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Just 7 more Medicare customers can deliver over \$1 million to your top line.

This additional revenue offsets losses from Medicaid reimbursement rates.

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Clint Maun and Maun-Lemke have over 25 years of expertise in "changing the results of healthcare". We have learned through that to assure their sustainability, LTC organizations **must not be** revenue dependent upon Medicaid.

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How to Manage & Motivate 'Bad' Employees

How do you manage and motivate 'bad' employees? Well, the best solution is to not hire them! Of course, if you or someone else made a mistake in the hiring process, you must address your

problem employees, or the issues and poor attitudes they bring to the table will only get worse.

Such problem employees often show similar traits and dispositions:

- They do the absolute minimum to meet their responsibilities and nothing more.
- They routinely perform their duties with a poor attitude that often rubs off on co-workers, customers, and/or patients.
- They have little commitment to the company, frequently bad-mouth it, and regularly degrade fellow workers.
- They complain endlessly about company processes and policies, pay, and benefits.

Smart managers know that 'problem employees' still offer plenty of potential. The issue usually lies within a lack of training, a poorly defined role, lack of feedback, shifting organizational priorities, or something deeper. Here are some great strategies for addressing the problems that are often inherent with problem employees:

- **Avoid micromanagement.** Micromanaging is the surest way to kill an employee's enthusiasm. Constant checks or pointing out every little mistake will only further discourage the employee.
- **Give genuine feedback.** If you see improvement or a job well done by a problem employee, thank the employee individually for his or her contribution and repeat your thanks at a staff meeting. Just remember that gushy praise is instantly recognized as fake and won't cut it. Additionally, when you give positive feedback, use it as an opportunity to discuss the larger issues. For example, you could say, "That was a good job, and here's how to get even better."
- **Be basic.** Review your employees' performance objectively and ask some basic questions: What are their strengths? Weaknesses? Would their talents and interests flourish with different tasks and/or priorities?
- **Meet privately.** If an employee is continuously causing problems, meet with him/her privately and tell him/her how and where they are failing to meet company standards. Tell them what they need to do to improve, and set deadlines for improvement. Put everything in writing. Keep a copy for yourself, and give copies to HR and the employee.

Managing is a balancing act—and it's surely easy to slip from time to time. Keep a firm grasp on problem employees by letting them know that they're trusted and their work is valued. At the same time, set goals and plans for improvement so that the employee can perform within clearly defined parameters.

*"Act as if what you do makes a difference. It does."
—William James*

Key Communication Styles You Need to Know About

Healthcare professionals interact with various people, personalities, and cultures on a daily basis. To be sure, it's nearly impossible to communicate effectively with all these different people without substantial thought and effort. To be an ideal communicator, you must ultimately understand that there is not 'right way' to interact. A successful communicator understands and acknowledges key communication styles and differences. One of these main differences includes direct and indirect communication.

Direct vs. Indirect Communication

Direct communicators reveal their true intentions verbally. Direct communicators are not as likely to analyze context for underlying meanings and will instead take the speaker's words at face value. Direct speakers usually value the effectiveness and swiftness of short, direct answers that involve no further analysis. They expect and respect honesty and bluntness.

Indirect communication is when true intentions are usually hidden. This type of communication is

more passive and submissive. An indirect speaker will not make a direct statement or directly answer a question that could be perceived to cause tension, or an uncomfortable situation. They are more likely to say 'maybe' or 'possibly' when the true answer is 'no'. Indirect speakers usually feel that being polite is more important than giving a true response. To an indirect speaker, direct speech is considered harsh and even rude.

How to Communicate with an Indirect Speaker

If you are a direct speaker and you are communicating with an indirect speaker, take note of these tips:

