

Quiet at Night

“ During this hospital stay, how often was the area around your room quiet at night? ”

COMMUNICATION

During Admission Rounding

“So we can provide the best care to all of our patients, you may hear noises in the hospital at night that we cannot avoid. We will make every effort to be quiet and help you rest.” [Share things you do]

During Patient Rounding

“Tell me how we did last night to help you rest. Was our unit quiet enough for you to get a good night’s sleep?” [Reiterate commitment to a quiet, restful environment]

During Discharge Rounding

“One of our goals is to help all of our patients rest, both during the day and especially at night. Can you tell us how well we did to help you rest during your stay?”

PROCESS

Integrate Quiet into Patient Care Touchpoints

- Integrate ongoing conversations about Quiet at Night into Bedside Shift Report (AM to check on last night and PM to remind patient of efforts to minimize noise and prioritize their rest)
- Incorporate patient feedback into Nurse Leader Rounds to validate patients on the unit are able to experience quiet at night. Create staff celebrations to recognize improvement and goal achievement

Create hospital-wide Quiet Standards

- Discourage late night lab tests and other nighttime procedures that can be delayed until daytime hours. If tests are required, bundle nighttime events as much as possible to minimize disruptions to sleep (e.g., IV changes, vital signs, lab draws)
- Team members should hold all conversations at an arm’s length (no raised voices)
- Dim lights during nighttime hours to visually cue staff, patients, and visitors to reduce noise levels
- Create restful night kits with essential items to reduce noise for patients, such as ear plugs and eye masks



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RESPONSES: ALWAYS, USUALLY, SOMETIMES, NEVER

CULTURE

Building a culture of quiet is highly reliant on effective processes but without buy-in from frontline team members those process will fall flat each time.

So how do you build that buy-in? Share the importance of restful sleep in the healing process. Noise (especially at night) is highly disruptive for patients and can cause significant distress. Many studies have established the integral connection between sleep and healing. Disrupted sleep patterns have been linked to immune system dysfunction, reduced resistance to inflammation and infection, and slower wound healing.* These adverse reactions to reduced rest can in turn increase length of hospital stays and readmission rates.

It is important to remember that the patient’s primary point of reference for quiet at night is their home. Challenge team members to listen to the surrounding noises and ask themselves if they could rest in this environment. Empower frontline staff to speak up on issues they see and hear about and offer comprehensive solutions.

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* Friese R, Diaz-Arrastia R, McBride D, Frankel H, and Gentilello L. Quantity and quality of sleep in the surgical intensive care unit: are our patients sleeping? Journal of Trauma-Injury Infection & Critical Care 2007; 63(6):1210-1214.



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Patient Perspective:

Our Perspective:

At Admission

During Stay/Rounding

At Discharge

Create a Profound Memorable Experience



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USE THE BELOW WORKSHEET TO CREATE YOUR OWN CARES PROCESS MEASURES AND COMMUNICATION METHODS

PROCESS

COMMUNICATION

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Confidence

a

Anticipate Needs

r

Respectful
Communication

e

Engage in Care and
Process

s

Say Thanks /
Safe Transition



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Empathy-based, high reliability set of behaviors designed to impact:



We understand that experiences are shaped by more than the words spoken and actions taken. Real encounters are complex and interactive, requiring planning and practice to achieve the best experience for both caregivers and their patients.

While healthcare began with scripted messages and moved to planned conversations, we now know that achieving safety, quality, and experience goals requires a comprehensive approach to providing care. That method must include not only how to deliver a message but also an understanding of the components for ensuring it is received.

CARES™ is a training tool designed to equip every team member in a healthcare organization with a common understanding and set of behaviors to deliver an exceptional patient experience. With a simple yet effective framework, CARES helps you to create an environment for delivering highly reliable patient experiences of care. CARES bundles best practices demonstrated to support the patient experience so that your participants are instructed in the Master Competency rather than in multiple, discrete initiatives. Whether you are concerned with realizing your vision or with applying a consistent approach across the organization, CARES offers both a cultural way of being and a robust, repeatable practice.

Ways to adopt **cares**

- **Through** onsite coaching, Train-the-Trainer, Virtual training with or without onsite coaching
- **Delivered to** Clinical Staff, Non-Clinical Staff, Providers
- **Settings** Acute, Emergency Department, Ambulatory Care

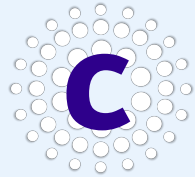


Not just another acronym



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Confidence

When caregivers are more confident in the experience they are providing, patients perceive a better experience. Similarly, when we build patient confidence, they are more likely to ask relevant questions and participate in their care.

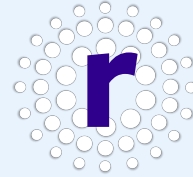
- **Can be built or destroyed in 7 seconds**
- **Not a conscious decision**
- **Highly influenced by non verbal communication**



Anticipate Needs

With every encounter, caregivers have the opportunity to “walk in the slippers” of their patients. This approach means we have the empathy to ask about patients’ needs and address both clinical and emotional components.

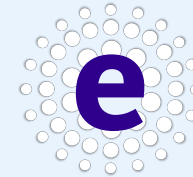
- **Ask yourself “What would I want/need if I were this person?”**
- **What are their clinical and emotional needs?**
- **What is their level of health literacy?**



Respectful Communication

93% of communication is received through tone of voice and body language. We understand communications skills and can either teach those skills or support your organization with acceleration of your preferred approach (e.g., AIDET, HEART).

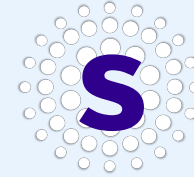
- **Kind, compassionate words**
- **Develop words and phrases to help communication**
- **Pay attention to how you look and sound**



Engage in Care and Process

Engaging in care and process is highly interactive, and listening is a crucial component. Helping caregivers learn to narrate processes and explain the “why” enables them to provide care more effectively.

- **Narrate care or process**
- **Listen well and answer questions**
- **Set expectations early and often**
- **Validate; have them teach back**
- **The more patients are engaged, the more they remember and become partners in care**



Say Thanks / Safe Transition

We must remember that working with people in their most vulnerable times is a privilege. Sharing our gratitude or helping patients to the next stop in their journey lets them know we value and honor them.

- **Show gratitude; encourage referrals and reviews**
- **Hand off to the next person by introducing the patient and managing up staff**

ALL FROM A POINT OF EMPATHY