

# Decreasing agitation, restraints, and time in restraint on an inpatient unit through improved staff implementations with patients to improve patient responsiveness

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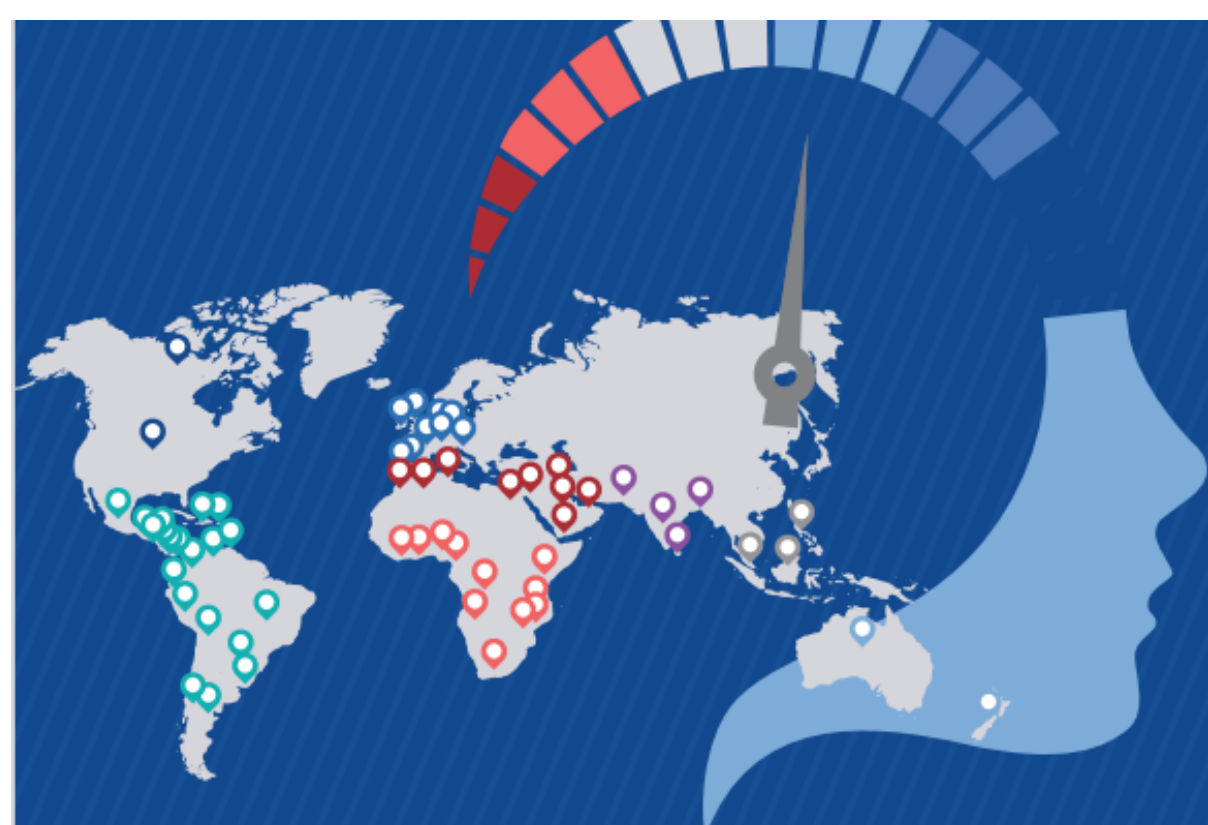
## Introduction

### Purpose

The project aims to decrease agitation, restraints, and time in restraint on an inpatient unit through improved staff implementations with patients to improve patient responsiveness among ages 21-59

### Background

Studies show that the frequency of physical restraint in an inpatient mental health setting ranges from 3.8% to 51.3% worldwide (Junrong et al., 2019)



...use of physical restraint has the potential for complications, risk, and adverse events, including psychological harm, physical injuries, and death to patients and staff implementing restraints (Abdeljawad & Mrayyan, 2019)



## Methods

### Setting / Sample

- An inpatient psychiatric facility in an Urban Southeast setting
- N=25: Both male and female participants, ages 21-59 years old, with symptoms of agitation symptoms or a history of agitation.
- The project period was from September 7<sup>th</sup> to October 25<sup>th</sup>, 2023

### Measures/Metrics

- The Modified Agitation Severity Scale (MASS) and the MASS Associated Agitation Treatment Protocol (MASS-AATP) were used to identify and manage agitation

### Intervention

- Immediately upon admission to the unit, the patient baseline data was obtained for MASS scores and restraint initiation in minutes.
- Scores above 4, indicating agitation, resulted in nursing staff repeating the scale hourly until the score was less than 4, then resuming the scale at 0900 and 2100 for a five-day scoring schedule.
- Data was collected using the paired sample T-test for comparison

