

Physical restraint

Information for residents, family and carers



Physical restraint is anything that stops you from moving freely.

It can involve using equipment such as bed rails, a lap belt or a chair with a table attached. It can also mean taking away things like walking frames.

In the past, physical restraint was used for safety reasons. It was thought it could stop people falling over. It was also used to stop people from doing things like wandering or getting out of bed.

But now we know it can make problems worse.

Physical restraint can cause harm and serious injuries.

Risks of using physical restraint

Physical restraint often causes problems such as:

- loss of strength and falls
- pain
- constipation or incontinence
- pressure injuries (sores)
- panic, fear and anger
- isolation and loneliness
- loss of dignity
- injury and death.

When might physical restraint be considered?

Physical restraint is a last resort and only for extreme emergencies.

It can only be used for a short period. It should only be used when everything else has been tried.

Before a restraint is applied, it is important to make sure it is not being used to deal with boredom, discomfort, anxiety or illness of a resident. It should never be used because of staff shortages.

It can only be used after discussing it with you and your family. This discussion must include the risks of restraint.

It must be closely monitored and reviewed by care staff and your doctor.

Examples of physical restraint

- Bed rails
- Lap belts or seat belts
- Chairs with a table attached
- Removal of mobility aids, such as walking frames
- Chairs or beds that are hard to get out of
- Using furniture to block paths.

Who can authorise restraint?

Physical restraint should always be discussed with you, your family or legal guardian, the doctor and qualified staff.

You or your legal guardian needs to give consent for the use of restraint. In an emergency, this may not be possible. However, it should be obtained as soon as possible.

Working together

You and your family understand what it is you need.

Work together with staff to share information. This helps develop a care plan that is centred on you. A good care plan includes your life history and what you enjoy or dislike.

Sharing information can help to avoid physical restraint by using strategies that suit you. Talk to staff about the use of restraint and ask questions about best care.

Questions to ask staff?

- Why are you using restraint? Is it necessary?
- Have you tried using alternatives to restraint? What are the alternatives?
- Are you using the least restrictive and most appropriate restraint?
- How will the restraint be monitored, and how long will it be used for?



Want to know more?

Contact Elder Rights Advocacy – Free call in Victoria **1800 700 600**.

Disclaimer: This health information is for general purposes only. Please consult with your doctor or other health professional to make sure this information is right for you.

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