

The Newsletter for Healthcare & Human Services

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Quick Links	In This Issue
MaunLemke.comClintMaun.comClintCast.comClintsCures.comFind us on FacebookFollow us onConfigurer	The Leading Edge: The Benefits & Hindrances ofTeamwork in HealthcareEmployees Matter: Overcoming Language Barriers - 6 Tips to Help You Better CommunicateNews You Can Use: Nursing Home, Assisted Living Rates Continue to Rise in 2010Just for Fun: An Untimely Lecture



Could your healthcare facility benefit from this?

*Every healthcare facility can benefit from Revenue Enhancement!* 

Clint Maun, CSP has **two new programs** *custom-designed* to help you enhance your **revenue streams** and deliver increased customer satisfaction, smoother operations and sustainable, long-term market viability, especially given the forthcoming changes resulting from the recent healthcare reform!

These exciting new programs bring a wealth of proven-solutions to bear on improving your facility's revenue, so you can invest in other important aspects of your business, such as staff rewards & retention, site/technology improvements, partnership integration projects and more!

The Future Of Reimbursement Is Now: Take Action Today



Wow! Look at the healthcare changes now in process and slated for the future. The U.S. government has an aggressive agenda which will considerably affect reimbursement for healthcare providers. The new healthcare system requires providers to be more competitive and customer service oriented to receive their full reimbursement. These stated changes are already having huge implications related to partnerships, integration and guaranteed outcomes. In this session, attendees will understand the importance of positioning their organizations for the changes to come. They will be provided immediate, necessary and practical action steps to address aspects such as bundling of reimbursements, development of ACOs and Value-Based Purchasing based upon quality measures and customer satisfaction.

#### The Kaleidoscope of Medicare Makeover

Playing with a kaleidoscope is always intriguing. Merely turning the rocks some will create an entirely new image. This is also the case with most long term care organizations. It is possible to substantially increase the organization's Medicare/Managed Care occupancy by simply rearranging a few critical "rocks". A complete redo or extreme makeover very often is unnecessary. In this session participants will learn how to use a team approach to create a more attractive, functional and productive environment through strategies such as delivery of service in the right location at the right time for the right result, implementation of correct staffing plans and advantageous utilization of building space.

### Let Clint Maun show your organization how to Increase Revenue Now while Preparing for Tomorrow!

Review Clint Maun's Biography and References at <u>http://www.maunlemke.com</u> or call Kathy Cain at 800.356.2233 for more information



Book multiple speakers for a \$\$\$ discount. Ask us how!

# The Benefits & Hindrances of Teamwork

It's likely that you've heard your boss or senior-level management speak about the importance of teamwork in healthcare. If you have, you should definitely take note. Several studies have suggested that teamwork could have a range of tangible benefits. Although the link is far from definitive, it appears that teamwork and team composition could have positive effects, particularly in quality and safety. These benefits include reducing medical errors, improving quality of patient care, addressing workload issues, building cohesion, and reducing burnout of healthcare professionals.

Indeed, a team-based approach appears to be the route almost every healthcare organization should choose. Moreover, it's difficult to imagine who could oppose implementing effective teamwork as a way to improve healthcare. However, in healthcare delivery, effective teams that incorporate

different professions and occupations—as well as patients and families—are hard to come by. The greatest obstacle to change is arguably the hierarchical culture of healthcare. Stubborn attitudes about scopes of practice, professional "turf" and historical power structures can hinder the formation and continued success of a team. Additional factors that can underpin successful teamwork in healthcare include the following:

- A lack of time to bring people together to reflect and to change
- Insufficient inter-professional education, including continuing education, and the persistence of professional silos
- Systems of payment that do not reward collaboration
- Few links between collaborative practice and individual goals
- The absence of efforts to capture evidence for success and communicate this to key stakeholders, including the public

#### **Looking Ahead**

As more research and evidence comes to the surface, it's becoming more apparent that collaboration and teamwork are surefire ways to produce high-quality results. Taking the items above into account, it's safe to say that healthcare providers and leaders should address any personal power issues, adopt common goals, and break down hierarchies. To be certain, without strong leadership that includes champions who drive change and support teamwork, the path to sustained teamwork will be difficult to achieve.

