



June 1, 2018

The graphic for 'Clint Maun's Motivational Minute' features the title in a large, bold, blue font on a dark blue background. To the right is a close-up image of a silver stopwatch with a black face and a yellow hand. Below the title, a white box contains the text: 'Here is a motivational minute from Clint that stands the test of time.'

Eleven things you did not learn in school

Charles Sykes, the author of *Dumbing Down Our Kids*, provided for high school and college graduates a list of eleven things they did not learn in school. In his book, he talks about how the feel-good, politically correct teachings created a generation of kids with no concept of reality and set them up for failure in the real world.

1. Life is not fair; get used to it.
2. The world won't care about your self-esteem. The world will expect you to accomplish something **before** you feel good about yourself.
3. You will **not** make \$40,000 a year right out of high school. You won't be a Vice President with a car phone, until you earn both.
4. If you think your teacher is tough, wait till you get a boss. He doesn't have tenure.
5. Flipping burgers is not beneath your dignity. Your grandparents had a different word for burger flipping; they called it *opportunity*.
6. If you mess up, it's not your parents' fault, so don't whine about your mistakes; learn from them.
7. Before you were born, your parents weren't as boring as they are now. They got that way from paying your bills, cleaning your clothes, and listening to you talk about how cool you are. So, before you save the rainforest from the parasites of your parents' generation, try delousing the closet in your own room.
8. Your school may have done away with winners and losers, but life has not. In some schools, they have abolished failing grades, and they'll give you as many times as you want to get the right answer. This doesn't bear the slightest resemblance of **anything**

in real life.

9. Life is not divided into semesters. You don't get summers off, and very few employers are interested in helping you *find yourself*. Do that on your own time.
10. Television is **not** real life. In real life, people actually have to leave the coffee shop and go to jobs.
11. Be nice to nerds. Chances are you'll end up working for one.



The Leading Edge

Implementing a New Technology or Gadget? Learn these *do's* & *don'ts*

Technology acts as a driving force and competitive edge for industries across the globe, and this is certainly the case in the healthcare profession. Indeed, for many healthcare providers, technology is an enabler to improve quality, realize new efficiencies, and keep pace with mandatory changes in the industry. It also plays a critical role in attracting customers and residents and retaining a satisfied workforce.

Of course, selecting and implementing the right technology to meet the specific needs of your organization is no simple task. Many providers face challenges like tight margins and limited resources. Many also make mistakes or miss key steps in the technology selection process.

If you're considering a new technology for your healthcare organization, take note of these ***do's*** and ***don'ts***:

- **Don't be tempted by *shiny new objects***

There are many technologies promising improved workflows or streamlined operations, but often they just don't deliver. Many organizations make the mistake of purchasing an expensive cool new thing. It sounds like a *no-brainer*, but many providers often fail to determine whether a certain technology will actually deliver on what it promised to do. Ask for case studies and referrals to ensure current customers are satisfied with the product.

- **Don't make assumptions about your customer base**

Despite being the fastest growing demographic in our country right now, the elderly are often the most overlooked when it comes to new technology being introduced to the market. So, don't overlook a certain technology because you think patients or residents wouldn't be interested or benefit from it.

- **Don't forget about the customer experience**

Always ask yourself if the technology can enhance the customer experience. Virtual reality (VR) is a great example of a technology that's being used to enhance the physical therapy experience in long-term care and skilled nursing facilities. The use of VR can help improve the lives of seniors with mobility problems who require physical rehabilitation and for those residents who are

unable to leave the facility. The VR technology also creates a new and exciting experience for residents who would often otherwise dread a physical therapy session.

- **Do ensure you can measure value and results**

Make sure you can generate metrics and prove the value of your technology investment. The technology should be able to produce outcome measures in the form of graphs and numbers, which you can easily share with leadership, peers, and even (if appropriate) patients and residents. Pay-for-performance outcomes like hospital readmissions or quality measures are a few examples that could justify a new technology as well.

- **Do ensure you have the time to properly implement the technology**

In addition to all other technology considerations, there is also the practical matter of time. This may be the final piece of the decision-making process on whether to proceed with a new technology. Is it plausible to add one more project into your day? Will you have the resources, time, and people to get it done right? If the answer is no or you're not sure, you're not ready to make the investment.

With the arrival of new software and technologies like virtual reality, electronic health records, and case management there is ample opportunity for healthcare providers to create efficiencies, meet financial and quality goals, and enhance the customer/patient experience. Following some simple do's and don'ts can help ensure whatever technology you choose will prove valuable and successful.

*"People often say that motivation doesn't last.
Well, neither does bathing—that's why we recommend it daily."
—Zig Ziglar*



Employees Matter

Closing the Caregiver Shortage

Healthcare organizations across the nation are seeking solutions to the caregiver shortage. With unemployment improving and more people securing full-time work, there simply aren't enough people to go around. For most organizations, the greatest need is for direct caregivers.

To close the gap, many providers have tapped into the power of a diverse, non-U.S. born workforce. According to a 2017 research brief from the *Paraprofessional Healthcare Institute* (PHI), about one in four direct care workers is an immigrant. The total number of immigrants in direct care continues to grow—from 520,000 in 2005 to 860,000 in 2015. A large percentage of the immigrant direct care workforce emigrates from Mexico, the Philippines, and Jamaica, while others come from Caribbean, Central American, and, increasingly, African countries.

