

LESSONS LEARNED

Collaboration among all hospital staff is vital to the success of quiet time. By partnering with ancillary teams to determine the best hour for quiet time, we secured their cooperation and compliance with our new unit standard. Including the front-line staff in the planning of this intervention also helped to ensure their buy-in.

However, not all the physicians immediately cooperated. Some continued to conduct rounds during quiet time and made comments about how silly it was. To improve this, we now meet with new residents and physicians to educate them on this initiative, and it seems to help. For example, after we explained quiet time to one trauma surgeon who rarely has patients on the unit but had dropped in to see a patient during quiet time, he quietly obtained the chart, then waited until after quiet time to see the patient.

The nursing staff initially found it challenging to stay out of the patients' rooms during quiet time. They had to modify their work flow to comply with the quiet hour. But as the survey demonstrated, most of the nurses recognize the value of quiet time for their patients and themselves.

And as the patient satisfaction surveys show, quiet time hasn't eliminated concerns about noise on the unit. We continue to improve patient satisfaction

related to noise by making environmental changes and constantly reinforce the importance of quiet with staff and families. Overall, patient, family, and staff feedback has been positive. The noise levels are lower and patients are better able to rest during their stays. ▼

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Physicians Embrace TCAB, Too

Benefits include rapid-cycle testing by physicians and improved teamwork

As a hospitalist at Kaiser Roseville Medical Center in California, one of the three facilities selected for phase 1 of the Transforming Care at the Bedside (TCAB) initiative, Kurt Swartout, MD, has been involved in TCAB since its inception. He's also a member of the local team, which meets weekly.

Some of the local team's rapid-cycle testing involves physicians, and he helps to coordinate that. They have a staff of 50 physicians who work at the hospital. When the TCAB team has an idea that involves physicians, Swartout brings it to the hospitalist group and makes sure the test is implemented. Improved outcomes resulted in rapid buy-in from the physicians early in their TCAB experience.

Rapid-cycle testing had changed the culture at the hospital, making problems testing opportunities. Physicians as well as nurses are encouraged to develop ideas for rapid-cycle testing. This has changed the way they approach their jobs. They identify a problem, think of a possible solution, try it out on a small scale, and see if it works.

Swartout says they had good physician-nurse communication before, but TCAB has definitely improved communication and fostered teamwork. As a result, they have seen patient care improve.

For example, they now do bedside physician-nurse-patient and family rounding together. This has helped shorten the length of stay. One postoperative patient who had undergone a complicated bowel resection had been expected to be hospitalized for 10 days to two weeks. But with the nurses and physicians working closely together, the patient was discharged after only four days.

To improve communication, they now have white boards in every patient room throughout the hospital and its sister hospital, Kaiser Sacramento. This came about as a direct result of a rapid-cycle test of a physician's idea. They tested this first in one patient room, then rolled it out to the rest of the floor, then to the rest of the hospital, and then to the sister hospital. Physicians, nurses, and patients and their family members can write messages to each other on the white boards.

Swartout views health care as a team effort. Only through really good communication, he says, can the team deliver the best care. Because nurses are with patients far more than physicians are, Swartout and his team have enabled both nurses and physicians to provide better care.—Laurie Lewis, freelance medical writer, New York City ▼