



# The Fun Factor

**The missing component of the  
exercise prescription**

**Presented by**

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# Objectives :

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**I have no commercial support or sponsors**

## **Educational objectives:**

- Define the “fun factor” of exercise prescription and the importance of skillful , individualized programming
- Describe how the “fun factor” impacts patient compliance, patient outcomes, and the financial bottom line.
- Provide the audience with examples of how programs across the state are adding “fun” into their program

# What is a fun?

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Fun is defined by Webster:

“Someone or something that is amusing or enjoyable experience or person: an enjoyable or amusing time: the feeling of being amused or entertained.”

“Fun” is highly individualized. One person’s perception of fun may not be fun for another person.

# What comes to mind when YOU think about fun?

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# My Idea of a Fun Vacation

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# My husbands “idea of fun” Tour of Mayan Ruins

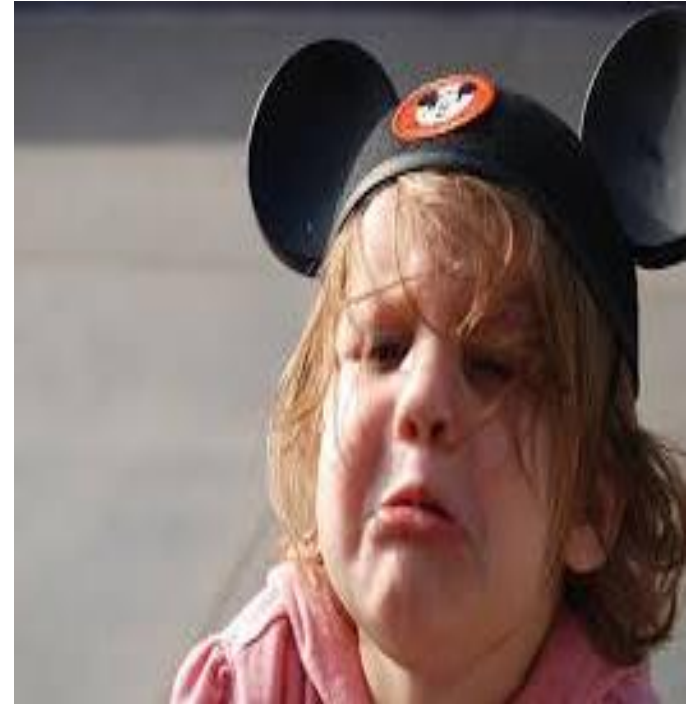
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# Many think Disney is the most fun place on earth but not all agree!

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## **Bottom Line – Everyone is different.**

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What is considered fun is very unique and often differs throughout the lifespan and can be influenced by our previous experience .

As kids we may think getting “dizzy is fun” but as we age it may make sick to get dizzy.



# Do you think Exercise is fun?

## Unfortunately – most people do not consider exercise fun

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# Exercise is Medicine and Some Do Not Like Taking It

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# Exercise is Medicine

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**What is the outcome of giving someone the WRONG MEDICATION??????**



**As exercise professionals, we typically do not prescribe the wrong exercise based on physical limitations / needs**



# Are we as good at Rx exercise based on psychological needs?

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# Why is it important for Cardiac And Pulmonary Rehab Professionals to Incorporate Fun into the Ex Rx ?

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Patients who do not like exercise in the first place will be looking for any excuse not to attend the program. This could lead to

- Low enrollment
- Increased drop out rate
- Poor attendance
- Poor outcomes



# Our outpatient volume is not based on an emergency

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## Why bother with the fluff? Why go the extra mile?

### Lack of patient adherence

- Poor outcomes
- Loss of financial reimbursement



# Current state:

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Cardiac Rehabilitation and Pulmonary Rehab have about same drop out rates – close to 50%

What is the drop out rate of your program ?

Why do patients drop out?