PHI has also reported that nurse assistants comprise more than one-third of the

nursing center workforce, at 37 percent. These assistants are usually tasked with helping residents with daily tasks and may also perform a variety of clinical tasks under the supervision of licensed professionals.

With the right resources and approach, any facility willing and able to recruit, employ, and help diverse, foreign-born workers succeed will likely encounter both challenges and opportunities that, if managed appropriately, will help boost quality-of-care efforts. If your organization wants to explore recruiting and retaining a diverse, immigrant workforce, there are some key tips and considerations to keep in mind:

- **Recruit the Right Way**

To recruit qualified workers, you'll want to get the word out in several different channels. Leverage online forums and recruitment services, as well as local job placement firms and even good old-fashioned classified ads. You'll probably find that with this specific population, word of mouth and referrals will become a key recruitment tool. Make sure you have a good policy in place for nepotism. It's likely that you'll have husbands and wives and other family members who want to join.

You'll also want to focus on expanding the language offerings in your employee and marketing materials. When many foreign-born professionals first come to the U.S., they are not speaking fluent English if any at all. Having training materials and exams in additional languages is key (think beyond just Spanish). The same is true for your marketing materials—your patient population may be more inclined to select you as a provider if you have materials and staff who can communicate in their native language.

- **Understand the Scenarios You'll Need to Train For**

When hiring non-US born workers, you may find that many can understand and relate to English fairly well. However, they may not feel comfortable talking and using it, which can lead to misunderstandings and/or misconceptions that they're not as competent, concerned, or compassionate as other employees. Be mindful of this scenario and get ahead of it by offering training that focuses on ideal non-verbal communication and how to present oneself visually versus trying to talk through it. This type of training and role-playing will help ensure that employees are giving the right, assuring visual cues if they can't immediately give the verbal cues.

- **Be Prepared for Complaints**

When hiring foreign-born workers, be prepared for a few negative reactions and scenarios. You may hear allegations and complaints that you haven't had before. You must be prepared to effectively address these issues while also supporting and protecting your foreign-born workforce.

To tackle any issues, you need to clearly communicate policies. For example, you may create a policy that employees are not allowed to speak to patients in languages that patients don't understand. Or perhaps you create a clear escalation process if a patient is getting frustrated because he/she can't communicate with an employee. As long as you prepare and have processes in place to address possible problems and scenarios, you'll get through it.

There are challenges and considerations with any employment strategy, and employing non-US born workers is no exception. However, at the end of the day, employing a foreign-born workforce can offer multiple benefits. As long as you're prepared with the right approach and resources, this strategy can enable you to close your caregiver gap while also creating a diverse and inclusive care setting that meets your patients' needs.

"If you are not taking care of your customer, your competitor will."

—Bob Hoey



News You Can Use

Recent Report Reveals Medicare Health Plan Tool Needs Improvement

According to a recent report published by the Clear Choices Campaign, a tool used by consumers to explore and evaluate which Medicare health plans to purchase needs vast improvement. The tool, **Medicare Plan Finder** (MPF), is marketed as a reliable and accessible information source for seniors, but the report said beneficiaries are not experiencing that promise when they make decisions about coverage options in fee-for-service Medicare and Medicare Parts C (Medicare Advantage) and D (Medicare Prescription Drug Benefit).

The scorecard gives the MPF **A** grades only for its anonymous browsing capabilities and non-English translation services. MPF earned **D** or **F** grades in seven other criteria. The report provides 11 suggestions for making the MPF work better:

- Display costs more prominently
- Base estimated out-of-pocket costs on more detailed information
- Integrate a provider directory
- Use saved information about consumers' prescription drugs
- Permit consumers to compare Medicare Advantage plans with an equivalent combination of fee-for-service, Medigap, and standalone drug plans
- Redesign the layout and display to make navigation easier
- Replace insurance *jargon* with plainer language and more graphics
- Install a web chat feature
- Enable the website to suggest plan options
- Ensure more stringent oversight of MPF's accuracy
- Test the website with consumers on a regular basis

The report's authors noted that their findings highlight a number of MPF challenges for beneficiaries, ranging from the unavailability of human support, to language that is unfamiliar to the typical consumer, to confusing out-of-pocket cost estimates. [Read the report for more details.](#)

*"Obstacles are those frightful things you see
when you take your eyes off your goal."*

—Henry Ford



What Employees Are Really Thinking

What they say: "Can I help you get a size?"

What they really think: "Don't touch that, I just spent an hour folding it and I don't need your hands messing it up again."

What they say: "Do you need help with anything?"

What they really think: "Quick, my manager is coming around the corner and I need to look busy."

What they say: "Did you find everything you needed?"

What they really think: "I really don't care if you didn't find what you needed and I'm not going to help you find it."

What they say: "Have a nice day!"

What they really think: "Now that you ruined mine!"

What they say: "No, we don't have any more of those."

What they really think: "I'm actually not sure, I just don't want to check."



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