QUIET CAMPAIGN

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Background Information: The Phase 1 PACU Department has 28 bays, separated only by curtains. It can be very loud at times. There are many identifying factors that increase the noise level. At times patients arrive from the OR screaming with emergence delirium, surgeons gather in the work area dictating and conversing with each other. The intercom is loud, phones are ringing; RN's can gather and have discussions; and families are allowed to visit. Without intention, the PACU can become a very loud place. The Press Ganey score for PACU phase 1 which addressed the noise level in Recovery Room dipped down to 71%; being ranked the lowest one month at 1 (April 2016).

Objectives of Project: The objective of the project was to have a more peaceful environment and a Press Ganey score that improved by 50% in ranking.

Process of Implementation:

- Step 1. Pictures of our children and dogs sleeping and making the "shh" sound (finger to mouth) were displayed around the room with reminders to keep the noise level down; patients were resting in the healing zone.
- Step 2. A stop light was displayed in the work zone that changed from green to yellow to red when the noise level increased. It would announce "be quiet please" when in the red zone.
- Step 3. 4-6 bays at one end of the room were reserved for the In-Patient Holding (IPH) patients. The patients dedicated to the In-Patient Holding (IPH) were taken to the Same Day Surgery (SDS) department pre op. That area was then used to "spread out" the phase 1 patients in the PACU room. This allowed more space between patients.
- Step 4. When patients commented on how quiet the room was, we were scripted to say "we work hard to have you recover in a peaceful, calming environment and we are pleased that you noticed. Please remember that on your survey".
- Step 5. The code word "bunco" was used by an employee to go up to another group of employees who were being too loud.
- Step 6. A small bowl of treats were placed by two dictation booths that were not in the center work lane to encourage the surgeons to dictate there.
- Step 7. The computer program was updated to allow the OR to put in a transfer to PACU. The Clinical Resource Nurse (CRN) of the PACU could then assign the patient a bay. The OR no longer needed to call the CRN.

Statement of Successful Practice: The Press Ganey score increased to 92.1%, ranking 99 on the question regarding the quiet atmosphere in the Phase 1 PACU area (Aug, 2016).

Implications for Advancing the Practice of Perianesthesia Nursing: A restful, quiet environment is calming and conducive to healing as a patient awakens to anesthesia. This can reduce pain and anxiety.