- Medical reasons
- Transportation
- Financial
- Perception that is not beneficial

## References

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## **It will pay off ....**

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**Some Cardiac Rehabilitation will be receive additional incentive bonus**

- **Session 1-11 -\$25.00 per patient session in addition to regular reimbursement;**
- **Session 12-36 - \$175.00 per session**

**Reimbursement is moving an outcomes driven model in many areas of health care.**

**How are you patient outcomes? We know better, more consistent attendance produces better outcomes.**

**AACVPR website**

# 5 Strategies to Improving Adherence

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- 1) Make a great first impression;
- 2) Create a comfortable, nonthreatening environment;
- 3) Help your patient's find their "soul mate" workout;
- 4) Increase patient accountability;
- 5) Provide entertainment;

# 1. Make a great first Impression- the first visit strive to achieve the GREAT Ten

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- 1) Be on time
- 2) Always greet the patient with a smile and introduce yourself
- 3) Let the patient know what to expect during the session up front (how long it will take)
- 4) Do not act rushed or hurried – take time to sit down and have a face to face conversation - build a relationship.
- 5) Be prepared and organized
- 6) Thank the patient for choosing your program.
- 7) Provide education on the benefits of consistence attendance and ask the patient “ wouldn’t you love to have these benefits?”
- 8) Ask open ended questions and ask about their previous experiences with exercise or nutritional changes – what did they like or dislike?
- 9) Ask what goals are and why they are important to them?



## 2. Create the Environment

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- Create a non intimidating and supportive environment.
- Smile
- Introduce the patient to others in the group and other staff members
- Some rehabs use a “buddy system” – have a volunteer or a patient that is about to graduate to guide the patient through the process the first day
- Everyday tell the patient “ I am glad you are here today.



### 3. Help your patients find their soulmate workout

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#### What Is a Soulmate Workout?

The idea of the soulmate workout is finding a type of workout that you absolutely *love* to do, makes you feel great, and gives you results.

Many rehabs across the state have found some creative ways to engage and entertain their patients.

## Making someone do a workout they hate is like...

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The patient's may attend a few sessions- all the while complaining and cursing under their breath because their physician referred them to the program. The very first EXCUSE they think of – they will take as their way out!

# Encourage the patient to try different types of exercise

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There are many ways to exercise – find what moves you!





**The key is help them play around until they find the right fit- their soulmate workout!**

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# 4. Accountability

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- Attendance contracts
- Staff call backs if patient is a no show
- Use of apps to log home exercise and for the staff to encourage healthy behaviors - messaging daily
- Providing feedback on logs

## 5. Overcome Obstacles –Are You Ready for More Volume, Improving Productivity, and EMR charting?

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- Increased volume = increased patients to monitor and chart on may lead to staff stress and burn out
- LEAN and productivity metrics demands on all departments of the health care system
- 2) Electronic Medical Records – will this decrease patient satisfaction?

# The Chatham Experience

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We survive all 3 and thrived!

In 2014 our productivity was 47% - we went through LEAN RIE- we changed our process and started charting in real time (eliminated double charting).

In 2016 our productivity was over 200% for 5 months straight.

# Chatham Experience continued: Handling Charting in EMR

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- We seen no decline in patient satisfaction since implementing the real time charting as evidence by survey scores
- We changed our process to real time charting in the EMR
- We communicated the rationale for real time charting to the patient (real time to enable immediate access of their information by their MD)
- We eliminated the need for “monitor tech” by placing telemetry on big screen
- Improved staff satisfaction – no more charting all afternoon!

**The  
FUN FACTOR  
Of  
Cardiac and Pulmonary  
Rehabilitation**

# Jan Wagoner – Novant Health – FUN FACTOR

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“My friend @ PMC asked if we would consider a music program for our pulmonary rehabbers! I have read the articles in journals pertaining to music therapy and COPD and thought it sounded like a great idea.

Colleen is the manager of the Pulmonary PFT Lab so she sees all of our patients. We purchased YAMAHA Recorders and have been using them in my lecture with Diaphragmatic breathing.

Studies show the benefits of playing music promotes better deeper breathing, utilizing the diaphragm more effectively. Also along with better breathing, this exercise helps loosen mucus

while also exercising dormant lung surface. (Atelectasis) It also provides excellent stress relief!



# Novant Health

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Our patients thought it was great fun and enjoyed the class. We are going to start using the recorders on Wednesdays as part of the warm up. Hannah is familiar (she actually played a song)

and is going to lead the warm up.

