



Case Study: Decreasing Noise on 5 South

How a hospital quickly addressed patient complaints about noise with Ovid® Synthesis Clinical Evidence Manager

The Challenge



**Ovid® Synthesis
Clinical Evidence
Manager offers a
single, cohesive view
of projects across
the institution.**

The hospital's 5 South unit had a problem: its Press Ganey scores for patient satisfaction related to noise on the unit were at the 20th percentile. This was not surprising, as the Continuous Quality Improvement (CQI) committee had been carefully tracking patient complaints and Press Ganey scores during the past year. At the same time, the hospital recognized the importance of sleep and rest to healing and overall health. So, deciding to prioritize improved patient rest, it focused first on its night shift. Nurses had observed that patients who should have been sleeping were not, and wanted to improve that situation.

The hospital decided to undertake a QI project to understand the sources of noise on 5 South, examine the evidence-based practices that could be implemented to decrease the noise, and execute interventions aimed at reaching 80th percentile or higher scores for patient satisfaction with noise.

The QI team needed to describe what was known about the problem as precisely as possible and accurately frame the questions to be answered. Some of the multidisciplinary team members were new to the hospital, while others were seasoned veterans. They needed a platform that allowed and encouraged all of them to engage in the project, and an efficient way to communicate throughout the process.

The team was looking for a solution that would eliminate silos of information from the QI project. It also wanted to rapidly identify and review the most appropriate and clinically robust articles about hospital noise at night...and present compelling evidence that would lead to change.

The Solution: Ovid® Synthesis Clinical Evidence Manager

The QI team selected a workflow management solution called Ovid® Synthesis Clinical Evidence Manager because it leveled the playing field for all team members. It reduced the manual effort associated with previous QI projects, giving both experienced and novice participants more time for the thoughtful components of the process.

Ovid® Synthesis Clinical Evidence Manager guided the team to pose these EBP questions:

- For patients on 5 South, what interventions decrease noise and increase quality of patient-report sleep?
- Compared to the current environment, will patient satisfaction related to noise on the unit improve to the 80th percentile or higher by Q4 of 2020?

The templates let them enter background information, such as the fact that the unit already promotes sleep by darkening rooms as much as possible and only awakens patients when needed to do assessments or provide ordered medication. Now the solution would lead them through the process of understanding what other interventions and evidence-based practice would help reduce noise and increase sleep quality.

The tool's intuitive search interface gave the team members access to full-text articles, with AI-driven filters quickly narrowing the results. The literature review phase revealed one article showing that sound was highest during the first four hours of a shift, while the room temperature and light were conducive to sleep. A systematic review of four other studies, which looked at administering melatonin to ICU patients, determined that the studies were low quality and didn't prove that the practice improved the quantity and quality of sleep.

The Results

Ovid® Synthesis Clinical Evidence Manager automated the assembly of the QI team's key project outputs, including an evidence table and summary of findings, namely:

- Light intensity and temperature were not a problem for sleep quantity and quality.
- There was a general problem with nighttime noise interrupting both quality and quantity of patient sleep.
- There was no evidence that melatonin promoted sleep.
- Interventions to foster improved sleep included:
 1. Looking for opportunities to bundle care, reducing interruptions.
 2. Anticipating the need for pain medications and offering them prior to sleep.
 3. Dampening environmental noise with the use of earplugs.

The solution included sample forms to help the team build the case for implementation, which was deemed a priority. **It helped reveal that there was sufficient evidence that 1) there is significant environmental noise on units during the night shift, 2) that staff needed to identify and implement changes to decrease environmental noise, e.g., eliminate loud conversations, close patient doors, and 3) earplugs for patients may help reduce the disruption of environmental noise.**

Thanks to the well-organized research and reporting driven by Ovid® Synthesis Clinical Evidence Manager, the QI team was also able to recommend actions that might overcome any barriers to moving its initiative forward:

- Work with the purchasing department to identify earplugs for purchase and stocking on the unit, assessing cost and budget.
- Give night-shift nurse time from schedule to gather noise data and improve planning.
- Determine if someone in the system has focused on noise reduction to assist with expert advice and counsel.

About Ovid® Synthesis Clinical Evidence Manager

Ovid® Synthesis Clinical Evidence Manager is the only solution offering a single, cohesive view of projects across the institution. Managing project workflows and making literature searches and appraisals for QI, EBP, and research projects more efficient ensures that your clinical practice improvements are high quality and based on the latest research insights.

Wolters Kluwer's Customer Engagement Team is fully available for personalized and customized support for any implementation, training requirement, or other need that you may have.

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