

Bed Inspection Policy

LeadingAge[®]



**PATHWAY
HEALTH**
Insight | Expertise | Knowledge

*State logo added here. If not,
delete text box*



BED INSPECTION POLICY

POLICY

It is the policy of this facility to conduct regular inspections of all bed frames, mattresses, and bed rails, as part of a regular maintenance program to identify areas of potential entrapment or other safety hazards. When bed rails and mattresses are purchased separately from the bed frame, the facility will ensure that bed rails, mattress, and bed frame are compatible. As an approach to providing a “safe, clean, comfortable, and homelike environment,” the facility’s regular maintenance program, as well as the facility wide resource assessment, will include inspection of all bed mattresses to ensure they are clean and comfortable.

Centers for Medicaid and Medicare Services (CMS) - Definitions

DEFINITION OF FURNITURE

“Functional furniture appropriate to the resident’s needs” means that the furniture in each resident’s room contributes to the resident attaining or maintaining his or her highest practicable level of independence and well-being. A bed, used for comfort and rest, is considered a piece of bedroom furniture. Nursing homes are required to provide “functional furniture that is appropriate to the resident’s needs.”

DEFINITION OF BED RAIL

Bed rails (also referred to as “side rails,” “bed side rails,” and “safety rails”) are constructed of metal or rigid plastics, and are available in various sizes (e.g., full length rails, half rails, quarter rails), to align with resident-specific needs. Bed rails may be positioned in various locations on the bed; upper or lower, either or both sides. The 1995 FDA issued Safety Alert entitled, “Entrapment Hazards with Hospital Bed Side Rails” notes the frail or elderly who have conditions such as agitation, delirium, confusion, pain, uncontrolled body movement, hypoxia, fecal impaction, acute urinary retention, etc., have an increased likelihood of entrapment. The increased risk is largely due to unsafe moving about the bed, or ill-advised attempts to exit from the bed. Additionally, untimely responses to care needs, (e.g. toileting, repositioning, pain management, etc.) increases the risk of entrapment. No matter the purpose for use, bed rails and other bed accessories (e.g., transfer bar, trapeze, bed enclosures), although prescribed to improve functional independence with bed mobility and transfers, may increase resident safety risk. Thus, weighing the risks and benefits of devices (including bed rails) is integral to achieving positive resident outcomes. (Appendix PP) In addition, the FDA *Hospital Bed System Dimensional and Assessment Guidance to Reduce Entrapment*, dated March 10, 2006: <http://www.fda.gov/RegulatoryInformation/Guidances/ucm072662.htm> provides additional guidance and recommendations that are related to both hospital beds and hospital

This document is for general informational purposes only.

It does not represent legal advice nor relied upon as supporting documentation or advice with CMS or other regulatory entities.

© Pathway Health Services, Inc. – All Rights Reserved – Copy with Permission Only - Requirements of Participation P&P Manual 2017



bed accessories with recommendations that are intended to reduce life threatening entrapments.

DEFINITION OF ENTRAPMENT

Bed entrapment occurs when a resident is caught between the mattress and bed rail or within the bed rail itself. Technical issues, such as the proper sizing of mattresses, fit and integrity of bed rails or other design elements (e.g., wide spaces between bars in the bed rails) can also affect the risk of resident entrapment. The use of a specialty air-filled mattress or a therapeutic air-filled bed may also present an entrapment risk, which differs from rail entrapment with a standard mattress. The high compressibility of an air-filled mattress compared to a regular conventional mattress requires appropriate precautions when used for a resident at risk for entrapment. An air-filled mattress compresses on the side to which a person moves, thus raising the center of the mattress, and lowering the side. This may make it easier for a resident to slide off the mattress or against the rail. Mattress compression widens the space between the mattress and rail. When a resident is between the mattress and rail, the mattress can re-expand and press the chest, neck, or head against the rail. While using air therapy to prevent and treat pressure ulcers, facilities should also take precautions to reduce the risk of entrapment. Precautions may include following manufacturer equipment alerts and increasing supervision.

OBJECTIVE OF BED INSPECTION POLICY

The objective of the bed inspection policy is to comply with approaches to risk identification and prevention of entrapment or other relevant safety hazards. This will serve as a key component of care plan development, namely implementation of appropriate interventions to reduce identified risks, monitoring for effectiveness, and modifying interventions as indicated. The bed inspection policy will be reviewed annually or more frequently as needed and will be integrated into the facility Quality Assurance and Performance Improvement program (QAPI).

OVERVIEW OF THE U.S. FOOD AND DRUG ADMINISTRATION'S POTENTIAL ZONES OF BED ENTRAPMENT

ZONE 1: Within the Rail

Any open space between the perimeters of the rail can present a risk of head entrapment. FDA recommended space: less than 4 3/4"

ZONE 2: Under the Rail, Between the Rail Supports or Next to a Single Rail Support

The gap under the rail between the mattress, may allow for dangerous head entrapment. FDA recommended space: less than 4 3/4"

ZONE 3: Between the Rail and the Mattress

This document is for general informational purposes only.

It does not represent legal advice nor relied upon as supporting documentation or advice with CMS or other regulatory entities.
© Pathway Health Services, Inc. – All Rights Reserved – Copy with Permission Only - Requirements of Participation P&P Manual 2017



**PATHWAY
HEALTH**

Insight | Expertise | Knowledge



This area is the space between the inside surface of the bed rail and the mattress, and if too large, may cause a risk of head entrapment. FDA recommended space: less than 4 3/4"

ZONE 4: Under the Rail at the Ends of the Rail

A gap between the mattress and the lowermost portion of the rail poses a risk of neck entrapment. FDA recommended space: less than 2 3/8"

ZONE 5: Between Split Bed Rails

When partial length head and split rails are used on the same side of the bed, the space between the rails may present a risk of either neck or chest entrapment.

