



KETTERING MEDICAL CENTER

**Transitioning from prevalence to incidence
restraint reporting:
A dramatic reduction in restraint usage**

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Guiding Principles

Our philosophy is to reduce and promote the elimination of the use of restraints and seclusion.

The use of restraints and seclusion is limited to emergencies in which there is imminent risk of a patient physically harming himself or others.

We seek to promote an environment that maintains patient's rights while protecting patient safety and preserving the dignity and well being of patients and others.

Theory-driven Initiative



■ Donabedian's Paradigm

- Structure
 - Prevalence to incidence data collection
- Process
 - Retrospective to concurrent data collection and reporting
- Outcome
 - Reduction in restraint utilization
 - Increased documentation compliance

Donabedian, A. (1988) The quality of care: How can it be assessed? *Journal of the American Medical Association*, 260, 1743-1748.

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The Journey Begins.....



- Multidisciplinary representation
 - Clinical Informatics
 - Information Systems
 - Clinical Quality
 - Staff Nurse
 - Nursing Leadership
 - Medical Director

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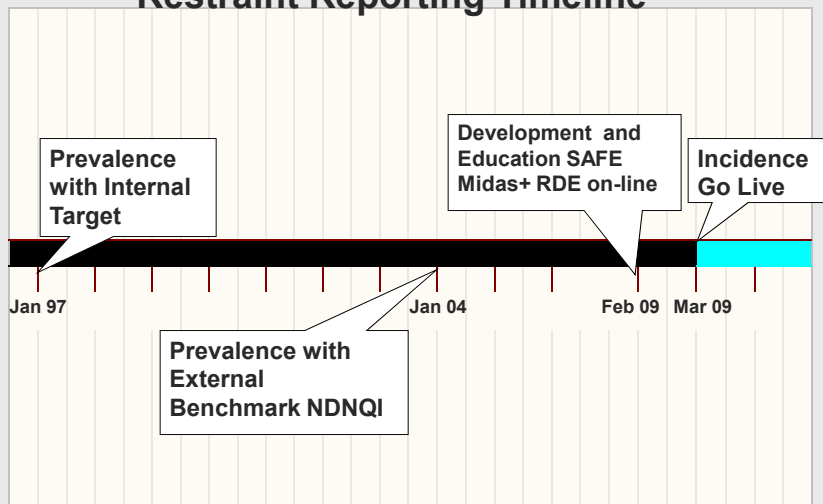
The Journey Begins.....



- Goals of the multidisciplinary team
 - Define the process
 - Prevalence to incidence
 - Data collection
 - Transition from RN Case Managers to RN unit-based staff
 - Daily data entry by 1000
 - Identify a centralized and accessible database
 - ACS-Midas+ System chosen
 - Update data collection tools
 - Plan of Care
 - Develop education plan

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Transitioning from Prevalence to Incidence Restraint Reporting Timeline



Kettering and Sycamore Distribution of Restrained Patients
2009

	Jan Week 1			Feb 2/17-2/19			*ICU only*	YTD		
	TPRD	TPD	RATE	TPRD	TPD	RATE		TPRD	TPD	RATE
2 SOUTH	0	122	0.00%					0	122	0.00%
2 WEST	0	112	0.00%					0	112	0.00%
2 NORTH	1	126	0.79%					1	126	0.79%
3 WEST	10	120	8.33%					10	120	8.33%
3 NORTH	0	97	0.00%					0	97	0.00%
5 WEST	2	137	1.46%					2	137	1.46%
3 SOUTH	3	158	1.90%					3	158	1.90%
5 SOUTH	4	148	2.70%					4	148	2.70%
5 NORTH	0	102	0.00%					0	102	0.00%
SICU	6	63	9.52%	0	32	0.00%		6	95	6.32%
CCU	20	78	25.64%	2	28	7.14%		22	106	20.75%
MSIC	9	65	13.85%	6	27	22.22%		15	92	16.30%
CCU	9	62	14.52%	2	27	7.41%		11	89	12.36%
SCN	0	51	0.00%	0	32	0.00%		0	83	0.00%
UNIT 2E	4	117	3.42%					4	117	3.42%
UNIT 2	4	137	2.92%					4	137	2.92%
UNIT 1	4	145	2.76%					4	145	2.76%
ICUE	4	57	7.02%	7	17	41.18%		11	74	14.86%
KBMC - ADULT	0	171	0.00%					0	171	0.00%
TOTAL	80	2068	3.87%	17	163	10.43%		97	2231	4.35%
Total (no MHU)	80	1897	4.22%	17	163	10.43%		97	2060	4.71%

