CONSUMER FACT SHEET: BED RAIL STANDARDS

There are many standards which nursing homes are required to follow in order to ensure that residents receive appropriate care, have a good quality of life and are treated with dignity. YOU can use these standards to support better care in your nursing home.

Following are several standards and guidelines that we have identified as important when it comes to the use of bed rails in nursing homes. The descriptions were taken directly from the federal regulations and guidelines (as indicated by text in italics). For more detailed information, see our Issue Alert on Bed Rails, available at http://nursinghome411.org/ltccc-issue-alert-bed-rails/.

THE LAW

I. Bed Rails [42 C.F.R. 483.25(n), F-700]

The facility must attempt to use appropriate alternatives prior to installing a side or bed rail. If a bed or side rail is used, the facility must ensure correct installation, use, and maintenance of bed rails, including but not limited to the following elements.

- Assess the resident for risk of entrapment from bed rails prior to installation.
- Review the risks and benefits of bed rails with the resident or resident representative and obtain informed consent prior to installation.
- Ensure that the bed’s dimensions are appropriate for the resident’s size and weight.
- Follow the manufacturers’ recommendations and specifications for installing and maintaining bed rails.

Bed Rail Use Requires Informed Consent

Nursing homes must provide residents or their representatives with the information they need to make an informed decision about the use of bed rails. According to CMS’s Interpretative Guidance, informed consent must be based on information that is presented in a manner that the resident or representative understands, be free from coercion, and include the following information:

1. What assessed medical needs would be addressed by the use of the bed rails;
2. The resident’s benefits from the use of bed rails and the likelihood of these benefits;
3. The resident’s risks from the use of bed rails and how these risks will be mitigated; and
4. Alternatives attempted that failed to meet the resident’s needs and alternatives considered but not attempted because they were considered to be inappropriate.
II. Resident Beds [42 C.F.R. 483.90(d)(3), F-909]

Conduct Regular inspection of all bed frames, mattresses, and bed rails, if any, as part of a regular maintenance program to identify areas of possible entrapment. When bed rails and mattresses are used and purchased separately from the bed frame, the facility must ensure that the bed rails, mattress, and bed frame are compatible.

III. Respect and Dignity [42 C.F.R. 483.12(a)(2), F-604]

The facility must . . . [e]nsure that the resident is free from physical or chemical restraints imposed for purposes of discipline or convenience and that are not required to treat the resident’s medical symptoms. When the use of restraints is indicated, the facility must use the least restrictive alternative for the least amount of time and document ongoing re-evaluation of the need for restraints.

**Medical Symptoms May Warrant Bed Rail Use in Limited Circumstances**

According to CMS’s Interpretative Guidance, nursing homes must take a comprehensive, resident-centered approach when determining whether there is a medical need for bed rails:

Facilities must use a person-centered approach when determining the use of bed rails, which would include conducting a comprehensive assessment, and identifying the medical symptom being treated by using bed rails. Bed rails may have the effect of restraining one individual but not another, depending on the individual resident’s conditions and circumstances.

CMS’s Interpretative Guidance adds that falls do not constitute a medical symptom that would necessitate bed rail use:

Falls do not constitute self-injurious behavior or a medical symptom that warrants the use of a physical restraint. Although restraints have been traditionally used as a falls prevention approach, they have major, serious drawbacks and can contribute to serious injuries. There is no evidence that the use of physical restraints, including, but not limited to, bed rails and position change alarms, will prevent or reduce falls. Additionally, falls that occur while a person is physically restrained often result in more severe injuries (e.g., strangulation, entrapment).

**RESOURCES**

- [WWW.NURSINGHOME411.ORG](http://WWW.NURSINGHOME411.ORG). LTCC’s website includes materials on the relevant standards for nursing home care, including our Issue Alert on Bed Rails.

- [WWW.THECONSUMEVERVOICE.ORG](http://WWW.THECONSUMEVERVOICE.ORG). The Consumer Voice has a dedicated page on its website with information and resources on the dangers bed rails pose to elderly individuals: [http://theconsumervoice.org/issues/other-issues-and-resources/dangers-of-bed-rails](http://theconsumervoice.org/issues/other-issues-and-resources/dangers-of-bed-rails).