Carmen C.Walser, RCP

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# Novant Health

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I have put together some patient challenges that they have really seemed to enjoy!

As Novant is partnered with the AHA Life is Why campaign our patient's participated in a Life is Why challenge for a month. Each week was a different challenge targeting one of our 4 domains in rehab (exercise, nutrition, psychosocial health, and knowledge):

Here's a weekly breakdown of the month long challenge:

## Week 1: Exercise

Get in the recommended amount of aerobic exercise! For every consecutive 10 minutes of aerobic exercise you do (getting your heart rate into your target training zone) you will receive 1 pt. If you do 30 consecutive minutes of aerobic exercise in a day, you will receive 5 pts. (Your exercise session here can count towards your points).

Gold = 30pts      Silver = 20pts      Bronze = 10pts

# Novant Health

## Week 2: Nutrition

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**Eat 3 servings of vegetables and 2 servings of fruits each day! For each serving of either a vegetable or fruit that you eat, you will receive 1 pt.**

**Gold = 30pts      Silver = 20pts      Bronze = 10pts**

## Week 3: Emotional Health

**Help someone out! Do something out of normal for you that will help someone.**

**Examples: write a thinking of you note, make a phone call to a friend, give food to homeless, donate to charity, volunteer to babysit, do a chore for a friend, send a nice email, create a care package, have a friend get active with you (invite them to walk with you or go to the gym with you), etc. Record every act that you do to help someone. For every act that you do out of your normal routine, you will receive 5 pts.**

**Gold = 30pts      Silver = 20pts      Bronze = 10pts**

## Week 4: Knowledge

**Complete the knowledge questionnaire! For each question you answer correctly, you will receive 2pts.**

**Gold = 30pts      Silver = 20pts      Bronze = 10pts**

**I worked with my director to get some neat prizes for the patients including cookbooks, heart rate monitors, and resistance bands. Many of our patients participated during this month and enjoyed the friendly competition!**

# Novant Health continued

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**Another challenge I have done is during the month of April in honor of National Walking Day and preparing for Cinco De Mayo! Basically, a certain number of minutes equated to a mile. Patient's kept track of their exercise time on a log we provided (so they could use it at home too) and at the end of the month of April staff tallied up their aerobic exercise time and translated that into mileage. We had a huge map printed out and posted on our walls in the gym from Charlotte, NC to Mexico! The goal was to "walk to Mexico" so we could have a Cinco De Mayo party in rehab which included heart healthy Mexican snacks and Margaritas! (alcohol free of course)**

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## First Health Fun Factor

We are in a gym that has regular members as well as our patients. We have a white board that we put trivia/riddles on and everyone including the regular members have a ball trying to figure out the answer. The cornier the better! this really helps with socialization as well, the patients try to finure out the answer as well. This is a good way to sneak in extra education as well such as how long should you wash your hands for it to be effective?

# First Health

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**Another thing we do is arrange chairs in a circle and pass around beach balls. We play a left-right game where a person is reading a story and everytime the word left or right is used that is the direction the ball goes. ( can get these stories off internet) We also use a medicine ball for this game on occasion. We also toss the beach balls in the air and see how long we can keep them up. We then make it harder by telling them only use your right hand, left leg etc... not only is this a physical workout, it is a mental one as well. As one of the patients put it "I know we look stupid as heck(thats putting it nicely) but it is alot of fun!"**

**Jill Brown, RCP**

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## Other ideas for fun reported by multiple programs

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- Dance
- Add variety to Group warm up or cool down
- Chair aerobics
- Belly dance
- Hula hoop
- Name that tune
- Wheel of fortune game for education
- And the most common – dress up silly and throw a party for any and every occasion ! FYI - CarolinaEast Healthy System Party Hardy
- Pictures and video to follow at the symposium

# References

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## Leadership & Management

### **10 Strategies to Provide Patients With Superior Customer Service**

*Written by Chuck Lauer, Former Publisher of Modern Healthcare and an Author, Public Speaker and Career Coach | December 20, 2010*

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