

Maun-Lemke has been Mystery Shopping healthcare organizations, by phone and live visits, for over 20 years. We create a new Mystery Shopping *scenario* each month specific to the type and treatment specialization to be shopped (Long Term, Assisted Living, Alzheimer's, Hospice, Home Care, Mental Health, Independent Living). We rotate our Mystery Shoppers so they do not contact the same facility within a 6-month time frame. All Maun-Lemke Mystery Shoppers have healthcare experience, are trained by us and each of their reports are reviewed for grading consistency.

Consumers today are taking a much greater interest in their healthcare. They are becoming more empowered to explore healthcare options for themselves and their loved ones. Providers can no longer merely depend on discharge planners and referral sources to keep facilities full. They need to know how their organization's staff handles inquiries.

If you'd like information on Mystery Shopping your facility, call Kathy Cain at 800.356.2233.

The studies keep rolling in and the conclusion is consistent: continuous sitting is bad for your health. In fact, many studies have revealed that **the more time a person spends sitting, the higher their risk of death from any cause**. This news is especially relevant if you sit behind a desk for many hours of the day, and it also has implications for your patients. But don't panic just yet—there are ways to combat what is now referred to as the *sitting disease*. A comprehensive study published in *The Lancet* found that 60 to 75 minutes of daily moderate physical activity like walking, riding a stationary bike, dancing, golf, tennis, or coaching sports eliminates the risk of death related to sitting, even from sitting for more than eight hours per day. If you can't get in 60+ minutes of moderate daily activity there's still no reason to panic—**so long as you try your best to make some type of movement every day**. This of course hold true for your patients too; the more they're able to get up and make any type of safe movement, the better.

Any Movement Has Benefits

Many experts and a lot of research suggest that simply getting out of your chair (or bed in the case of patients) every 30 to 60 minutes can have significant benefits and protect your health. Standing for one to two minutes every half hour or hour can help combat the negative physiological effects of sitting. Even if you can't move around, simply standing and stretching can help boost circulation, activate your metabolism, burn extra calories and increase focus. Some studies have even shown that frequent standing breaks significantly decrease your chances of developing diabetes.

Of course, if you can get up and walk or incorporate any other kind of physical activity, that's even better. Research confirms that spreading out exercise and movement throughout the day reaps benefits. One recent study published in *Medicine and Science in Sports and Exercise* found that even hourly breaks of light activity decreased measurable damage to arteries.

Whether you can squeeze in 60+ minutes of moderate activity or just stand or move around every hour, keep in mind that **movement of any type is what matters**. The science is overwhelmingly telling us that less sitting and more exercise is the goal, and every little bit of improvement in either area helps.

> "Health is the thing that makes you feel that now is the best time of the year." —Franklin Pierce Adams

Communication Corner

Being Around After Bad News: Effective Communication Strategies

After a physician delivers bad news or a bad diagnosis, it's often the other members of the healthcare team (i.e., nurses and aides) who are there to answer questions and

provide further explanation. Answering questions and communicating to patients and families after bad news has been delivered is difficult—so difficult that it takes finely tuned skills, coaching, and practice to do it candidly and respectfully. Practicing and honing in on those skills can greatly enhance patients' and families' overall care experience and perception of your facility. Here are some helpful strategies to follow after bad news has been delivered.

- Share information honestly and avoid jargon. Share what you know, and do it in a way that the patient can understand. Avoid medical jargon and terms as much as you can. The patient is probably already having a difficult enough time processing all the information, so adding in unfamiliar medical terms won't help. Clearly state the medical facts, and then discuss the prognosis without sugarcoating it. If you know the statistics on the chance of recovery, share this information. Don't tell them that everything will be fine; if applicable, you may want to say this eventually, but this likely shouldn't be the first words out of your mouth.
- Acknowledge the pain and listen. After hearing bad news, most patients and families are understandably upset and confused. So, when the patient and family express their feelings, acknowledge their pain and communicate the message that you understand why they feel this way and share their concern. This will help them to be more open and understanding of what you have to say. Also make sure you're actively listening to what the patient and family are communicating. During difficult times, people feel a strong need to be heard and to know you care about them. You can demonstrate this by reflecting on what's been said and then paraphrasing it in your own words. This tells them you understand their specific concerns.
- **Give it time.** People often react with emotion and fear after hearing bad news; they may not be thinking rationally or logically after hearing a frightening diagnosis. So, give them some time to digest the information. Don't move towards a lengthy conversation and explanation of the facts until you feel the patient and family are in the right emotional state to participate.

Being around after bad news and answering difficult questions effectively is a skill you need to practice. So practice these tips with a colleague or friend. Ask for feedback. Work on your word choices and tone of voice and you will gain a mastery of this skill.

"It is tact that is golden, not silence." —Samuel Butler

News You Can Use

Lack of Exercise linked to Higher Risk of Dementia Seniors

According to a recent study published in the *Journals of Gerontology: Medical Sciences*, older adults who don't exercise often—or don't exercise at all—have a 50% higher risk of developing dementia as they age. Researchers split a group of 3,700 participants of the Framingham Heart Study into five sub-groups based on activity levels. Results of the study showed the group containing the most sedentary people had the highest risks of developing dementia compared to the other four groups. Seniors over age 75 who exercised showed the most benefits and protections against dementia.

Even small amounts of moderate physical activity, such as brisk walking, ballroom dancing or gardening, helped the participants' brains stand up to the effects of aging, researchers found. Those benefits could be due to increased blood flow to the brain experienced during exercise, as well as increase secretion of chemicals that encourage growth of new neurons.

Researchers note that it doesn't require intensive physical activity to decrease risk of dementia. The message, according to the study's scientists, is that you're never too old to exercise and gain benefit from it.

"Do you know where your kids are in the house? Turn off the Internet and they will show up quickly." —Anonymous



A Legitimate Offer?!

Reaching the end of a job interview, the Human Resources Officer asks a young man straight out of nursing school, "And what starting salary are you looking for?"

The nurse replies, "In the region of 150,000 a year, depending on the benefits package."

The interviewer inquires, "Well, what would you say to a package of five weeks vacation, 14 paid holidays, full medical and dental, company matching retirement fund to 50% of salary, and a company car leased every two years, say, a red Corvette?"

The nurse sits up straight and says, "Wow! Are you kidding?"

The interviewer replies, "Yeah, but you started it."

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