Slide 1

Civility in Nursing Education

Dr. Robin Elaine Murray, DNP, RN, CNE
Associate Dean & Assistant Professor of Nursing
Missouri Baptist University

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Slide 2

Outcomes

•The attendee will be able to:

1. Reflect on experience with incivility in the clinical practice setting and/or the nursing education setting.

2. Discuss the impact of incivility at the individual and systems-level in healthcare.

3. Describe methods of addressing incivility in the clinical practice and/or nursing education setting.

4. Formulate methods for addressing incivility from the ground up in the learner's practice setting.

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Slide 3

Nurses Eat Their Young (Meissner, 1986)

• Nursing is a caring profession
• Nurses are caring with patients; unkind to colleagues
• Incivility is pervasive in the nursing workplace (U.S. Department of Labor, 2017)
• Incivility is incongruent with a caring profession
• Incivility can result in poor outcomes for patients (Clark, 2017)
• Incivility is correlative with turnover in nursing (Evans, 2017)

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Slide 4

• **Incivility is disruptive, interferes with the teaching and learning process and causes physiological and psychological distress (Clark & Springer, 2010).**

• **"Incivility can result in life-threatening mistakes, preventable complications, and harm or even death of a patient" (Clark, 2017, p.121).**

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Slide 5

Think-Pair-Share

• Think of a situation in your own practice when a nurse has been laterally or vertically uncivil
• Pair up with someone in a breakout room.
• Share the experience
  • How did you respond?
  • How would you have liked to have responded?

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Slide 6

Incivility- How do YOU define it?

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Define Incivility

- Lateral or vertical violence
- Covert or overt behaviors fall along continuum
- From seemingly innocuous to BOLDY abusive
  - Gossiping, belittling, withholding information/silent treatment, sabotage, verbal attacks, scape-goating, broken confidences, bullying, condescending language, eye rolling, sighs/groaning, sarcasm/rude remarks, passive/aggressive behaviors

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WE Need to Fix it!

- Incivility and bullying undermine a culture of safety
- Battling workplace bullying is Joint Commission imperative (TJC, 2008, p. 2)
- There is a lack of policy & training to manage incivility (OSHA, 2016)
- Address incivility from the "ground-up"

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What can *WE DO* About it?

Presumption: Uncivil behaviors are learned and considered a cultural norm in nursing

What tools do we have?

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What can *WE DO* About it?

- Self-Reflection
- Boundaries
- Communication

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Self-Reflection

Check your filter
- Assume good will

What are your contributions to an uncivil culture?

Have you ever …

Revisit The Code – Provisions 1, 3, 5, & 6 specifically (ANA, 2015)

Take the Clark Workplace Civility Index © [Revised]

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Boundaries

WHAT YOU ALLOW IS WHAT WILL CONTINUE

CALL THE BEHAVIOR

DOCUMENT THE INCIDENT

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Communicate Directly- Assertively

Model & Mentor good communication.

Assertive communication- describe the behavior!

Use your CUS words (Concerned, Uncomfortable, Safety Issue!) & DESC (AHRQ, 2014).

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Pre-Post Comparative Study (Murray, 2020)

Objective:

-Pre-licensure nursing students

-Determine if an educational intervention alters self-efficacy & confidence

-Ability to recognize and deal with incivility

Measure

Self-Efficacy & Confidence

Findings:

The educational interventions had a positive impact on perceived ability to navigate uncivil encounters

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Let's Practice!

TIP: Use the chat box feature in your breakout room to view the scenarios

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Be the Change!

- **Nursing educators & nursing leaders must model civility**
- **Give nursing students & practicing nurses the tools to navigate incivility**
- What are the 3 most important concepts you learned in these last 30 minutes?
- What can you take back to your practice?
- What do YOU need to learn more about?
- How will you BE THE CHANGE?

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Contact Information

- Robin Elaine Murray, DNP, RN, CNE
- Missouri Baptist University
- Text/Voice: 314-583-3245
- Robin.murray@mobap.edu

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