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ENCOUNTER FOLLOWS UP/REVIEW FOR 2/17/2009 - 2/19/2009
CONFIDENTIAL PATIENT INFORMATION
CLINICAL RESTRAINT ORDERS

3/5/2009 11:06 AM

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ENCOUNTER MEDICAL CENTER
ORDER SUMMARY:
ORDER PRESENT ON LEAD

Yes	15	70%
No	7	30%
Subtotal:	17	
PURPOSE/CLINICAL JUSTIFICATION		
NO DOCUMENTATION PRESENT	7	41%
INSTRUCTIONS AT RISK FOR HARM	1	6%
ATTEMPTING REMOVAL OF THERAPEUTIC DEVICES	9	53%
Subtotal:	17	
TYPE OF RESTRAINT		
NO DOCUMENTATION PRESENT	2	12%
Other	15	88%
Subtotal:	17	
DATE/TIME ORDERED/DATE, TIME SIGNATURE		
Yes	9	53%
No	8	47%
Subtotal:	17	
CLIP ASSESSMENT DATE, TIME SIGNATURE		
Yes	10	59%
No	7	41%
Subtotal:	17	
JUSTIFICATION CLINICAL RESTRAINTS 22H		
Yes	17	100%
Subtotal:	17	
ALTERNATIVES CLINICAL RESTRAINTS 22H		
Yes	17	100%
Subtotal:	17	
RESTRAINTS WERE CHECKED		

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The Human Factor



- Daily Rounding and Coaching
 - Phase 1 Supporting the new process
 - Phase 2 Compliance
- Communication of Daily Findings
 - Direct
 - Electronic
 - Intranet

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Daily Communication



8/21/2009 9:54:54 AM

Unit Restraints Entered: 3N
Patient Name: [redacted] Account Number: [redacted] MRN: [redacted] Start Date: 08/18/2009
Date of Plan of Care: 08/19/2009 Time Restraint/Seclusion Initiated: 0820
Type of Restraint Order: Restraint/Non-Violent/Non-Self Destructive
Purpose/Clinical Justification: Restraint/Attempting Removal of Therapeutic Devices
Restraint/Injurious Behavior to Self
Restraint Order on chart: Y Order with date,time,signature: Y
Attending Physician Name: [redacted]
Date Physician Notified/Order Obtained: 08/19/2009 Time Physician Notified/Order Obtained: 0821
Education Given to pt/family: Y Anticipated Outcome: Patient able to follow safety instructions
Patient has not harmed self
Contraindications to Restraint: N If Yes, Contraindications Selected:
If Other contraindication, specify:
Justification Evaluated q2h: Y Alternatives/Modifications to Pt Care: Y Restraint Device: Soft Wrist Left
Soft Wrist Right
Monitoring Evaluated q2h: Y Restraint DC Date: Restraint DC Time:
RN Assessment-date,time,signature: Y Name of Staff who Performed Assessment: [redacted]
Person Completing Report: [redacted]
Current Location of Patient: 3N Incident No.: 09-4802 Date Entered: 08/19/2009 Discharge Date:
Unit Total Patients: 1
Total Patients: 1

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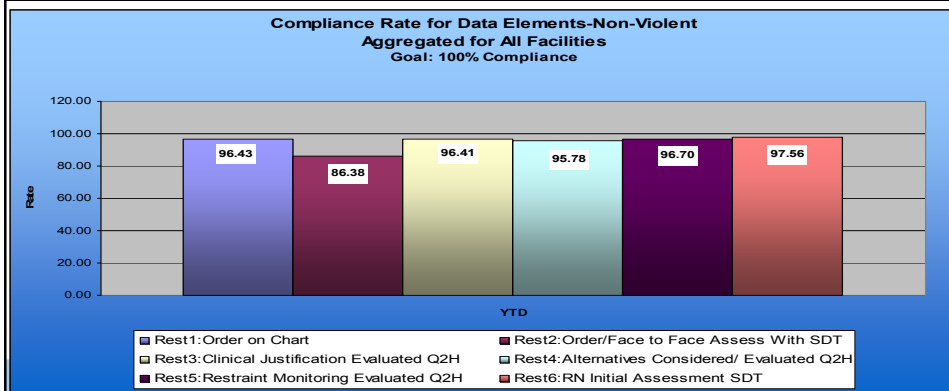
Profile: RESTRAINT RATE BY NURSING UNIT

