SHH...It is now *Quiet Time*, at the Hospital...

Hospital Quality Institute
Patient Safety First
Visalia, California
PRESENTERS
Sutter Delta Medical Center – A Sutter Health Affiliate

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Acknowledgement

- Thank you Hospital Quality Institute
- All of you Health Care Professionals
1. Define Quiet Time
2. Understand significance of Quiet Time
3. Encourage Quiet Time at your facility
4. Utilize at least 3 strategies that improve Quiet Time at your hospital
5. Develop an Educational Plan that utilizes one of the TeamSTEPPS methods
Sutter DELTA Medical Center
Sutter Delta Medical Center

- Background of hospital
- Community
- Physical layout
- Different Nursing Departments
- Specialty Departments
- Culture
- Mission
- Vision
- Values
- Pillars
- Hospital Initiative(s): Quiet Time
The People who heal and serve

- CEO, CFO, CNE
- Professional Services Department/Education
- Nursing Departments
- Ancillary Departments (PBX, Dietary, Security, EVS, Respiratory etc.)
The People we HEAL and SERVE

- Census
- Flow
- Demographics
- Patient Partners (patients/families)
- Rich in Diversity
QUIET TIME  A hospital Initiative

- Began Quiet Time Campaign 2012
- EOC - Environment Of Care Committee
- Background – chair and committee members
- Purpose of committee
- Goals
- Roles and responsibilities
- Sponsors
Nightingale... Quiet Time in History
Quiet Time

- How ridiculous is this concept?
  Before/Now

- Challenges in how to institute QT?

- Challenges at SDMC

- Doable?
Quiet Time – What and When

- What (different definitions in general)
  - SDMC

- When (Goes back to Nightingale!)
  - SDMC
Quiet Time – Why (Significance)

- Why (Improves healing and patient satisfaction)
  - SDMC

- How (Several Different Strategies)
  - SDMC
SDMC Quiet Time Project

- Initial Quiet Time Campaign 2012
- Re-launch 2015
- Research and Findings
- Needs Assessment
- Data Analysis
- Evidenced Based Research and Practices
- Report
2012 – Know, Do, Share; Operator Standard Work Instruction for Nurses, Lab to change carts, EVS pressure wash wheels on carts etc.

2015 – Re-launch – Biggest difference is employee inclusion relevant to COMMUNICATION using TEAMSTEPPS Methodology as our focus in our Educational Design.
SDMC moving forward

- Research (interviews, observation, Q&As) and Enthonography Study!
- Audits (developed SIMPLE tool also used for education!)
- High Collaboration (with other departments and even more with ie., Dietary, Lab, EVS, Security etc.)
- Clinical Alarms Management Partnership
- Policy and Procedure - create
Quiet Time Goody Bags (how hard was this!)
Quiet Time SHH Buttons distribution (like candy!)
Employee Buy In/Involvement (Photos of them not models)
Added as a hospital initiative and printed in our TJC Prep Booklet
Communication and Awareness (for consistency and sustainability – Compliance not really an issue!)
Staff getting across Quiet Time... in their creative fashion...
- Huddles
- Rounding‘s-Nursing Hourly, IDT and SBAR Handoff
- Free Download Application for Decibel readings
- Red, Yellow and Green Stoplight
- PBX Changes in Announcement and Process
- Obtain Feedback (and really look to make changes!)
- PP and SW on Quiet Time
Taking time out to address...Quiet Time...
Incidental/Additional Findings
Awareness that staff need Quiet Time Too!
Why
When
How
Where
Providing our patients with Quiet Time (*during the night*)

You are a Rock Star and work for a great hospital... *How does everyone know that?*

One of the items on the HCAHPS survey is based on “The Hospital Environment”, specifically regarding the patient’s hospital stay and how often the area around their room was quiet at night.

**Survey Question:** During this hospital stay, how often was the area around your room quiet at night?  Patient Choice of Answers: Never, Sometimes, Usually, Always  - THIS IS WHAT WE WANT OUR PATIENTS TO CHOOSE

In short, please provide ALL patients with QUIET TIME. It is as easy as **SHH!!!**

* S=Staff awareness of Quiet Time
* H=Help provide Quiet Time using appropriate interventions and tools
* H=Happy patients when provided Quiet Time

Remember to document that you have provided excellent care using Quiet Time so you will get the credit you deserve. You are a Rock Star and work for a great hospital and we want everyone to know that.
SHH...It is now Quiet Time...at the hospital...

