From: Batten, Janene [janene.batten@yale.edu]

Sent: Thursday, July 05, 2018 4:52 PM

To: Walker, Cathleen

Subject: The Connecticut Nursing Research Alliance: Poster Acceptance

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July 5, 2018

Thank you for submitting your abstract to the Connecticut Nursing Research Alliance, 22nd Annual Evidence Based Practice Conference. The Abstract Review Committee reviewed your abstract and has accepted it for poster presentation.

Please read the following information and confirm your acceptance of this offer to present at the conference via e-mail by July 20, 2018 to <a href="mailto:ctnursingalliance@gmail.com">ctnursingalliance@gmail.com</a>

- 1. The conference will be held on Friday October 12, 2018 from 7:00 am 3:30pm at Hartford Hospital, Education Resource Center, 560 Hudson Street, Hartford, CT.
- 2. It will be necessary for you to register and pay for the conference. We cannot extend free registration to poster presenters. Registration information will be sent in early August with the finalized program flyer. Registration fee will include morning refreshments, lunch, CEUs.
- 3. Posters will be displayed on standing cork poster boards (70" x 45") and push pins will be provided for mounting posters. You will be assigned a poster number and location at the time of arrival. Poster set-up time is 6:30-7:00 am.
- 4. You must be available during poster viewing times for professional collaboration. Posters can be removed after 1:30pm at the earliest. Please plan to stay for poster awards, presented at the end of the day.
- 5. A pdf of your abstract will be provided on the conference website.

Thank you again for your submission. We look forward to your poster presentation at the conference!

Sincerely,

Cindy Bautista, PhD, APRN, FNCS Janene Batten, MLS

Co-Chairs, Connecticut Research Alliance Abstract Review Committee

NewHaven
Health
Greenwich

## **Effectiveness of Quiet Time on**

# Patient Perspective, Level of Decibels and Interruptions Pamela Lewis-Varon, RNC, BSN; Cathleen Walker, MA, RNC, IBCLC; Anna DiPaola, RN; Karen Stern, RN

Noeme Gaynor-Magracia, BSN CAPA; Terry Nicoladse, MSN RNC; Claire Carter, MSN, RNC, CDE: Healing Environment Council 2018



#### Objective

To decrease noise and interruptions in order to facilitate patient healing and rest, and increase patient satisfaction on the Maternity units during Quiet Time.

A review of literature was completed and supports the effects of Quiet Time in the hospital environment to promote patient healing and rest.

Methods

## Quiet Time Pilot (Maternity)

**Pre-Data:** Measurement of decibel levels, number of interruptions, and patient interest in Quiet Time

Intervention: Quiet Time education completed for patients and staff

Implementation: Quiet Time pilot was implemented for one month on Maternity and Telemetry. Interventions: Quiet Time signage, dimming lights, limiting interruptions, reducing noise levels and decreasing visitation.

**Post-Data:** Measurement of decibel levels, number of interruptions, and patient interest in Quiet Time



Quiet Time Healing in Progress

Decibel readings were taken prior to the intervention, during a pilot phase of the intervention, and following the intervention at four different locations. A repeated measures ANOVA was performed to examine the impact of the intervention at these different locations. On the maternity unit, mean decibel levels were unchanged throughout the study period outside maternity patient room 106, however fluctuated in the maternity hallway. Because there was no consistent trend in the data, the variability in the noise readings throughout the study period may be due to factors other than the intervention.



#### Discussion

ensure long lasting success of this project. multidisciplinary effort which is essential to infant bonding and limited interruptions. A surveys indicated overwhelming support for patient desire to have Quiet Time during their Pre implementation surveys showed a strong should be ongoing. Staff education and Quiet Time evaluation patients is a continuous, cooperative, Minimizing interruptions and noise level for fluctuation of acuity and level of patient care limitation to decibel data collection was the predominantly valued Quiet Time for rest, decibel result. Patients' comments Quiet Time in Maternity, despite the mixed hospitalization. Post implementation, patients' needed during periods of data collection.

# Implications for Yale New Haven Health System

Quiet Time has now been initiated within all Greenwich Hospital units. Implement of Quiet Time hours throughout YNHHS should be consider to promoting rest, healing and patient satisfaction based on literate review and positive patient perspective from this study.

### Patient Experience

The majority of Maternity patient's surveyed (92%) reported Quiet Time was beneficial.

"It was nice knowing that there was a designated time to just rest without any visitors or constant nurse check ins. I'm a fan of Quiet Time!"

"It's nice to have a time when other folks aren't on the floor. It promotes sleep and bonding with the baby."