Facility: All Facility Comparison

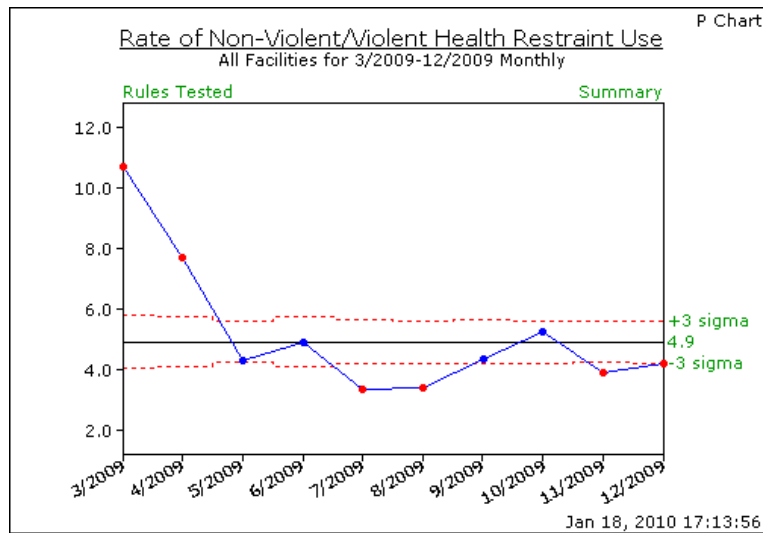
Indicator	Mar 2009	Apr 2009	May 2009	Jun 2009	YTD
Restraint Internal Target Rate	3	3	3	3	
2N Rate of Non-Violent/Violent Health Restraint Use	2.87	2.27	0.00	0.00	1.32
2N Total Non-Violent/Violent Health Restraint Days	17	13	0	0	30
2N Patient Days	592	572	583	519	2266
2W Rate of Non-Violent/Violent Health Restraint Use	1.29	2.68	1.91	3.00	2.04
2W Total Non-Violent/Violent Health Restraint Days	7	11	10	14	42
2W Patient Days	542	528	523	467	2060
2S Rate of Non-Violent/Violent Health Restraint Use	1.13	1.00	0.19	0.81	0.78
2S Total Non-Violent/Violent Health Restraint Days	6	5	1	4	16
2S Patient Days	531	502	525	495	2053
3N Rate of Non-Violent/Violent Health Restraint Use	3.22	3.40	2.26	0.64	2.66
3N Total Non-Violent/Violent Health Restraint Days	16	16	9	2	43
3N Patient Days	497	471	399	314	1681
3W Rate of Non-Violent/Violent Health Restraint Use	1.27	1.56	1.34	0.25	1.13
3W Total Non-Violent/Violent Health Restraint Days	6	7	6	1	20
3W Patient Days	472	449	447	396	1764
3S Rate of Non-Violent/Violent Health Restraint Use	3.20	2.34	1.82	1.78	2.33
3S Total Non-Violent/Violent Health Restraint Days	23	15	12	10	60
3S Patient Days	719	640	660	561	2580
5N Rate of Non-Violent/Violent Health Restraint Use	0.25	1.24	0.00	0.79	0.57
5N Total Non-Violent/Violent Health Restraint Days	1	5	0	3	9
5N Patient Days	401	403	403	379	1586
5W Rate of Non-Violent/Violent Health Restraint Use	1.82	3.35	3.31	2.82	2.81
5W Total Non-Violent/Violent Health Restraint Days	11	19	20	16	66
5W Patient Days	606	568	604	568	2346
5S Rate of Non-Violent/Violent Health Restraint Use	8.50	4.06	2.68	6.17	5.39
5S Total Non-Violent/Violent Health Restraint Days	58	27	17	39	141

Documentation Compliance

Indicator	Mar 2009	Apr 2009	May 2009	Jun-09	YTD
Rest1:Order on Chart	97.41	96.67	95.96	97.28	96.43
Rest2:Order/Face to Face Assess With SDT	85.00	82.34	82.90	90.41	86.38
Rest3:Clinical Justification Evaluated Q2H	96.19	97.27	96.96	95.88	96.41
Rest4:Alternatives Considered/ Evaluated Q2H	95.73	97.23	96.43	95.14	95.78
Rest5:Restraint Monitoring Evaluated Q2H	95.50	97.05	97.45	95.89	96.70
Rest6:RN Initial Assessment SDT	95.75	97.00	98.45	96.52	97.56



Data Speaks for Itself.....



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Motivation for Sustained Practice Changes



- Staff ownership
- Improved clinical outcomes
- Pride in making a difference
- Living the mission

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Collaboration – Common Goals 

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