

# The Quiet Revolution

# 2

*Quiet at Night*

## HCAHPS Breakthrough Series

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NORTH CAROLINA ASSOCIATION FOR  
HEALTHCARE QUALITY







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Creating a 5 Star Culture of Healing Kindness



## OUR PASSION

Creating Patient Relationship Experts



## OUR VISION

Kindness Care Everywhere



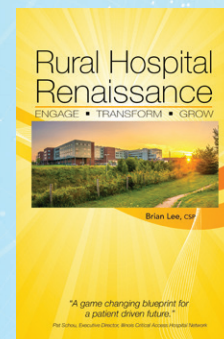
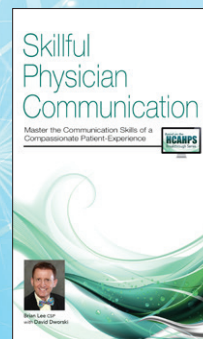
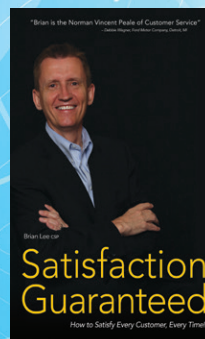
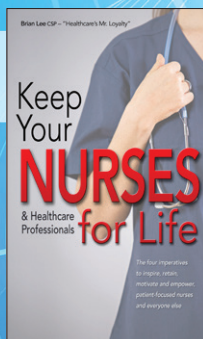
Kindness Care Everywhere

## Brian Lee CSP

Healthcare's Engagement Expert



- Founded Custom Learning Systems Group Ltd., 1984
- Author of 8 books and 68 Audio/Video programs
- #1-Rated Customer Service Speaker in the world - 2 years (International Customer Service Association)



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# The Quiet Revolution™

HCAHPS Quiet at Night

*To create a restful healing environment that patients perceive to be “Quiet”*

## Question:

Any idea what it’s really like to try and sleep in a hospital room?

## Leadership by Walking Around

*“50% of workforce satisfaction comes from employees relating with their boss.”*

- Beverly Kay, *Love ‘em or Lose ‘em*

## Communication

*“To prevent your people’s mood from turning blue, give them a chance to let you know what they do.”*

- Brian Lee, CSP

## Recommendation

L. \_\_\_\_\_ B. \_\_\_\_\_ W. \_\_\_\_\_ A. \_\_\_\_\_

Or you could call it; **“Daily Leader Caregiver Rounding”**

## The Rounding Two-Step

### Step #1:

Check in personally

### Step #2:

Check in professionally

## The Goals of Intentional Leadership:

1. Your people feel listened to
2. You are supporting them to serve their patients

## By the way, if you are on the frontline...

*“You may not be a manager, but you are an informal leader!”*

## Quiet Questions and Why they Matter

### Question:

What’s your day like when your energy is low because you didn’t sleep well the night before?

## HCAHPS Domain – Quiet at Night

### Survey Question:

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

## Quiet at Night Domain Owners:

CEO, CNO, Chief Plant Engineer, all Nurse Managers, Supervising Nurses, RNs, CNAs, Housekeepers, Dietary, and everyone who passes by or enters the patient’s room

## Current National Threshold (combined with *Clean*) is:

(Rated a 4 – “Always”/50<sup>th</sup> Percentile)

**62%**

What’s Yours? \_\_\_\_\_ %



## Top 10 Reasons Why Quiet Is Important

A noisy environment can cause:

1. Sleep disturbance and disruption
2. Decreased oxygen saturation
3. Elevated blood pressure
4. Increased heart and respiratory rates
5. Negative impact on wound healing
6. Lower pain thresholds
7. Need for additional medications
8. Increased stress
9. Communication challenges
10. Negative impact on HCAHPS and Patient Experience scores

## HCAHPS Alert!

- Quiet at night is the lowest-rated domain for a reason...
- Because hospitals are busy places, even through the night-time hours
- That why we teach “Quiet” skills

## Managing Noise Expectations

### Question:

Are you curious why so many hospitals all over America struggle with their “Quiet at Night” scores?

### Traditional Approach to Quiet

- Step #1: Fix Needless Mechanical Noises
- Step #2: Start a “Hush” Campaign
- Step #3: Manage Expectations

### Here’s the Reality

Most staff don’t understand... The only reference a patient has for “*Quiet at Night*” is the **solitude of their bedroom at home**.

