

Reducing Restraints of Seniors in Nursing Homes

It CAN Be Done, With Meaningful Government Oversight & Commitment

When the Nursing Home Reform Act was adopted it was widely accepted to use restraints as an acceptable and widely-used option to manage the behavior of residents who wandered, were agitated, or who, in the view of treatment staff, simply needed to be restrained.

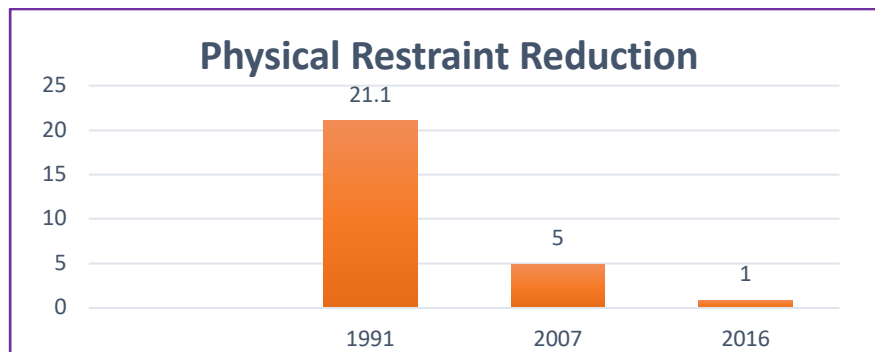
The standard use of restraints was not supported, however, by a body of research that found that physical restraints had serious negative effects. ...Nor was the standard supported by a growing body of regulators, practitioners, providers and advocates. The 1987 law crystallized a growing consensus against the use of restraints throughout all sectors of nursing home service delivery, and eventually led to a complete change in how restraint use is viewed.ⁱ

Rapid & Substantive Improvement Occurred When CMS...

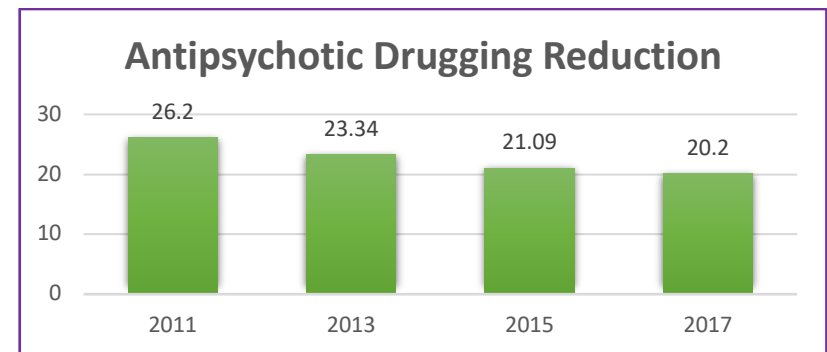
- Adopted “specific regulations about restraints.”
- Tracked “use of daily restraints as an important quality measure.”
- Published results for every facility on Nursing Home Compare.

Change is Slow & Too Many Residents Suffer When...

- Regulations prohibiting chemical restraints are not enforced.
- Regulations prohibiting inappropriate antipsychotic drugging are not enforced.
- CMS relies on facilities voluntarily reducing drugs.



“Through the work of thousands of individuals in both nursing homes and in government, the use of physical restraints has largely been replaced with improved methods of care.”ⁱⁱ



Six years after CMS launched its Partnership, “encouraging” nursing homes to voluntarily reduce chemical restraints, over 250,000 residents are receiving powerful antipsychotic drugs.ⁱⁱⁱ

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FDA BLACK BOX WARNING

Elderly patients with dementia-related psychosis treated with antipsychotic drugs are at an increased risk of death.

RISKS WITH RESTRAINTS

Falls, Strangulation, Loss of Muscle Tone, Pressure Sores, Decreased Mobility, Depression, Agitation, Reduced Bone Mass, Stiffness, Frustration, Loss of Dignity, Incontinence, Constipation.

RISKS W/OUT RESTRAINTS

Falls

Approximately **20%** of U.S. nursing home residents are administered powerful antipsychotic drugs (2018Q1). Less than **2%** of the population will ever have a diagnosis for a condition recognized by CMS when it risk-adjusts for potentially appropriate use.

It Can Be Done

More than five million Americans have Alzheimer's or similar illnesses, and that number is growing as the population ages. Without any immediate prospect of a cure, advocacy groups have begun promoting ways to offer people with dementia a comfortable decline instead of imposing on them a medical model of care.... The Green House Project, based in Arlington, Virginia, pushes for the creation of small group homes in which medical care is less intrusive; the Pioneer Network, based in Chicago, urges reforms such as less reliance on psychotropic medications.

Many of these approaches overlap with the methods of the Beatitudes Campus, which, over the past decade, has become an incubator for a holistic model of care. "When you have dementia, we can't change the way you think, but we can change the way you feel." – The New Yorker (5/20/2013) quoting Tena Alonzo, Director, Education & Research, Beatitudes Campus, Arizona.

HHS INSPECTOR GENERAL DANIEL LEVINSON

Too many... [nursing homes] fail to comply with federal regulations designed to prevent overmedication, giving nursing home patients antipsychotic drugs in ways that violate federal standards for unnecessary drug use.

Government, taxpayers, nursing home residents, as well as their families and caregivers should be outraged - and seek solutions.

None of the homes we visited identified costs as a barrier to reducing restraints.

VISIT WWW.NURSINGHOME411.ORG FOR...

- The latest antipsychotic drugging rates for nursing homes in your state.
- Resources for your constituents, including the Dementia Care Advocacy Toolkit.

ⁱ Freedom from Unnecessary Physical Restraints: Two Decades of National Progress in Nursing Home Care, CMS (2008).

ⁱⁱ *Id.*

ⁱⁱⁱ Data derived from MDS Frequency Reports for last quarter of each year listed.