

It's All in a Better Night's Sleep

Thanks to AACN Clinical Scene Investigator Academy projects, more undisturbed sleep for ICU patients.

Studies have shown that disturbed sleep often leads to slower healing, greater need for pain medications/sedatives, delirium, prolonged ICU stays and — in some cases — higher mortality.

Three hospitals participating in AACN Clinical Scene Investigator (CSI) Academy, a nurse leadership and innovation training program, explored how to reduce sleep disturbance among ICU patients.

With “HUSH: Helping Understand Sleep Heals,” Philadelphia-area Lehigh Valley Hospital-Muhlenberg Campus aimed to reduce patients' time in the medical ICU (MICU) and increase patient and staff satisfaction by decreasing controllable alarms and managing other disruptions. They introduced unit quiet times from 1 to 4 a.m. and 2 to 4 p.m., adjusted alarm parameters for better management and increased staff understanding of how restorative sleep and healing are linked.

As a result, MICU length of stay decreased 0.74 day, contributing to anticipated annual hospital savings of more than \$5 million, and patients appreciate the increased sleep.



These results mirror what Baystate Medical Center in central Massachusetts achieved with “Don't Get Delirious, Take Sleep Serious: Reducing Delirium in the ICU,” which aimed to decrease delirium by promoting sleep and increasing collaboration.

Baystate's interdisciplinary team raised awareness about sleep and delirium with “Sleepless in the ICU,” a witty “horror film” video about the plight of a patient with apparent delirium caused in part by lack of sleep.

The Baystate CSI team also educated colleagues about delirium and sleep facts, introduced them to the THINK mnemonic and emphasized clinical practice guidelines for managing pain, agitation and delirium. Baystate reduced CAM-ICU positive scores by 5 percent among MICU patients. This result meant fewer days of delirium and anticipated annual hospital savings of \$860,895.

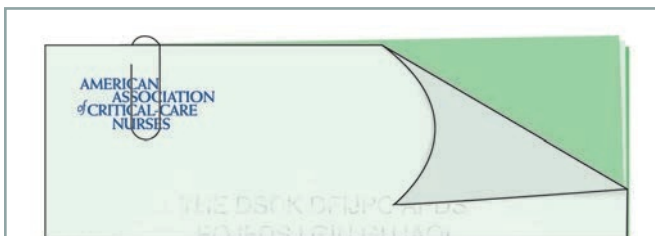
Seton Medical Center in Williamson, Texas, created “The Noise Pollution Solution,” to study if patient satisfaction increased with less excessive nighttime noise. Educational in-services focused on factors that increase ICU noise. Hydraulics were slowed to prevent door slamming. New door signs read, “Shhhh ... healing in progress,” and patients were offered sleep-promoting devices, such as earplugs, eye masks, white-noise machines and fans.

The Seton project decreased measurable unit noise by as much as 22 percent — a result the team believes will translate into increased patient satisfaction.

Learn more about these and other nurse-driven initiatives in the CSI Academy Innovation Database, at www.aacn.org/csi.

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AACN Advocates for Health Policy Issues

A large part of AACN's advocacy for a wide spectrum of healthcare and nursing issues is accomplished by lending our community's bold voice to the Nursing Community, a coalition of 61 national nursing organizations representing 1 million nurses. During the fiscal year ending June 30, 2014, we endorsed a dozen Nursing Community letters. See the letters at www.thenursingcommunity.org > Members > American Association of Critical-Care Nurses. We also awarded 16 members full scholarships for the annual Nurse in Washington Internship (NIWI). Find information about NIWI scholarships at www.aacn.scholarships/niwi.