**Staff need to re-define ‘quiet’ in the hospital setting as “sounds of care”.**

### Recommendations:

Manage Expectations about “Quiet”

- Explain that we do everything possible to ensure a quiet environment – and yet we must work all night tending to others
- Suggest to patients they judge the night sounds they hear as “sounds of care”

### Staff need to share appreciative definitions of “Quiet”:

- Help patients relate to ‘quiet’ in terms of rest and well-being, not as extraneous noise.
- Educate patients that the sounds they hear are due to *the efficient delivery of care in our hospital at all hours*.

### To Summarize:

When it comes to “Quiet” it’s as important to manage expectations about noise as it is to reduce noise





## Tools, Equipment and Resources

### Tasteful Visual Reminders:

Signs, placards and other devices to remind staff to be aware of noise levels.



Example: Yacker Tracker

The Electronic “Ear”: A wall device that changes color (moving to deep red) in reaction to rising decibel levels.

### The Key – Collaborate with Maintenance and Engineering!

- *Your most important resource: since the majority of hospital noise comes from mechanical sources, your ability to enlist the cooperation of your facility’s Engineers and Maintenance staff is crucial.*

### Attack the Noise Offenders:

- Create a **list of the major mechanical noise-offenders** on your floor, and join maintenance in a plan to fix them, in an orderly fashion

Examples of ‘Sound Fixers’ by Engineers:

- **IV pumps** rigged so alarms **ring in nurse’s station**, not in room
- **Rubber bumpers** placed on cabinets reduced noise on closing
- **Metal wheels** on carts changed to **soft rubber**

Examples of ‘Sound Fixers’

- Find ways to reduce **trays ‘rattling’** in dietary carts.
- **High traffic doors checked** for noise; bumpers installed.
- **Removal of outdoor trash compactors** and bins to other locations reduced noise impact on patients.
- **Lowered ring tones on Call Bell System**, lowered noise at night
- Introduce a ‘**Noise Hotline**’ so patients can report in
- **Lower ring tones** on ‘walkies’
- **Close patient doors when vacuuming**, waxing hallways, or using other noisy equipment

Create a never ending “Job-Jar” of Noise Offenders – to Ensure Continuous Quiet Improvement

*“Learn one idea every day, to make things quiet in a better way.”*

- Brian Lee, CSP



## Quiet Sentence Starters

### A “Sentence Starter” Is...

An easy way to communicate important information to your patients in a positive way they better understand and accept

### Some health care professionals refer to sentence starters as:

- Key Words at Key Times
- Conversation Starters
- Empathizers
- Talking Points

### Question:

- Are you looking for a proven way to manage your patients’ expectations about noise?
- We call them “sentence starters”

### Your Rest is Our Priority:

*“We are making every effort to perform these activities with the minimum amount of noise.”*

### Our Goal is to always provide you with the **most restful environment possible**.

*“I know you are used to **the quiet solitude of sleeping in your own home** – but the hospital is a little different.”*

### Managing Expectations at Admission:

*“Because we work to provide excellent care for patients **at all hours**, you may hear us **moving a patient through the halls**, or hear us **working at the nurse’s desk**...”*

### Managing Expectations around Interruptions:

*“We work very hard to **minimize all noise** so our patients can rest. I will need to **wake you up at 11:00 pm** to check your vitals, but I’ll do my best to **minimize interruptions** to your sleep...”*

### Managing Expectations at Bedtime:

*“I’m placing your **remote control for your television and call bell right here**, within easy reach, so you can be comfortable.”*

*“I’m going to **dim your lights** now, and close your door so you can rest.”*

### You can tell patients...

*“If you are unsettled by sounds you hear, please let us know – and we’ll do all we can to provide the quiet you need...”*



## Quiet Healing Time

Florence Nightingale got it right when she said, *“Unnecessary noise is that which hurts a patient.”*

### Recommendations:

Lower-your-voice-non-verbal-sign

Establish an agreed-upon non-verbal signal that send the message from one associate to another, “Please lower your voice”.

### Set Rest & Evening Quiet Times

- Lower the lights on the floor at 9:00pm. This declares the end of Visiting Hours and the beginning of Evening Quiet.
- Establish a Rest Period each afternoon, when hall lights are lowered, and a special effort is made to allow patients to nap.
- On OB units it’s called time to “Snuggle and Snooze.”

### Quiet Down at Shift Change

Surveys show maximum decibel level is recorded during shift change. Make every effort to reduce human noise at that time.

## The Engagement Imperative

### Everything is Possible!

What could you achieve if your team actually knew **what to do**, and **wanted to do it**?