- 8PM – 8AM
- Remember WHAT WHY

- **S** = Staff awareness of Quiet Time **CUS at your coworker** if you need to! This is not what you may think! CUS is the concept of working as a team by reminding others that you are **Concerned, and Uncomfortable, and that this is a Safety issue. A quiet environment promotes healing.**
- **H** = Help provide Quiet Time using appropriate interventions and tools such as providing Quiet Time Goody Bags Goody Bag contents include ear plugs, head phones, eye mask, and lip balm that help enhance relaxation, sleep and decrease noise.
- **H** = Happy patients when provided Quiet Time

- **HCAHP Survey Question**: During this hospital stay, how often was the area around your room quiet at night? Patient satisfaction achieved and patients will answer:
  - o Never
  - o Sometimes
  - o Usually
  - o Always – **THIS IS WHAT WE WANT OUR PATIENTS TO CHOOSE**
PBX Announcement

- “It is now quiet time. Please help our patients heal by keeping the noise level down. A quiet environment promotes healing. Doors will be closing at 8 pm so please use the exit door in the emergency department. Good night. ”

- RATIONALE: The "SHH" at the beginning and at the end delivers what we are trying to convey. The verbiage is understandable and at a level understood by the general population. In addition, Quiet Time buttons that we have invested in and have distributed have “SHH” written on them. The statement, “A quiet environment promotes healing” is posted in our elevators which reinforces our message.
Educational Plan

TeamSTEPPS incorporated

- Education (not just for nurses!)
- Involve
- Regroup/include key players
- Revise Educational Plan
- Research
- Obtain feedback
- Gemba (from Lean Methodology)
- PDSA (Plan, Do, Study and Act)
- Communicate – **CUS at your coworker!**
  - *Concerned, Uncomfortable, and Safety issue*
Utilization of TeamSTEPPS

- An evidence based teamwork system for the improvement of communication skills among healthcare professionals by utilizing a curriculum to successfully integrate teamwork principles across all healthcare settings:
  - Tools include:
    - Call Out: request inform or provide information
    - Check-Back: Closing loop of communication
    - SBAR: Situation, Background, Assessment, Recommendation
    - Brief: Short planning session
    - Huddle: Team re-group to re-establish awareness and planning
    - Hand-Off Transfer of information during transitions
    - CUS: I’m Concerned, I’m Uncomfortable. This is a Safety Issue
    - Two – Challenge: This is your responsibility to assertively voice a concern at least two times to ensure it has been heard.

For the Quiet Time Project we empowered nurses to use CUS and the Two-Challenge Rule.
Tools include:

- Call out: Request/provide information
- Check back: close loop of communication
- SBAR: Situation, Background, Assessment, Recommendation
- Brief: Short planning session
- Huddle: Team re-group to re-establish awareness and planning
- HAND-OFF Transfer of information during transitions
- CUS: I’m concerned, I’m Uncomfortable, this is a safety issue
- 2 Challenge Rule: This is your responsibility to assertively voice a concern at least 2 times to ensure it has been heard.

NOTE: Communication significant in all
Go Ahead and **CUS** at your Coworker!

I am **C**ONCERNED!

I am **U**NCOMFORTABLE!

This is a **S**AFETY ISSUE!
LITERATURE Reviews

- Literature Reviews report the current knowledge on a topic and help with:

- Providing a theoretical framework for the topic under review
Define key terms and variables used for the study

Provide a synthesized overview of evidence for practice to assist with new perspectives

Facilitate knowledge gap pointing out significance of problem and need to improve quality of care
How WE support the Quiet Time Initiative?

- Evidence Based Practice
- Literature Review
- Data
Evidenced Based Practice

- Combines the best available research with clinician experience and patient preference.
- Can help change healthcare at the bedside one patient at a time.
As research may NOT translate into practice
= nurses may not be aware of evidence based practice
Findings of Literature Review and EBP

- Literature and EBP supports that a QUIET ENVIRONMENT promotes healing.
- Additional findings with rise in HCAHPHS ratings:
  - Higher healthcare costs
  - Linked to mortality
  - Linked to readmission rates
The WHO guidelines state that noise levels on wards should not exceed 30 dB LEQ (day and night) and that peak noise levels at night should not exceed 40 dB. Our results exceed these guidelines at all times.

Rounding on floors during change of shift, the floor never reached 40 dB. The highest number was at the nursing station decreasing the further away from the station.
Quiet Time Measurements

![Bar chart showing quiet time measurements for January, February, and March 2016. The chart compares different categories: WHO LEVEL 30 db, NOT TO EXCEED 40 DB, SDMC DB, RM BY NSG STATION, and 3 ROOMS DOWN HALL.]
Audit consisted of 4 questions to staff:

1. Do you know what HCAHPS survey questions relate to environment of care and noise?
2. Can you verbalize two noise reduction interventions?
3. Have you used the TeamSTEPPS-Two Challenge rule to reduce staff conversation?
4. Have you used the TeamSTEPPS CUS to reduce noise?
*20 Audits done each month with time period of 5-6 AM
Ethnography Research

- Type of research
- Branch of Anthropology involves understanding of how people live
- Report event and details of experience
- Full understanding
- Observe and listen
- Enlightens context
- Number of experience
CONCLUSION

- SDMC QUIET TIME Campaign 2012 to present
- Re-launched with changes and significant improvement
- Aggressive Implementation to date to sustain and improve QUALITY AND PATIENT SAFETY HQI goal
- Opportunity to share our Quiet Time strategies with other Healthcare facilities
REFERENCES


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Other resources available
Presenter Contact Information

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Thank you to all of you... for allowing us to share QUIET TIME... with you!