

Massachusetts General Hospital
 Patient Care Services Office of Quality and Safety
 Joint Commission Readiness Checklist
Restraints

Criteria	Met	Not Met	Comments
<p>MD order present for restraint</p> <ul style="list-style-type: none"> ○ Before restraint applied or within ___ hours ○ MD daily assessment documented in POE ○ Discontinue order present (if applicable) 			
<p>RN assessment and interventions documented each shift</p> <ul style="list-style-type: none"> □ The eBridge Restraint Note is present and complete □ <i>ALL</i> of the following items are addressed <ul style="list-style-type: none"> • Specific behaviors requiring restraint • Alternative measures tried • Type and location of restraint • Patient evaluated q 2h for non-behavioral, q15 min for behavioral; restraint released q 2 • Response to restraint • Rationale for continued use or removal of restraints ○ If restraint discontinued the rationale is documented on Restraint Note 			
<p>Restraint utilization matches the provider’s order</p> <ul style="list-style-type: none"> □ Type and number of restraints documented on the Restraint Note matches the MD Order in POE □ Type and number of restraints observed on the patient at the time of the audit matches the order □ There is no evidence that any of the following has occurred <ul style="list-style-type: none"> — Restraints used on an “as needed” basis e.g. removed during the day, on at night — Patient was “trialed” out of restraints and the restraint was reapplied without a new order — Restraints were removed temporarily while the family was with the patient — Restraints were removed but the restraint order was not d/c’d “just in case” 			
<p>Restraint plan of care has been modified</p>			