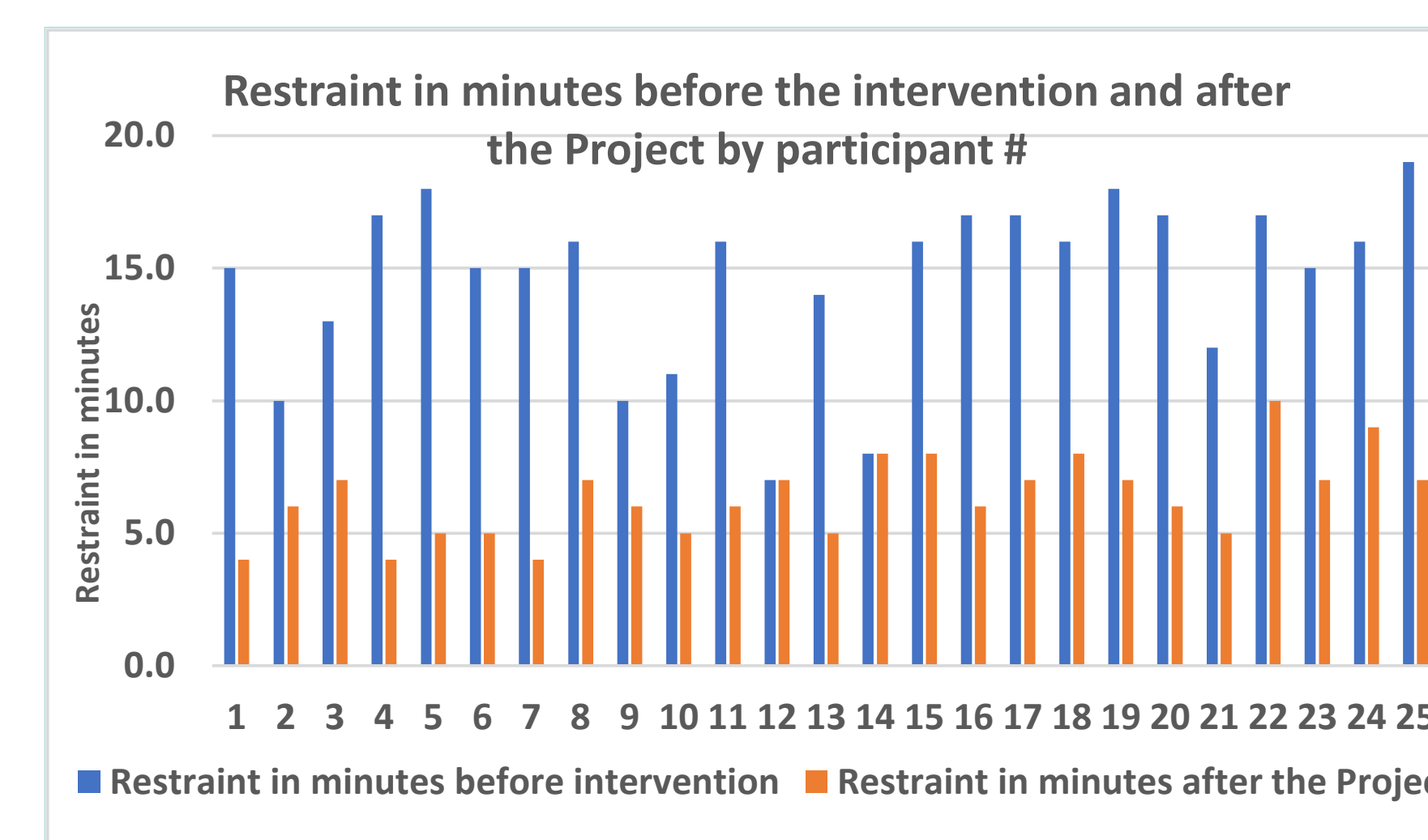


### What was measured

- Total time in restraints before the intervention is compared with total time in restraints after the project for a similar time-period
- The number of episodes of agitation in which the MASS-AATP starts is compared with restraints avoided due to increased staff skills

