most important</td>
<td>2.79</td>
<td>Most Important</td>
<td>2.81 Most important</td>
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<tr>
<td>Preventing an older person from pulling out a feeding tube</td>
<td>2.81 Most important</td>
<td>2.80</td>
<td>Most important</td>
<td>2.85</td>
<td>Most important</td>
<td>2.81 Most important</td>
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<tr>
<td>Protecting staff or other patients from physical abusive/n combative ness</td>
<td>2.81 Most important</td>
<td>2.80</td>
<td>Most important</td>
<td>2.85</td>
<td>Most important</td>
<td>2.81 Most important</td>
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<tr>
<td>Preventing an older person from pulling out a catheter</td>
<td>2.75 Most important</td>
<td>2.73</td>
<td>Most important</td>
<td>2.78</td>
<td>Most important</td>
<td>2.75 Most important</td>
<td>2.75 Most important</td>
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<tr>
<td>Providing for safety when judgment is impaired</td>
<td>2.75 Most important</td>
<td>2.73</td>
<td>Most important</td>
<td>2.78</td>
<td>Most important</td>
<td>2.75 Most important</td>
<td>2.75 Most important</td>
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<td>Preventing an older person from pulling out an IV</td>
<td>2.69 Most important</td>
<td>2.67</td>
<td>Most important</td>
<td>2.71</td>
<td>Most important</td>
<td>2.69 Most important</td>
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<tr>
<td>Preventing an older person from removing a dressing</td>
<td>2.50 Most important</td>
<td>2.47</td>
<td>Most important</td>
<td>2.50</td>
<td>Most important</td>
<td>2.63 Most important</td>
<td>2.63 Most important</td>
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<tr>
<td>Task</td>
<td>Rating</td>
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<td>Preventing an older person from breaking open sutures</td>
<td>2.63</td>
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<td>Preventing an older person from getting into dangerous</td>
<td>2.56</td>
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<td>Managing agitation</td>
<td>2.56</td>
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<td>Preventing an older person from wandering</td>
<td>2.19</td>
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<tr>
<td>Providing quiet time or rest for an overactive older person</td>
<td>2.19</td>
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<td>Substituting for staff observation</td>
<td>2.13</td>
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<td>Keeping a confused older person from bothering others</td>
<td>1.94</td>
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**Notes:**
- Nurses’ Perception...
Table 2 shows the close deviation among the response of nurses from the different private hospitals in Ozamiz City. Hospital A, depicts the Faith Hospital nurses’ (n=16) perception on the use of physical restraints. It manifests that their responses do not noticeably vary. They perceived that restraints were only somewhat important in preventing older person from wandering, taking things from others and keeping them from bothering others in the area. They do not find much importance in terms of providing sufficient time to rest for an overactive older. Meanwhile, Medina General Hospital nurses (n=16) believed that restraints were very important in preventing an elderly from getting into dangerous places or supplies as reflected in Hospital B. Physical restraints are also very important in preventing an older person from pulling out a catheter, a feeding tube, an intravenous device and from removing a dressing to maintain asepsis of open body surfaces. It is perceive as most important in ensuring safety especially to those elderly whose judgment was impaired and restraints would protect caregivers from physical abusiveness or combativeness. Lastly, Hospital C shows the nurses in Misamis University Medical Center perceptions’ on the use of physical restraints among elderly clients. They believed that restraints were most important in preventing an older person from falling out of bed and chair, against unsafe ambulation and from getting into dangerous places or supplies. Furthermore, physical restraints are most important in preventing an older person from breaking open sutures, removing a dressing and managing agitations.

Further, it depicts the most important use of restraints as perceived by the private hospital nurses in Ozamiz City (n=48). It was found that restraining was most important in preventing an
older person from falling out from bed, pulling out feeding tube and protecting immediate caregivers from physical abusiveness and combativeness. According to the study of McCabe (2010) hospital nursing staff uses restraints so as to prevent patients from pulling out the feeding tube. Meanwhile, nurses believed that restraining an older person in order to prevent them from getting things from others was the least important reason for applying restraints. The findings contradicted the study of McCabe (2010) as it suggests that restraints were least likely substituting staff observations.

According to the Journal of Medical Ethics in 2006, the use of physical restraints to older people is highly associated to various physical risks such as bruises, decubitus ulcerations, respiratory complications, malnourishment, increased dependence in activities of daily living, impaired muscle strength and balance, decreased cardiovascular endurance, increased agitation and may eventually increase the risk for mortality. Further, these risks may not always be directly attributed to the physical restraint itself but more usually to the older person’s physical and mental condition. Thus, the nurse’s perception does not directly affect the risks of applying restraints to older people. However, most nurses had negative reactions or feelings towards the use of physical restraints, such as feeling of sadness, guilt, conflicts, retribution, security and pity for the restrained older people.

**Alternative Measures Used Instead of Physical Restraints**

Only 12 among 48 respondents stipulate their proposed alternative measures in providing nursing care without the use of physical restraints. Other nurses, however, cited that it is a must to provide a 24-hour watcher to elderly clients to ensure safety and provide necessary assistance. They have also emphasize the need for effective health teaching, giving clear explanations and building rapport with clients will aid in the protection of the elderly.
4. Summary of Findings, Conclusion and Recommendations

This study aimed to identify the nurses’ perception on the use of physical restraints, after a series of data gathering, it was found out that:

a) The nurses responses on the items presented in the modified Perceptions on Restraints Use Questionnaire do not considerably vary. They perceived that restraints were most important in protecting an older person from falling out in bed, preventing an older person from pulling out catheter and feeding tube, also, it was most important in providing safety when judgment is impaired and protecting immediate caregivers from physical abusiveness and combativeness.

b) The use of restraints was somewhat important in:
   > Protecting an older person from falling out of chair
   > Protecting an older person from unsafe ambulation
   > Preventing an older person from wandering
   > Preventing an older person from getting into dangerous supplies and areas
   > Preventing an older person from pulling out an IV, breaking open sutures and removing a dressing
   > Providing quality time to rest
   > Substituting for staff observation
   > Managing agitation

c) The nurses perceived that the use of physical restraints were not at all important in preventing an older person from taking things from others.

After analyzing the gathered data, the researcher concluded that nurse generally find the use of restraints as important and a logical part of nursing care despite the fact that there has been lack of evidence regarding the benefits of using restraints and lots of evidences of its adverse effects. Restraints use were not at all important in preventing an older person from getting things from others.
Based on the outcome of this present research, the following points were recommended.

1. The use of physical restraints be applied with strict adherence to institutionally formulated standardized guidelines and usage policies. In this regard, hospital administrators must formulate concise policies and guidelines on the use of restraints.

2. Nurses may know their limitations in applying restraints and ensure that this is the last resort in ensuring clients’ safety and adherence to treatment.

3. In order to avoid legal liabilities regarding the use of restraints, nurses may act as an advocate and promoting clients’ autonomy by educating them and their significant others regarding the importance of applying restraints and lastly, secure consent to care.

4. Further research be undertaken to identify other means in promoting clients’ safety other than applying restraints in order to prevent its undesirable effects. This study also may serve as a basis in conducting primer study in the use of physical restraints.
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