



Least Restraint Philosophy

Restraint alternatives should always be attempted if it is safe to do so prior to the use of restraints.

1. Try Alternatives First

- **Use de-escalation skills**

Consider ways to reduce patient specific risks
Involve family and the interprofessional care team

Resources:

- SAF-1-32: Least Restraint Standard and Alternative

Approaches to Restraints

- Appendix A: Alternatives to Restraints in SAF-1-32
- Appendix B: Least Restraint Decision Tree in SAF-1-32
- Appendix C: De-escalation Tips in SAF-1-32

2. Restraint Orders

- **SAF-1-33:** Non-Emergent Mechanical Restraint.
- **Clear & Complete:** must specify the type of restraint, justification, and the duration.
- **Time-Limited:** shortest time possible, 24hrs maximum
- **Never “as needed” or “PRN”**
- **Consent:** Must be obtained from the patient or their substitute decision maker.

3. Only approved restraints can be used at TBRHSC

- **Pinel®** (cap and post)
- **Posey®** (soft limb)

Patient Restraints
Minimization Act, 2001

SCAN FOR
MORE INFO

