



Topic /Subject	Restraint Face to Face
Area / Dept / Date	All providers ordering Violent retirants
Originating Dept / Date	Restraint CAP Team 3.20.24
Approved By / Date	
Revision By / Date	

**Single
Point
Lesson**

Rationale: Violent restraint orders placed require evaluation of the patient's condition in person within one hour of restraint being placed

- When restraint or seclusion is used to manage violent or self-destructive behavior that jeopardizes the immediate safety of the patient, a staff member, or others, the ordering provider must see the patient face-to-face within 1 hour after the initiation of the intervention to evaluate. (DNV, 2023)
- All violent restraint episodes will follow hospital policy and regulatory guidelines.
 1. After ordering violent restraints, a provider must conduct a face-to face assessment **within one hour after** the initiation of the restraint.
 2. The following must be evaluated and documented on the face-to-face assessment:
 - The patients' immediate situation
 - The patients' reaction to the restraint
 - The patient's medical condition
 - The patients' behavioral condition.
 - The need to continue or discontinue the restraint.



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Rationale: Patients orders violent restraints require evaluation of the patient's condition in person within one hour of restraint being placed

3. Currently, the Face-to-Face fires when the Restraint order is placed
4. Policy **20SAH00626** Restraining a Patient

Face to Face With in One Hour Evaluation for Violent/Chemical Restraints - ZZTEST, ZZALLERGIES

Performed on: 03/08/2024 13:39 EST By: Ferrell, RN, Jennifer

Face to Face With in One Hour Evaluation for Violent/Chemical Restraints

Date/Time Violent Restraint Ordered: 03/08/2024 1339

Date/Time Face to Face Completed: 03/08/2024 1430

The Patient's Immediate Situation:

- Physical abuse to others
- Self-injurious behavior
- Verbal aggression with potential harm to self

The Patient's Reaction to the Intervention:

- Respiratory assessment evaluated
- No adverse effects from restraints (skin integrity)
- Behavior decreased
- Behavior unchanged
- Behavior increased, consider additional interventions

The Patient's Medical and Behavioral Condition:

- Delirium 2nd to acute illness
- Delirium 2nd to metabolic derangement
- Delirium 2nd to pain or sedative meds
- Delirium 2nd to post-surgical state
- Desaturation / Hypo perfusion
- Drug or alcohol toxicity
- Potential med interaction
- Psychotic Diagnosis
- TIA/CVA
- Other

The Need to Continue or Terminate the Restraint or S

- No longer exhibits behavior threatening harm to self or others
- Persistent threat to self or others

Attending Notified of Restraints: (Mandatory field if being completed by a Resident Physician)

Note: The Face to Face is to be completed within one hour AFTER the restraint is ordered, not simultaneous with the order.

- You must document a Medical **AND** Behavioral Condition
- You may multiselect and use the other option if needed
- Cerner revisions are being reviewed and future changes will be communicated

Physician Attestation of completion



- <https://www.camc.org/form/provider-education-attestation-r>
- To substantiate your compliance with completion of this training, please click on the link and complete the form. This will provide us the validation of completion as needed.