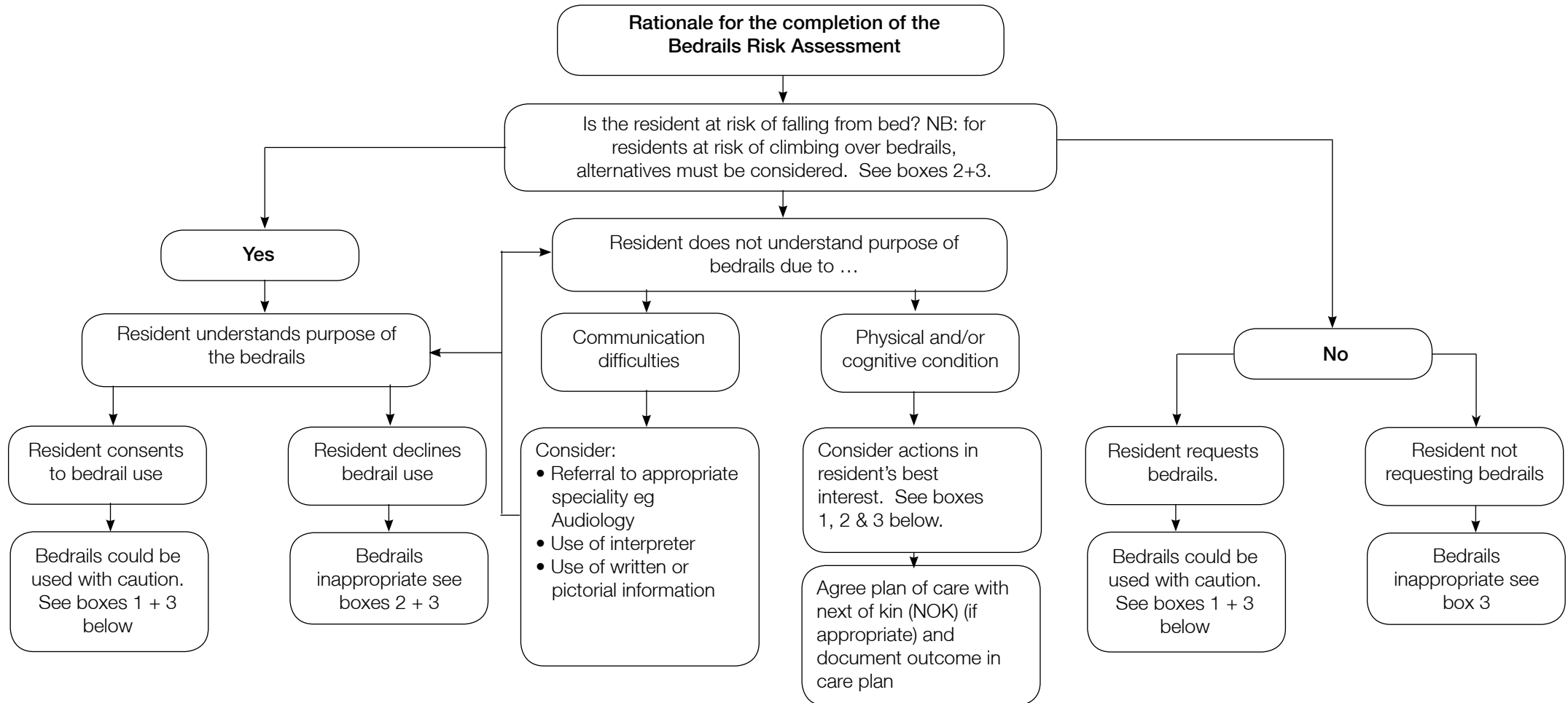


Bedrails Algorithm



1. If bedrails are used consider:

- Risk of entrapment and harm to limbs.
- Risk of resident climbing over the top.
- The psychological effect of bedrails to the resident.
- Use of air filled mattresses or mattress overlays require extra height bedrails.
- Bariatric beds must be used with a compatible extra wide mattress.

2. Alternatives to bedrails:

- Move resident to a more observable area to maximise supervision.
- Bed monitor.
- Ensure bed returned to lowest height after care delivery.
- Ensure resident needs anticipated eg drinks are accessible, regular toileting, call bell to hand etc.
- Nursing resident on mattress on the floor should be a last resort and safety checks should be made for hot pipes, trailing wires, electric sockets etc. Moving and handling risk assessment for staff must be completed.

3. Remember to document in care plan:

- Date and time assessment made.
- Resident & NOK given bedrails information leaflet.
- Rationale for decision made in care plan.
- Where bedrails are considered appropriate and the resident has declined their use.
- Actions taken, including discussion with next of kin.
- Care planning and reviews.

Assessment should be made:

- On admission.
- If residents condition changes.
- Daily/weekly depending on the situation.