**Section 390.1310 Restraints**

a) Pursuant to Section 2-106(b) of the Act, the facility shall *have a written policy to address the use of restraints and seclusion. Each policy shall include periodic review of the use of restraints,* including, but not limited to leg restraints, arm restraints, hand mitts, soft ties or vests, wheelchair safety bars and lap trays, and all facility practices that meet the definition of a physical restraint in Section 2-106 of the Act and Section 390.330, including, but not limited to, tucking in a sheet so tightly that a bed-bound resident cannot move; bed rails used to keep a resident from getting out of bed; chairs that prevent rising; or placing a resident who uses a wheelchair so close to a wall that the wall prevents the resident from rising. Adaptive equipment is not considered a restraint. Wrist bands or devices on clothing that trigger electronic alarms to warn staff that a resident is leaving a room do not, in and of themselves, restrict freedom of movement and should not be considered as physical restraints. Written policies, *to the extent practicable, should be consistent with the requirements for participation in the federal Medicare program.* (Section 2-106(b) of the Act)

b) No physical restraints with locks shall be used.

c) *Neither restraints nor confinements shall be employed for the purpose of punishment or for the convenience of any facility personnel.* (Section 2-106(b) of the Act)

d) The use of chemical restraints is prohibited.

e) *A restraint may be used only for specific periods, if it is the least restrictive means necessary to attain and maintain the resident’s highest practicable physical, mental or psychosocial well being, including brief periods of time to provide necessary life saving treatment.* (Section 2-106(c) of the Act)

f) A facility may not issue orders for the use of restraints on a standing or as needed basis.

g) A resident placed in a restraint must be checked at least every 30 minutes by staff trained in the use of restraints, released from the restraint as quickly as possible, and a record of these checks and usage must be kept.

h) Restraints shall be designed and used in a way that does not cause physical injury to the resident and that results in the least possible discomfort.

i) Barred enclosures shall not be more than three feet in height and must not have tops.

(Source: Amended at 46 Ill. Reg. 8192, effective May 6, 2022)