

WAC 388-107-0420 Physical restraints for medical purposes only.

(1) For the purposes of this section, "physical restraint" means a manual method, obstacle, or physical or mechanical device, material, or equipment attached or adjacent to the resident's body that restricts freedom of movement or access to his or her body, required to treat the resident's medical symptoms. The enhanced services facility must ensure:

(2) Each resident has the right to be free from physical and chemical restraints used for discipline, behavioral intervention, or staff convenience;

(3) That physical restraints are used only during infrequent and episodic occurrences for the protection of the resident during delivery of medical care or treatment;

(4) That before using the physical restraint, the least restrictive alternatives have been tried and documented, and such restraint is deemed required to temporarily protect the resident from harming himself or herself or others during the medical care or treatment;

(5) That before physical restraints are used, the resident has been assessed as needing the restraint to treat the emergent medical symptoms or provide the medical care, and to prevent the resident from self-harm and all of the following has been met:

(a) The resident or resident representative has given informed consent for the use of physical restraints for medical purposes;

(b) The person-centered service team has been consulted and evaluated the resistance to medical care; and

(c) The use of positive interventions and supports has been documented;

(6) That if physical restraints are used, the restraints are episodic and infrequently applied and that any of the following licensed health professionals is in the facility and are quickly and easily available:

(a) Licensed registered nurse;

(b) Licensed practical nurse; or

(c) Licensed physician; and

(7) When any physical restraint is used in accordance with this section, the following is required:

(a) A staff person who is either a licensed or registered nurse, mental health professional, certified nursing assistant, or certified home care aide, must be with the resident at all times when the restraint is in use;

(b) The facility must obtain a physician's order within one hour authorizing the use of restraint and the order includes treatments to resolve the emergency situation and eliminate the need for the restraint;

(c) Behavioral consultation must be obtained within two hours;

(d) Resident must be released immediately upon the cessation of the behavior that preceded the need for restraint;

(e) The restraint must be removed immediately at the conclusion of the medical emergency, treatment, or procedure;

(f) The enhanced services facility must immediately self-report the use of the physical restraint for medical purposes to the complaint resolution unit (CRU) and for the purposes of this regulation "immediately" means there should be no delay between staff awareness of the occurrence and reporting to the CRU unless the situation is unstable in which case reporting should occur as soon as the safety of all residents is assured;

(g) The use of the physical restraint must be documented with the following:

(i) A description that the specific medical issue caused the need for restraint and what the resident needs to do or stop doing in order to discontinue the use of the restraint; and

(ii) A statement that demonstrates that the resident, guardian or legal representative, if any, was informed of the need for restraint; and

(h) The person-centered service planning team must consult within seventy-two hours to determine less intrusive methods to meet the resident's needs for future care.

[Statutory Authority: RCW 70.97.230 and HCBS Final Rule 42 C.F.R. WSR 16-14-078, § 388-107-0420, filed 7/1/16, effective 8/1/16. Statutory Authority: Chapter 70.97 RCW. WSR 14-19-071, § 388-107-0420, filed 9/12/14, effective 10/13/14.]