

FACT SHEET - OFFICE OF THE SENIOR PRACTITIONER

Use of Bed Rails

Background

This information sheet aims to provide some assistance when considering whether there is a need to use bed rails in order to maintain the safety of a person with disability. It should be read in conjunction with DCS' *'Assistive Technology and Equipment in the Sleeping Environment'* policy (March 2018)

Bed rails were designed as a safety device and have been commonly and routinely used around Australia for many years. However they can also be a threat to a person's safety by them getting caught or trapped in spaces in or around the bed rail or in falling through attempts to climb over the bed rail.

What is a Bed Rail?

Adjustable metal or rigid plastic bars that are a feature of a bed or are added to a bed. They are available in a variety of types, shapes, and sizes ranging from full to one-half, one-quarter or one-eighth lengths. Other names include side rails, bed side rails and safety rails.

Disability service providers or funded private person need to consult with an Occupational Therapist (OT) and the Senior Practitioner if they believe there is a need to use a bed rail.

When would the use of a bed rail be a 'Restrictive Intervention'?

Bed rails are considered to be a 'personal restriction' under the Disability Services Act (2011) if their use results in the restriction in the freedom of movement of a person with disability.

Bed rails have more impact as a physical barrier or restriction for someone who has limited mobility. Other considerations that need to occur when deciding whether or not a bed rail is restrictive would be whether the person is affected by the visual or emotional impact of the bed rail.



What should I do if the bed rail is a Restrictive Intervention?

The use of a bed rail to restrict a person's voluntary movement is a form of physical restraint and the use of a bed rail for this purpose would need approval from the Guardianship and Administration Board (GAB) via an application to the Senior Practitioner.

If there is a risk to the person's safety and alternative strategies have failed to maintain their safety then a bed rail may remain as the least restrictive alternative available.

If the use of a bed rail is approved for use by the GAB staff must increase their monitoring of the person at risk.

When would the use of a bed rail not be a 'Restrictive Intervention'?

The use of a bed rail may not be deemed a personal restriction if:

- The person has decision making capacity and has requested bed rails
- The person has involuntary movements during the night (e.g. seizures or 'restless' sleep)
- The person does not have the skills to get out of bed without support.

The list above has only some examples of situations where an application to use a personal restriction may not be required. If a bed rail is being considered it is essential to consult with an OT and the Senior Practitioner.

If an OT and the Senior Practitioner recommend the use of a bed rail as the least restrictive option and it is not a personal restriction staff must still increase their monitoring of the person at risk.

Further Information

Further information about personal restrictions can be found at:

<https://www.communities.tas.gov.au/disability/office-of-the-senior-practitioner>

How do I contact the Tasmanian Senior Practitioner?

Telephone: (03) 6166 3567 Mobile: 0428 197 474

Email: seniorpractitionerdisability@communities.tas.gov.au

Web: www.communities.tas.gov.au/disability/office-of-the-senior-practitioner

Further information about Restrictive Interventions can be found on the Riset Tas link below.



Access practice resources and restrictive intervention information via Riset-TAS online: [Riset-Tas Link](#)

Please note: The information contained in this document is provided as an initial guide only. It is not intended to be and is not a substitute for legal advice. Service providers should seek their own independent legal advice with reference to the implementation of the legislation.