**Start a Quiet Revolution at your Hospital!**

### Ask Your CEO...

To issue an empowering “License to Silence”

### License to Silence...

*“No blame for being a Revolutionary for Quiet!”*

### You have a license to:

- Speak softer
- Walk more gently
- Be more conscious of vocal communication
- Close doors more carefully
- Answer phones less loudly
- Push carts less squeak-ily
- Ask mechanical floor waxers when ***not*** to wax – because a patient is resting
- Fix clanging and banging things yourself
- Ask someone’s help if you can’t or don’t know how, or don’t have time
- Use raised eyebrows, or a gesture with your lips, or a tug on your ear lobe to remind team mates to quiet down





### Will you take responsibility...

- To use the “Quiet” ideas just suggested
- Be creative and add your own
- Use your good influence to get a colleague to join you in the Quiet Revolution

## “Quiet = Healing”

- Brian Lee

### The Accountability First Step:

Who Will do What by When & How?

What’s the BEST idea you’ve heard on this webinar?

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

How soon will you put it/them to use?

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## Team DO IT Plan

- ☐ 1. **Post-Webinar Rapid Action Team** Schedule a "Quiet Revolution" Rapid - Action Meeting of fellow "Domain Owners," to adopt a "Quiet DO IT Plan".
- ☐ 2. **Who's Missing...** Conduct a quick review of key formal and informal leaders who would benefit from the HCAHPS Breakthrough Webinar Series, but have not yet registered. Email: [webinars@customlearning.com](mailto:webinars@customlearning.com) and request a registration link.
- ☐ 3. Make **Daily Leader Intentional Rounding** job #1 at the beginning of your shift. Don't forget evening and nighttime shifts.
- ☐ 4. Appoint a "**Quiet Revolution**" Education Task Force to:
  - Draft a set of "Sentence Starters" that address ways to manage patient expectations for a quiet healing environment.
  - Consult with a broad range of staffers to improve, edit, and adopt these "Words that Work."
  - Train staff on this "Language for Quiet" in a 30 minute workshop (or incorporate into a 3 hour HCAHPS Patient Experience" seminar).
- ☐ 5. Agree upon a continuous "**Noise Alert System**" for monitoring noise and install (ie: Yacker Tracker).
- ☐ 6. Challenge maintenance/engineering management to meet with Nursing Unit Managers to implement a "**Never-ending Noise Offenders Job Jar**" system, to monitor, reduce, and eliminate needless offending mechanical sounds.
- ☐ 7. Request the CEO issue a "**License-to-Silence**" empowerment card to everyone, that "assigns the bearer the authority to take immediate action to minimize or eliminate needless clanging, banging, humming, thrumming, ringing, pinging, clapping or popping noises---anything that prevents patient rest and recovery."
- ☐ 8. "**Quiet at Night**" - **Featured Implementation Tool** Download your free copy of Brian Lee's e-book "**Satisfaction Guaranteed.**"
- ☐ 9. **Act with Urgency** – Remember, 93% of what you learn is forgotten within 14 days. Use it, or Lose it!
- ☐ 10. If you are struggling with education, engagement or implementation, be sure to schedule a **Free 1 hour Coaching Call** with webinar series authors Brian or David by contacting us at 800-667-7325, or emailing [webinars@customlearning.com](mailto:webinars@customlearning.com).

# Tools & Resources

To support your team to achieve its HCAHPS performance improvement goals, we are pleased to offer these value added Educational Resources and Implementation Tools. For more information give us a call at 800-667-7325 x2202, or email [webinars@customlearning.com](mailto:webinars@customlearning.com).

Tools

- ☐ **Thirty Minute Coaching Call** *(Complimentary)*  
Problem solve & overcome barriers with this powerful value added Webinar Series benefit.
- ☐ **Brian Lee, CSP, HoF, Live Stream Keynote Presentation**
  - Magic of Engagement™ (90 minutes)
  - How to Win Back Every Single Patient™ (60 minutes)
  - How to Inspire Caregiver Heroes Everyday™ (60 minutes)
  - Reignite Your Community Reputation™ (60 minutes)
- ☐ **Ignite the Patient Experience™** (Administrative fees only)  
A comprehensive 2 day Service Engagement and dynamic 4 hour HCAHPS Leadership Seminar
- ☐ **The Everyone's a Caregiver® App**  
A time-sensitive web-based learning tool to educate and empower everyone in your hospital, and improve patient satisfaction scores.
  - HCAHPS based Patient Experience Skills for Everyone™
  - Relationship based HCAHPS Skills for Nurses™
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- ☐ **HealthCare Service Excellence Conference** - [HealthCareServiceExcellenceConference.com](http://HealthCareServiceExcellenceConference.com)
  - HealthCare Service Excellence Live Stream Summit
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    - Includes the Annual CAHPS Symposium

# Frequently Asked Questions (and Answers)

**1. How do I register?**

You need a personal invitation email to register. Anyone who is registered can invite you! See question 7.

