

How can friends and relatives help?

Please be reassured that this phase is normally short and most patients do not go on to have long-term problems with agitation; and in fact most do not remember it at all.

Although having someone familiar at the bedside can be calming for the patient it is also really important that you take time away to rest.

You can help by:

- Being with the patient
- Holding their hand
- Talking to them about life at home
- Telling the nurses what types of things the patient likes to do

We suggest it is probably not a good time for distant relatives and friends to visit. Ask them to wait until this period of agitation has passed.

Also be aware your presence may make the agitation worse. Discuss this with staff if this happens. It may be better to have a shorter visit.

When restraint mitts aren't used

We don't use restraint mitts if the patient is violent, as from experience we know they do not help. At these times it might be necessary to administer fast-acting medicines to keep the patient and others safe.

Staff training

All nursing staff have been trained on how to assess patients, apply the mitts and what additional care is required when the patient is wearing them.

We will also try to tell you when and why they are being worn before you come in to visit, as we recognise that this can be an upsetting time for family and friends.

All nurses have tried the restraint mitts on and know that they are quite hot to wear. Our goal is to remove them as soon as possible while keeping the patient safe.

Future plans

We are looking at alternative restraint options as a way of improving the care we provide. Ask the nurse to explain different forms of restraint if you see that your relative/friend is wearing it.

If you have any questions about restraint or would like to try on a mitt please ask the nurse or doctor caring for your relative/friend.

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ICU, July 2020, Review due: July 2022

NHS

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Use of
restraint mitts
in ICU

Information for
patients, family
and friends

Occasionally, ICU patients require restraint mitts to maintain patient safety due to agitation, anxiety, confusion or delirium.

This leaflet aims to provide information to relatives and friends of patients who are wearing restraint mitts in ICU.

What is restraint?

Restricting a person's voluntary movement or behaviour is known as restraint. There are many different types of restraint but the ones most commonly used in ICU are physical and chemical.

ICUs traditionally use sedative medicines (chemical restraint) but we are learning more about the long-term effect of ICU treatments and possible links to issues such as PTSD (Post Traumatic Stress Disorder).

During the patient's critical first few days in ICU it is still our normal practice to use sedative medicines.

However, we are beginning to look at physical restraint as another option for some patients. Restraint mitts are the form of physical restraint used in ICU at the Royal Berkshire Hospital.

When might physical restraint mitts be required?

Restraint mitts may be needed when the ICU team decide it is time to reduce the patient's sedative medicines. When the patient's condition has stabilised and the ICU team are allowing the patient to wake from their 'induced coma', restraint mitts might be helpful as the patient adjusts to their environment and situation.

Why is restraint needed?

Restraint is used to help manage patients with restless behaviour. Waking in a strange environment with unfamiliar people and noises can be very unsettling and the cause of such behaviour. The patient will be able to feel lines and tubes used in treatments and want to try to touch/remove them. They probably will not know why they are there and what they are for.

Removal of essential lines, such as a tracheostomy tube, can be dangerous for the patient unless carried out by nursing staff. Sometimes, even with the use of restraint mitts, patients will still manage to remove life saving devices but our aim is to reduce this risk.

What are restraint mitts?

Restraint mitts are soft, padded protection worn by the patient on one or both hands. Restraint mitts can help us to reduce the amount of sedative medicines required while preventing self-harm.



How do you know whether the patient needs restraint mitts?

The nursing team carry out a test to see how well a patient is coping with their environment (CAM-ICU) and to determine whether they are confused or not. We do this several times a day.

Please be assured that we will only use restraint mitts on patients who have been identified as confused and a danger to themselves or others. The restraints will be removed as early as possible.

Our practice and guidance is governed by national legislation.

Before using restraint mitts

We will try lots of other things before using restraint mitts, including:

- Reassurance
- Explanation
- Orientation
- Involving family and friends
- Distraction e.g. TV, music, twiddlemuff, newspaper
- Identifying other causes of distress e.g. pain, constipation
- Staying with the patient
- Turning off lights, reducing noise.