



Health and Welfare Alert

Enclosed Bed #57-11-24

Mechanical Restraints-Enclosed Beds

The Ohio Department of Developmental Disabilities has discovered cases of enclosed beds. An enclosed bed is a type of bed that prevents a person from exiting it independently, regardless of ability.

The use of enclosed beds puts people with developmental disabilities at risk. Special thought should be taken for the safety of all people considering using enclosed beds.

Please see the [FDA Public Health Notification](#) regarding the use of Enclosed Bed Systems.

The Ohio Individual Service Plan (OhioISP) teams should be very clear about the use of enclosed beds, whether they are used for behavioral or medical concerns. Medical use should list specific reasons and have current data that supports the use of an enclosed bed. Behavioral use of the enclosed beds should be temporary in nature. Usage of such beds may be considered a mechanical restraint.

A mechanical restraint can only be used when a person with developmental disability's actions

pose a risk of harm and must stop immediately once the risk of harm has passed.

An assessment must be completed within 12 months that describes the risk of harm, what behavior will likely occur, the person's needs, diagnosis, life experiences, trauma history, and degree and risk of restrictive measures. The team should consider whether the use of technology is an option. The use of enclosed beds for staff convenience is strictly prohibited and must be eliminated.

'A behavioral support strategy that includes restrictive measures requires: (a) Documentation that demonstrates that positive measures have been employed and have been determined ineffective.' 'It should ensure environments where the person has access to preferred activities and is less likely to engage in unsafe actions due to boredom, frustration, lack of effective communication, or unrecognized health problems.'

These needs must be clearly identified in the OhioISP. The team will need to demonstrate that less restrictive alternatives failed. The Human Rights Committee must approve the use of restrictive measures. The use of enclosed beds for behavior support must have a plan to be decreased and eventually eliminated.

Behavior supports will be provided in a positive, systematic, whole-person approach that promotes dignity, respect, and trust and recognizes that people with developmental disabilities are equal citizens with the same rights and personal freedoms granted to Ohio's citizens without developmental disabilities. Behavior support shall be based on an understanding of the person, the reasons for his or her behavior, and evidence-based practices for promotion of positive behavior and reduction of inappropriate and unsafe behavior.





Behavioral use of the enclosed beds should be temporary in nature.

Some alternatives to enclosed beds:

- A bedside companion
- Fall alarms
- Floor cushions
- Lowering the volume on the TV
- Adjusting window shades or dimming lights
- Soft music
- Lowering bed

Steps to take to ensure health and safety and reduce the use of restraint

- Work with the people, families, physicians, nurses, and providers to reduce and eliminate the use of enclosed beds.
- Evaluate options of replacing restraints with personal interactions.
- Ensure OhioISPs are accurate and reflective of the needs of the people involved.
- Review the use of the current restraint and determine if the person's needs have changed.
- Ensure the restraint is appropriate for the target behavior displayed.
- Ensure the restraints are approved by the Human Rights Committee as the team works through making decisions.

Coverage

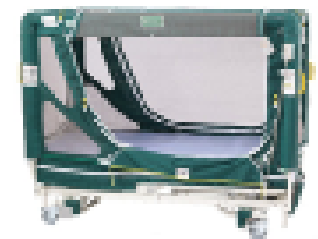
Since the therapeutic value of an enclosed bed is not immediately obvious and because careless use can result in unsupervised restraint, sensory deprivation, and overuse, an enclosed bed is presumed not to be medically necessary. Payment for the purchase of an enclosed bed is therefore always subject to prior authorization.

A bed, youth bed, or crib when used for a child; rotational bed; a hospital bed equipped with protective rails or panels as add-on accessories are not enclosed beds.

Paid providers, including family members, are prohibited from assisting people into/out of enclosed beds if they have not been built into a plan as an approved mechanical restraint or medical support.

Enclosed beds are not considered medically necessary when used for:

- Provider convenience;
- Behavior therapy;
- As a physical restraint;
- As a substitute for appropriate caregiver supervision; or
- A regular bed that meets the needs of the person.



Examples of Enclosed Beds