

Learner Feedback Questions #349

- The goal for restraint use in mental health settings, as outlined in position papers issued by the American Psychiatric Nurses Association and other healthcare organizations, is to:
 - use when chemical restraints are ineffective
 - eliminate restraints whenever possible
 - use when no other interventions can de-escalate an aggressive patient
 - eliminate restraints unless the attending physician orders they be applied
- Nurses need practice guidelines and standards for the use of restraints for all the following reasons EXCEPT:
 - restraints are viewed as treatment failures
 - the experience is traumatic for patients
 - the experience is traumatic for staff
 - to reduce their incidence of being sued for malpractice
- Restraints should not be used with patients who:
 - are over age 65
 - have signed "no restraints" to be used in treatment in their informed medical consent
 - have experienced sexual trauma or have been held as prisoners
 - have two or more medical comorbidities
- The Joint Commission requires patients in behavioral restraints be evaluated every:
 - 5 minutes
 - 10 minutes
 - 15 minutes
 - 30 minutes
- According to Joint Commission policy, if a patient is placed in behavioral restraints, an order must be obtained from a licensed independent practitioner within:
 - 1 hour
 - 4 hours
 - 12 hours
 - 24 hours
- When rapid de-escalation of a patient is required:
 - mechanical restraints are applied
 - chemical restraints should be avoided
 - mechanical and chemical restraints can be initiated together
 - injectable chemical restraints should be avoided
- The most effective way to reduce restraint use in any patient setting is to:
 - educate the staff about the no-restraint policy and then immediately implement
 - require staff to write an incident report if restraints are used; the nurse manager should debrief with staff and reiterate restraints are not to be used
 - educate staff about no-restraint policy, allow them to express feelings and initiate when staff are comfortable with the change
 - move the culture away from custodial to patient-centered care; work with patients to develop their own de-escalation plans
- Research findings about restraint use generally indicate the primary reason for their continued use is:
 - patient needs
 - hospital needs
 - family and visitor needs
 - state regulations have not changed

- Restraint use, as part of the patient's treatment plan, should be explained to the patient and family:
 - prior to admission
 - during the admission process
 - the first time the patient shows indication restraints are needed
 - during the immediate post-restraint discussion with staff
- Using the Four S model to achieve de-escalation in patients, the "structure" technique staff can use includes:
 - modifying the environment to reduce stimuli
 - listen and talk to the patient
 - explanation of limit-setting of behavior and adhering to it
 - the use of diversionary activities integrated with therapies

Evaluation

- I can describe when and how to safely use behavioral restraints for adult patients.
 - strongly agree
 - agree
 - neutral
 - disagree
 - strongly disagree
- I can acknowledge when restraints should not be used and the hazards involved with using restraints.
 - strongly agree
 - agree
 - neutral
 - disagree
 - strongly disagree
- I can describe ways to participate in the thoughtful assessment of alternatives to restraint use.
 - strongly agree
 - agree
 - neutral
 - disagree
 - strongly disagree
- The objectives relate to the overall goal of the article.
 - strongly agree
 - agree
 - neutral
 - disagree
 - strongly disagree
- The article is well-written and logically organized, and defines terms adequately.
 - strongly agree
 - agree
 - neutral
 - disagree
 - strongly disagree

Restraints in Psychiatric Settings

Earn 1 Contact Hour NOW!

Registration/Answer Form #349

LEARNER FEEDBACK QUESTIONS

- A B C D
- A B C D
- A B C D
- A B C D
- A B C D
- A B C D
- A B C D
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- A B C D

EVALUATION

- A B C D E
- A B C D E
- A B C D E
- A B C D E
- A B C D E

How many minutes did you need to complete this CE offering?

Minutes: _____

Before January 3, 2013, print this page, complete the multiple choice questions by circling the correct answer and mail or fax to: *ADVANCE for Nurses*, Learning Scope, 2900 Horizon Dr., King of Prussia, PA 19406; 610-278-1426.

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- Manager/Supervisor
 Nursing Administrator
 Nursing Faculty
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PRACTICE SETTING that best describes your setting (fill in just one circle completely)

- | | | | |
|---|---|--|--|
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