**2. How do I log-in?**

If you have already registered for the series, please go to: [webinars.customlearning.com](http://webinars.customlearning.com) and you will see the login field. Login using your email address and the password you previously created. If you have forgotten your password please click *'I forgot my password'* and you will receive an email from us asking you to reset your password.

If you have additional challenges logging into the webinar please contact [webinars@customlearning.com](mailto:webinars@customlearning.com) or 1.800.667.7325 x2202

**3. I don't know my Sponsor Code, so what do I put in the field?**

Your Sponsor Code is pre-populated after you register from the link in your emailed invitation.

**4. It is the day before a webinar and I have not received the Learning Guide. How do I get it?**

We will be sending out a reminder email with a link to download your Learning Guide 24 hours prior to each webinar. The email will come from *HCAHPS - Custom Learning Systems*. Please check your Spam/Junk mail to see if the email has landed there. If you still have not received the email, be sure that you have registered, go to the appropriate webinar and download by clicking the *Access Learning Guide* link. We will be adding the new Learning Guide 24 hours in advance of each webinar.

**5. Can I get CEUs from the HCAHPS Breakthrough Webinar Series?**

Unfortunately, we do not issue CEUs for this webinar series. You can contact your governing organization to see if they are able to issue them for you.

**6. I'm going to be late for the webinar or miss it entirely, can I still watch it? How long do I have to watch it?**

Yes, you can begin the webinar any time after it airs at its set time. We don't want you to miss it, so if you join late it will take you right to the beginning as we are recording it for the archive file. If the entire webinar has passed, you can log-in to your account and access it anytime. You will have access to the webinar series for 1 year from the date the webinar originally aired.

**7. How do I add/invite others to the watch the webinar series?**

Once you are logged in, on the top right side of the screen, click the *Invite Others* button. Enter their email address, click *add email*, then click *Send Invitations Now*. They will receive an email invitation to register for the webinar series.

**8. How do I access the tools mentioned in the webinar including the certificate?**

In order to access the tools you will need to complete the evaluation form in one of two ways:

The first way is electronically. Once the webinar has finished, you will be re-directed to a website.

After you complete your evaluation, there is a link that you can click to access all of the tools, including the certificate.

The second way to access the tools is to complete the paper copy of the evaluation form, and fax or email it to our office.

**Fax: 403-228-6776 or email [webinars@customlearning.com](mailto:webinars@customlearning.com)**

Our office will be in contact with you via email with the link to the tools.

**9. Is there a phone number for me to call in to hear the webinar?**

No. There is no phone number or conference line for you to call. You will need speakers on your computer.

If the video is playing, you should also be hearing the audio since they are part of the same stream.

**If you have no sound, double check the basics:**

- 1 Make sure you have speakers
- 2 Verify that the speakers are plugged in
- 3 Make sure the speakers are not "muted"
- 4 Make certain the volume of the speakers is turned up
- 5 Check to see if the speakers are working in another application.
- 6 If your audio is not working in any other application, try restarting the system before turning to your computer manufacturers' support
- 7 Some sound cards are only able to play audio from one source at a time, so make sure no other applications are using your sound card/speakers

For additional sound issues, please contact your institution's technical support team.



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We **totally employ** about # \_\_\_\_\_ full and part time staff, at \_\_\_\_\_ facilities.

1. **For me, the most valuable idea I learned and intend to use is:** \_\_\_\_\_

\_\_\_\_\_

2. **What I would tell others about the quality of the speakers and value of the content:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ O.K. to quote me: YES NO

3. **Presentation improvements I would suggest:** \_\_\_\_\_

\_\_\_\_\_

4. **On a scale of 1 - 5, this presentation:** (Met My Expectations) 5 4 3 2 1 (Did Not)

5. **Featured Implementation Tool:**

Yes A. Free Copy of Brian Lee's e-Book, **"Satisfaction Guaranteed"**

Yes B. Interested in Scheduling Our **Team Coaching Call**

6. **P.S. – My Best Tip:** \_\_\_\_\_

\_\_\_\_\_ ☐ More on Reverse

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