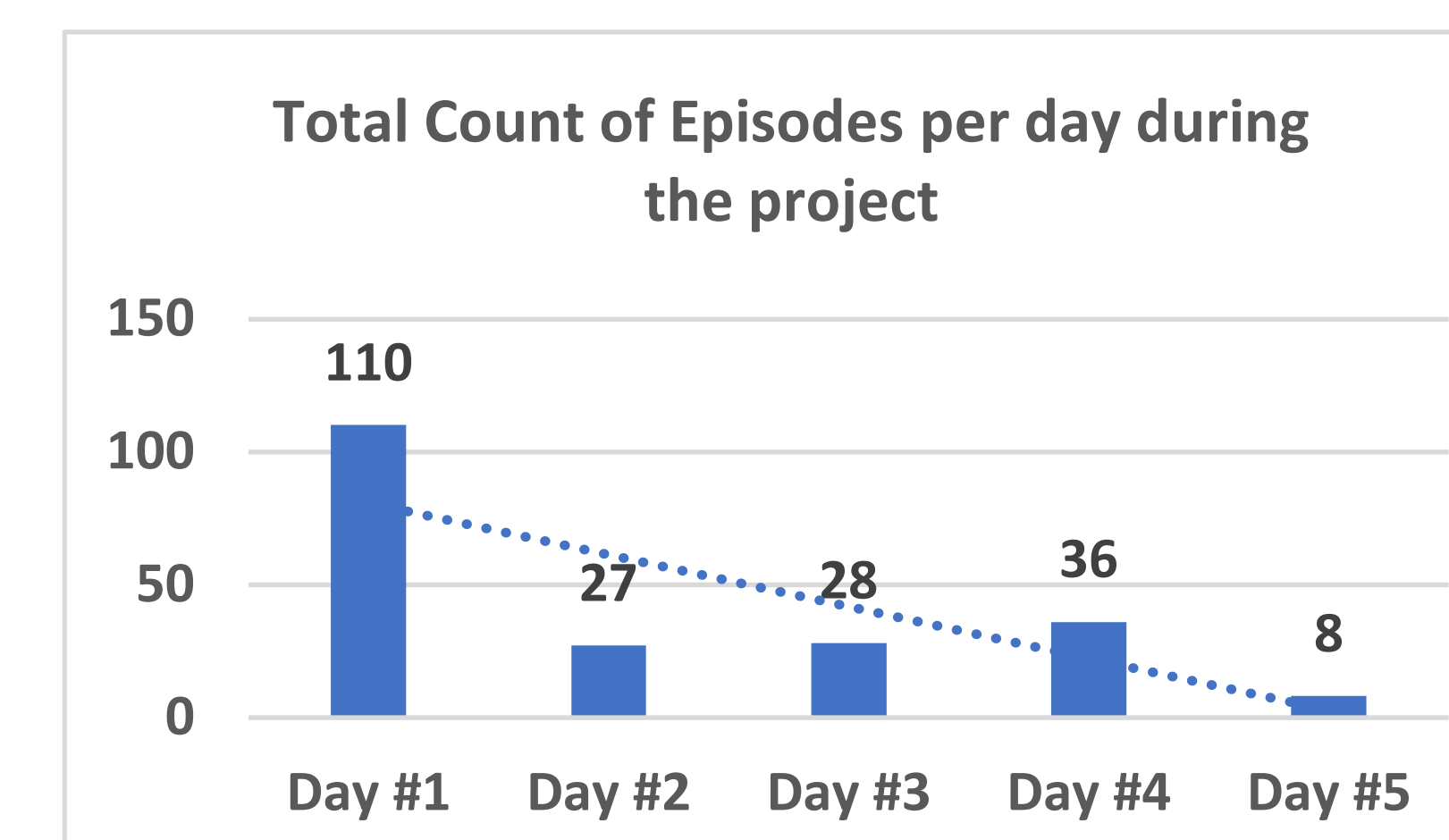
## Results

Figure 1



- The total time in restraints at the beginning was 365 minutes for all 25 patients for a similar time-period
- At the end of the project, the total time in restraints was 159 for all patients
- There was a 56% reduction of restraint use in minutes within the eight-week project
- The paired samples T-Test indicates the reduction in average minutes restraints was statistically significant,  $P < 0.001$

Figure 2



- To compare the number of agitation episodes, the total agitation episodes = 209 during the project
- Day 1, the number of agitation episodes = 110 (averaging 4 episodes per participant)
- By the project end day, number of episodes of agitation = 8 incidences of agitation (averaging 0.3 episodes per participant)
- In total, 102 agitated episodes may have been averted within the eight-week project duration

## Conclusions

Based on the findings, the project demonstrates effectiveness of nursing service team preparedness to identify, manage and reduce agitation, improving patient responsiveness to agitation, and resulting in decreased use of restraint episodes and decreased time in restraints

## Implications

As an evidence-informed practice project, the findings model effective nursing team implementation with agitated patients

The project generates support and adds to the growing knowledge of psychiatric mental health care

The conclusions can present evidence supporting use of assessment and management of agitation and de-escalation skills to decrease patient agitation, reducing restraint use and time spent in restraint episodes



## References

- Abdeljawad, R., & Mrayyan, M. T. (2019). The use of Physical Restraint: An Argumentative Essay. *European Scientific Journal, ESJ*, 12(9), 433 <https://doi.org/10.19044/esj.2019.v12n9p433>
- Junrong, Y., Chen, W., Aixiang, X., Zhichun, X., Lin, Y., Jiankui, L., Yao, L., Yu, x. & Yunlei, Z (2019). Physical restraints in mental health nursing: A Concept analysis. <http://www.ncbi.nlm.nih.gov/pmc/article>