

# The Effect of Standardized QUIET TIME Implementation on a Postpartum Unit

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## BACKGROUND

- The time spent on an obstetrical unit following the birth of a baby is often highly charged with numerous emotions stemming from the birth experience itself, hormonal fluctuations, interactions with various care givers and adjusting to the role of parenting to name just a few.
- Studies done in other like settings have shown that a high level of noise can contribute to physiologic changes that reduce the degree of healing and recovery and therefore increase the length of stay.
- Sleep deprivation can lead to stress, anxiety and abnormalities in immune function and metabolism.
- Aside from the negative health effects our patient satisfaction survey gave evidence that patient experiences were being negatively affected by environmental noise level.

## PURPOSE

The purpose of this Performance Improvement Project was to improve the patient's experience by:

- Reducing the noise level in the environment
- Instituting a dedicated quiet time each day to be more conducive to rest and healing

## PI QUESTION

Will the implementation of a designated Quiet Time on the OB unit have a positive effect on the patient's experience related to Noise Level In and Around Room and Overall Rating of Experience during hospitalization

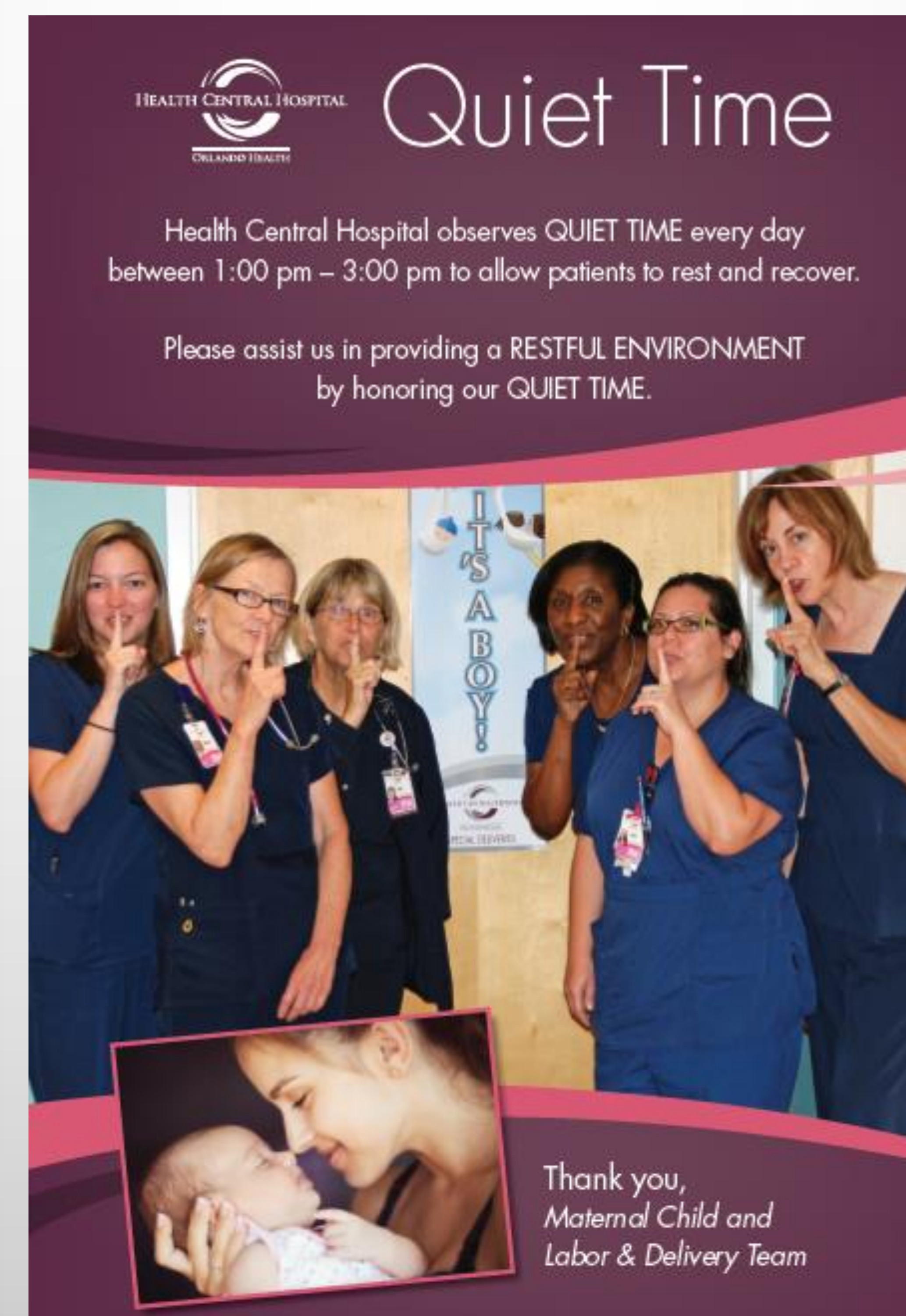
## EVIDENCE

Citation	Patient Group & Sample Size	Study Design	Outcome
Bochu, H & Morast, S (2009)	N = 210 patients admitted to a busy medical/surgical unit	Literature review of similar practice implementation. Prospective evaluation of data before and after implementation of Quiet Time	Implementation of an evidenced based practice of identifying a specific time of day as Quiet Time proved to be beneficial to both patients and nurses on the unit. Data showed an increase in patient satisfaction scores from the 39 <sup>th</sup> to 55 <sup>th</sup> percentile.

## PLANNING/IMPLEMENTATION

Due to opportunities identified on patient satisfaction surveys at the end of 2013, multiple suggestions were made by the Unit Practice Council (UPC), which bundled together, resulted in implementation of the following in October 2014:

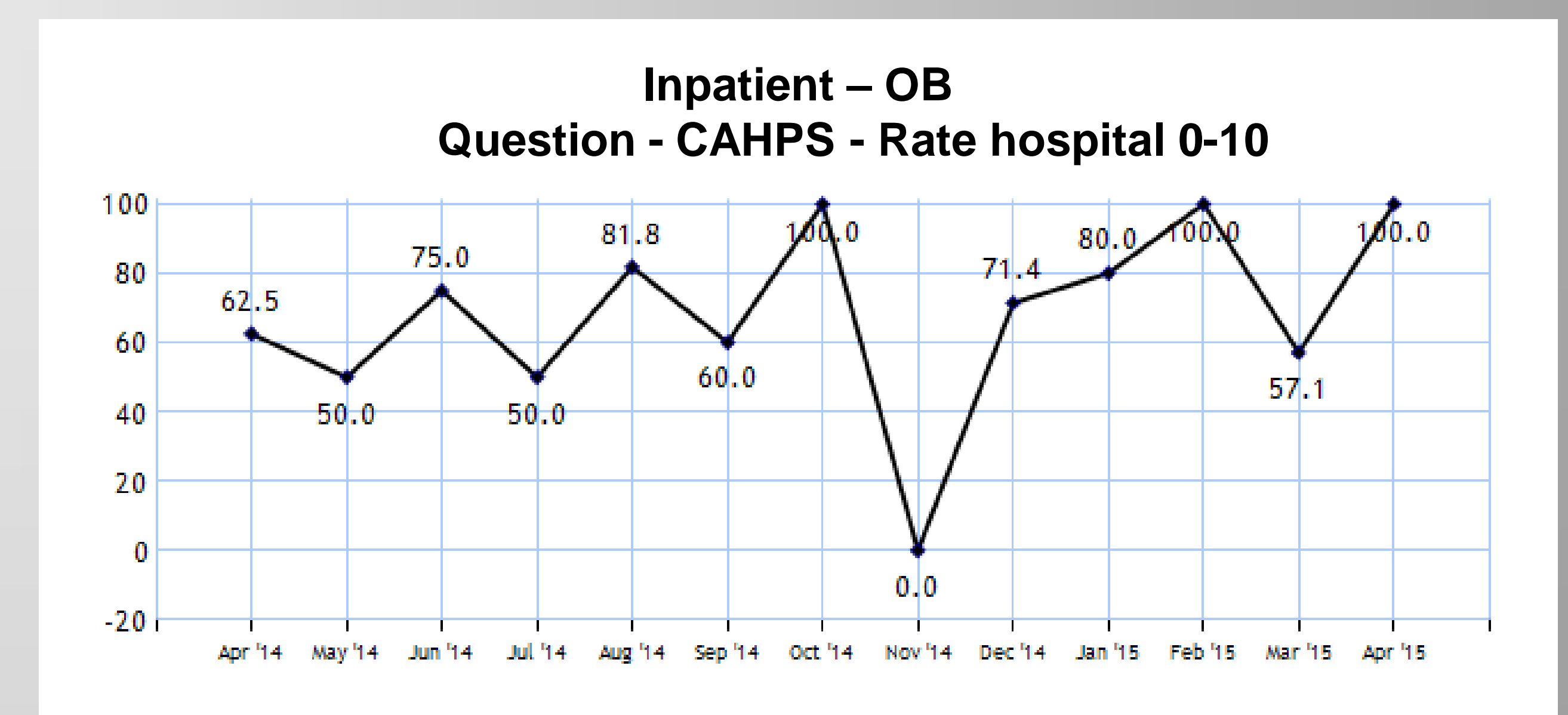
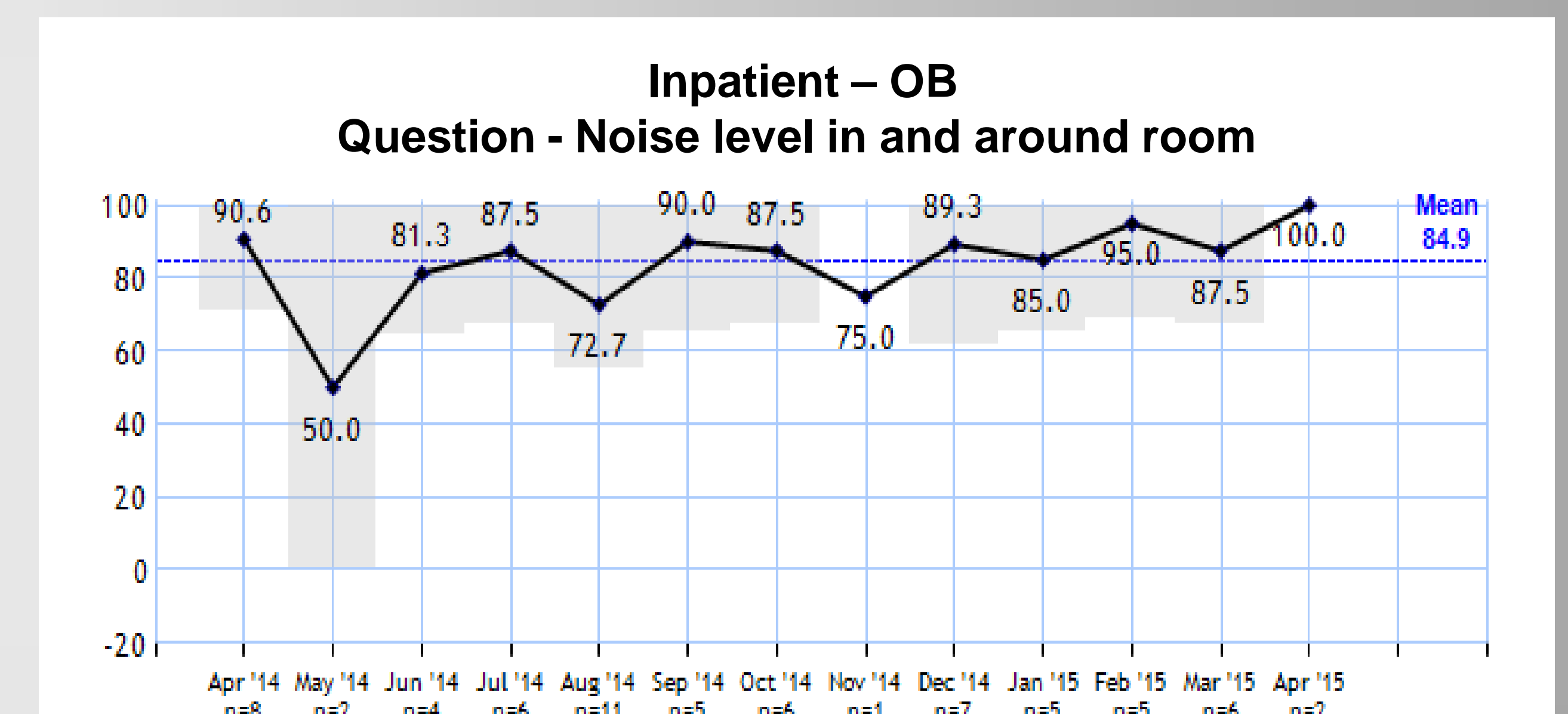
- An emphasis on "Rest for Healing" by designating an afternoon quiet period, called "Quiet Time" from 1-3pm
- Patient education on Quiet Time during admission and morning rounding
- Arrangements made with patients to ensure comfort prior to 1pm
- An option is provided to send the baby to the nursery for Quiet Time
- Dimmed lights in the hallway and nurse's station
- Posted signage at the department entry door to bring attention to the daily Quiet Time



## METHOD

Patient Satisfaction data on Noise Level In and Around Room and Overall Rating of Experience was extracted specific to the OB unit from May to October 2014 before implementation and October 2014 to February 2015 after implementation of the Quiet Time initiative

## RESULTS



## DISCUSSION

Team members were encouragingly supportive and engaged during the planning and implementation of Quiet Time. During this project, patient satisfaction scores for both Noise Level In and Around Room and Overall Rating of Experience improved. We are now challenged to hard wire the practice as a new culture for our setting.