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Use of Side Rails in Long Term Care – For Residents and Families

The Northern Health Region's (NHR) Long Term Care (LTC) Philosophy promotes the belief that the residents of LTC homes deserve a safe and comfortable sleeping atmosphere. To achieve a safe bed environment, the reduction in use of side rails may be in the best interest of the resident's health and safety. Research shows that the use of side rails can increase the resident's risk of entrapment, serious injury or death, rather than prevent it.

This handout summarizes information from the NHR Restraint Policy specific to side rail usage. You are encouraged to speak with the Manager or Clinical Resource Nurse for specific information related to your family member.

Myths about Side Rails

- Older people fall out of bed
- Side rails are safe and prevent falls
- Residents don't mind side rails and cannot refuse
- Residents feel safe and secure with side rails

Research on Side Rail Safety

- Full length side rails do not reduce the risk of falls.
- Cognitively impaired residents often view side rails as a barrier and either go over or around them, increasing the likelihood of injury.
- Side rail use is not a standard of care supported by evidence.

Bed Rails In Hospitals, Nursing Homes and Home Health Care - Canada.ca

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Possible Risks of Side Rail Usage Are:

- More serious injuries from falls occur when residents are prevented from performing routine activities, such as going to the bathroom.
- Worsening aggression or confusion.
- Increased feelings of isolation or loneliness.
- May cause negative physical or emotional outcomes, such as pneumonia, or loss of dignity.
- Increased risk of entrapment
- Serious injury or death.

When side rails keep a resident from voluntarily getting out of bed, it is defined as a physical restraint. If the need for a restraint is identified, a thorough assessment by a multi-disciplinary team is completed prior to the implementation of the restraint.

- The need for a restraint is discussed with the resident, the family, or Alternate Decision Maker (ADM).
- A written or verbal consent is required by the resident, family, or ADM.
- The use of the restraint is communicated to all employees by way of the Care Plan.
- Employees are required to monitor the resident's comfort and emotional well being as well as their safety and security while in the restraint.
- The need for the restraint is reassessed on a regular basis as identified in the Care Plan.

Making an Informed Decision

When participating in the decision-making process as to whether a restraint is required for your family member, consider:

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- Do the benefits outweigh the risks?
- Have you asked your family member how they feel about being restrained?
- Have you received all of the information required to make an informed decision?
- Has every alternative been tried? Is this the last resort?

Flin Flon Personal Care Home
50 Church St.
Flin Flon, MB
R8A 1N2
204-687-9630

Northern Lights Manor
274 Bracken St.
Flin Flon, MB
R8A 1P4
204-687-7325

St. Paul's Residence
67 1st St.
The Pas, MB
R9A 1K4
204-623-9226

Northern Spirit Manor
879 Thompson Dr. South
Thompson, MB R8N 0A9
204-778-3805

Special Thank You to the WRHA PCH Program for allowing the Northern Health Region to adapt their publication on Side Rail Use in Long Term Care.

A copy of CPS-02-EC.120 Restraints is available upon request.