- **Recognize that 'yes' can often mean 'no'.** An indirect communicator may never say 'no' because they don't want to cause tension or offend you. For example, say you ask an indirect communicator, "Can you make photocopies of all these documents? I need them right away." An indirect communicator will simply answer "yes". Then you might notice several hours have gone by and you ask again if this can be done, and you receive the same enthusiastic "yes". It's key to recognize that indirect speakers don't want to cause disappointment, so they will often give an answer the requestor wants to hear, even if that answer isn't true.
- **Be patient and gather details.** If you know an indirect communicator isn't being completely truthful, try to find out what's causing them to avoid a truthful, direct answer. If you had asked the person to make photocopies, maybe it's just a case of that employee not knowing how to make copies, or maybe the copy machine is broken, and they don't want to tell you that. So, always try to gather details before you lose your temper or bluntly ask an indirect communicator why they can't meet your requests.
- **Use open-ended questions.** It's useful to use open-ended questions with indirect communicators. For example, instead of asking, "Do you like Jerry's management style?" ask, "What do you think Jerry's biggest strength is as a manager?" Be careful not to lead the person towards an answer such as, "I think Jerry is very organized, what do you think?" This type of leading question can be perceived as seeking agreement instead of seeking opinion.

Remember, indirect speakers don't ever want to 'rock the boat' or cause tension. They don't want to offend you, and will often say what they think you want to hear. To effectively communicate with an indirect speaker, it's critical that you discover what they're really thinking by asking open-ended questions and giving them the time they need to truly express themselves.

How to Communicate with a Direct Speaker

If you are an indirect speaker and you are communicating with a direct speaker, take note of these tips:

- **Recognize that subtle messages may not be heard.** If you are an indirect speaker, understand that subtle messages may not be picked up by others. Direct speakers may not interpret your behavior in the way you are accustomed to with other indirect speakers.
- **Be honest.** It is possible for indirect speakers to provide a true response without feeling that they are insulting the other person. If you are asked a question and your answer is negative, try providing one positive response followed by one negative and one more positive response. For example, if you're asked to make copies, but don't have time, you can say, "I would love to help you out. Unfortunately, I am too busy today. If it can wait until tomorrow, I would be happy to do it." In this response you are able say no, but still offer a solution.

The ideal healthcare professional is able to effectively communicate with both direct and indirect speakers. Remember that neither speaking style is 'right' and that both have their benefits. Being aware of these key communication styles will greatly improve the communication exchange between you and your co-workers, patients, and customers.

*"Communication - the human connection - is the key to personal and career success."
—Paul J. Meyer*

Healthcare providers may have a new way to identify violent patients by utilizing a specially designed risk assessment tool created by American researchers.

The 10-point Aggressive Behavior Risk Assessment Tool (ABRAT) was completed within 24 hours of admission for patients in medical-surgical settings and appears to provide a promising tool for predicting which patients will become violent during their hospital stay.

The results from this study indicate that the 10-item ABRAT could be useful in identifying potentially violent patients in medical-surgical units, with acceptable accuracy and agreement between users.

Researchers studied more than 2,000 patients admitted to an American acute care hospital over a five-month period. Three percent of those patients had been involved in one or more violent incidents, including verbal abuse, physical attacks, threats of violence, sexual harassment and incidents where an emergency call had to be placed with security personnel. On the 10-point ABRAT scale, 41 percent of the patients with a score of two or more ended up becoming violent, compared to less than 1 percent of patients with a rating of zero becoming violent.

Half of the violent incidents involved patients aged over 70, despite the fact that they only made up 40 percent of the patients studied. Males, who made up 48 percent of the patients studied, were almost twice as likely to become violent as females (64 percent versus 34 percent).

The five most common predictors of violence were: confusion/cognitive impairment, anxiety, agitation, shouting/demanding and a history of physical aggression.

Findings of a study on ABRAT appeared in the November issue of the *Journal of Advanced Nursing*.

"That's what the holidays are for - for one person to tell the stories and another to dispute them."
—Lara Flynn Boyle

Perfect Replies for the Not So Perfect Gifts

We all know the saying that it's better to give than to receive...and when we get that not-so-special gift, the meaning really comes to life! These replies highlight what we may think, but should never probably say:

- Boy, if I had not recently shot up four sizes, that would've fit.
- It would be a shame if the garbage man ever accidentally took this from me.
- Perfect for wearing in the basement.
- Well, well, well...
- I really don't deserve this.
- Gosh, I hope this never catches fire!
- I Love it, but I fear the jealousy it will inspire.
- If the dog buries it, I'll be furious!
- Sadly, tomorrow I enter the federal witness protection program.
- To think I got this the year I vowed to give all my gifts to charity.

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