"Coming together is a beginning, staying together is progress, and working together is success." —Henry Ford

### **Overcoming Language Barriers: 6 Tips to Help You Better Communicate**

Although the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) requires facilities to have interpreters available, it's likely that you'll still have to interact with patients and families who don't speak English. When caring for a patient who doesn't speak much English, or perhaps any English at all, your communication skills will undoubtedly be put to the test. Indeed, you must kick your communication efforts into overdrive; otherwise your patient may consider you insensitive and indifferent, or even incompetent.

To overcome the barriers you'll face, use these tips.

- 1. **Formally greet the patient.** Be sure you greet the patient with a warm smile, and use the patient's last name or complete name. Avoid being too casual or familiar. Point to yourself and say your name.
- Take your time. Although you may feel uncomfortable, it's important to proceed in an unhurried manner. Pay attention to any effort the patient or his family makes to communicate.
- 3. **Don't shout.** Speak in your normal voice. Talking louder doesn't mean your patient will be able to understand what you're saying any better. In fact, it may insult them. Speak in your normal voice, and avoid talking loudly. Remember, we all have a tendency to raise the volume and pitch of our voice when a listener appears not to understand—but if you do this he/she may think that you're angry and shouting.
- 4. **Repeat yourself when needed.** Try your best to read the patient's face. If they appear confused, repeat and summarize what you've said. Use visual aids and use simple gestures when feasible. Validate whether the patient understands by having him repeat instructions, demonstrate the procedure you've taught him, or act out the meaning.
- 5. **Avoid jargon.** Medical slang and jargon often confuses those who know the language well! So, use simple words, such as "pain" rather than "discomfort."
- 6. **Discuss one topic at a time.** For example, instead of asking, "Are you cold and in pain?" separate your questions and gesture as you ask them: "Are you cold?" "Are you in pain?"

If you frequently encounter patients who don't speak English, it may also be a good idea to pick up

phrase books from a library or bookstore, make or buy flash cards, or make a list for your bulletin board of key phrases everyone on staff can use. Your patients will appreciate your efforts, and you'll be prepared to provide better care.

"No one would talk much in society if they knew how often they misunderstood others." —Johann Von Goethe

#### Nursing Home, Assisted Living Rates Continue to Rise in 2010

Nursing home and assisted living rates rose significantly from 2009 to 2010, according to the MetLife Mature Market Institute's "Market Survey of Long-Term Care Costs".

Private room nursing home rates rose 4.6% to \$229 per day or \$83,585 per year, while assisted living rose 5.2% on average to \$3,293 per month, or \$39,516 per year. These increases come on top of increases from 2008 to 2009 when both nursing home and assisted living costs were up 3.3%, according to the MetLife.

Costs for home health aides and adult day services were unchanged in the past year. Home health aide costs remain at an average price of \$21 per hour, while adult day services costs are still \$67 per day.

The highest average daily rates for nursing homes continued to be in Alaska, where rates are now \$687 for a private room and \$610 for a semi-private room. Costs are lowest in Louisiana, outside of Baton Rouge and Shreveport, at an average of \$138 per day for a private room.

For assisted living, the Washington, D.C. area had the highest average monthly base rate at \$5,231, while Arkansas, outside of Little Rock, had the lowest average monthly rate of \$2,073.

The Market Survey of Long-Term Care Costs can be downloaded from: <u>www.MatureMarketInstitute.com</u>.

> "The philosophy of one century is the common sense of the next." —Henry Ward Beecher

## **An Untimely Lecture**

On New Year's Eve, Daniel was in no shape to drive, so he sensibly left his van in the parking lot and walked home. As he was wobbling along, he was stopped by a policeman. "What are you doing out here at four o'clock in the morning?" asked the police officer.

"I'm on my way to a lecture," Daniel answered.

"And who on earth, in their right mind, is going to give a lecture at this time on New Year's Eve?" the policeman enquired sarcastically.

"My wife," slurred Daniel grimly.

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