ZONE 6: Between the End of the Rail and the Side Edge of the Head or Foot Board

A gap between the end of the bed rail and the side edge of the headboard or footboard can present the risk of resident entrapment.

ZONE 7: Between the Head or Foot Board and the End of the Mattress

When there is too large of a space between the inside surface of the headboard or footboard and the end of the mattress, the risk of head entrapment increases.

Note: Currently, the FDA provides dimensional recommendations for Zones 1-4, as 80% of reported entrapment cases have occurred in these zones.

This document is for general informational purposes only.

It does not represent legal advice nor relied upon as supporting documentation or advice with CMS or other regulatory entities.

© Pathway Health Services, Inc. – All Rights Reserved – Copy with Permission Only - Requirements of Participation P&P Manual 2017



TRAINING COMPONENT

BED INSPECTION POLICY REQUIREMENTS: It is the policy of this facility to conduct bed inspections in accordance with providing a “safe, clean, comfortable and homelike environment.” The facility will conduct regular bed inspections, utilizing an interdisciplinary, team-based approach (e.g. nursing and maintenance) to risk identification and prevention. The Director of Nursing and Maintenance Director (or qualified designees) cooperatively will be responsible for completion of bed inspections on a regular basis. The facility will conduct ongoing education.

PROCEDURE:

Facility staff will receive education as follows:

- During orientation and ongoing programs
- Staff and will be taught the risk factors for entrapment and other safety hazards related to bed systems (e.g. bed rails, frames, and mattresses)
- Identification of risks and benefits pertaining to bed rails, use bed rails, mattresses, and bed frame
- Procedure for reporting and management of potential safety risks associated with bed rails, frames, or mattresses
- The FDA’S Potential Zones of Entrapment
- Staff should report any actual or potential risk to their immediate supervisor
- Educational resources will include, but are not limited to: 1) the FDA’s Potential Zones of Entrapment, and the CMS State Operations Manual, Appendix PP

This document is for general informational purposes only.

It does not represent legal advice nor relied upon as supporting documentation or advice with CMS or other regulatory entities.

© Pathway Health Services, Inc. – All Rights Reserved – Copy with Permission Only - Requirements of Participation P&P Manual 2017

PREVENTION

BED INSPECTION POLICY: It is the policy of this facility to prevent entrapment and other safety hazards associated with resident bed rails, frames, and mattresses. The facility's leadership will be responsible for providing employees appropriate information, education, and training pertaining to entrapment and other safety hazards associated with resident bed rails, frames, and mattresses.

PROCEDURE

1. RESIDENT ASSESSMENT

The facility serves a diverse population, including those individuals who meet the criteria for skilled care under the Medicaid and Medicare guidelines, **(*identify any specialty units here such as short-term rehabilitation, post-acute care, dementia care, and long term care for chronic disease management)**. While the population is diverse, individual residents differ in their needs, preferences, and vulnerabilities.

- a. Before admission, prospective residents will be screened to help determine if care needs may necessitate specialized beds (e.g. bariatric equipment) or accessories (e.g. side rails).
- b. Upon admission, readmission or change of condition, residents will be screened to determine:
 - 1) Level of independence with bed mobility,
 - 2) Bed comfort level
 - 3) If the bed meets manufacturers recommendations and specifications pertaining to resident height and weight
 - 4) Assess the need for special equipment or accessories (e.g. side rails)
 - Assess the resident to identify appropriate alternative prior to installing bed rails
 - Assess the resident for risk of entrapment from bed rails prior to installation
 - Review the risk and benefits with resident and resident representative
 - Obtain informed consent

2. Equipment Management and Maintenance

- a. When installing or maintaining bedrails, the Maintenance department staff will follow the manufacturer's recommendations and specifications, or provide



References:

Medicare and Medicaid Programs; Reform of Requirements for Long-Term Care Facilities
10/04/16:

- <https://www.federalregister.gov/documents/2016/10/04/2016-23503/medicare-and-medicaid-programs-reform-of-requirements-for-long-term-care-facilities>

State Operations Manual Appendix PP – Guidance to Surveyors for Long-Term Care Facilities,
06/10/16:

- https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf

CMS S&C Letter 17-07-NH provides an Advanced Copy of Appendix PP and says it must be used for surveys occurring on and after November 28, 2016. The reference should be to that version, rather than the 6/10/16 version.

- <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/Survey-and-Cert-Letter-17-07.pdf>

U. S. Food and Drug Administration; Hospital Bed System Dimensional and Assessment
Guidance to Reduce Entrapment 3/10/06:

- <https://www.fda.gov/MedicalDevices/DeviceRegulationandGuidance/GuidanceDocuments/ucm072662.htm>
- <http://www.fda.gov/medicaldevices/productsandmedicalprocedures/generalhospitaldevicesandsupplies/hospitalbeds/default.htm>

This document is for general informational purposes only.

It does not represent legal advice nor relied upon as supporting documentation or advice with CMS or other regulatory entities.

© Pathway Health Services, Inc. – All Rights Reserved – Copy with Permission Only - Requirements of Participation P&P Manual 2017