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INTRODUCTION

The American public has consistently rated nursing as the most honest and ethical profession every year for the past decade (Riffkin, 2014). Yet nursing has a dirty little secret; incivility. Incivility is rampant in the nursing workplace with 82% of nurses witnessing it daily or weekly (Dumont, Meisinger, Whitacre & Corbin, 2012). It causes nurses psychological and physical trauma and frequently to leave their jobs and sometimes nursing altogether. The consequences are severe and destructive not only to nurses, but also to patients who suffer decreased safety, and healthcare facilities who experience lost money and time orienting new nurses. Cognitive Rehearsal is one method nurses can use to combat incivility. Addressing uncivil behavior when it occurs may be the most successful in getting it to cease. Several studies have confirmed cognitive rehearsal is an effective method for addressing incivility and lateral violence in the nursing environment (Griffin & Clark, 2014).

COGNITIVE REHEARSAL

Three parts

- 1) Instruction on the method.
- 2) Learning and repeating verbal responses that can be used when encountering incivility.
- 3) Practicing to reinforce the instruction and rehearsal.

METHODOLOGY/RESULTS

- Education intervention on both recognizing and combatting
- One-group pre-test posttest design, (n=27)
- Measure RN participant’s ability to recognize incivility pre versus post education on incivility
- Education does assist nurses with identifying uncivil peer behaviors in the workplace (Wilcoxon matched-pairs signed ranks test Z=-2.48, p=0.01)
- Most (25/27) strongly agreed/agreed education helped them understand interventions to combat incivility
- Participants experienced high rates of incivility and serious negative consequences

10 Most Frequent Types of Lateral Violence (Griffin, 2004, p. 259) and Example Responses

Nonverbal innuendo: Rolling eyes, raising eyebrows, face-making

- I can see there is something you may want to say. It’s alright to say what’s on your mind.

Verbal affront: covert or overt snide remarks, lack of openness, abrupt responses

- I learn better in situations where I get clear directions and feedback. How might we work toward this type of discussion?

Undermining activities: turning away, not available

- When something is not the way I expected, I feel puzzled. Please help me grasp what might have happened when...?

Withholding information: practice or patient

- I think there is more information about this and I believe if I had known all of the facts that it would impact what I need to know or learn.

Sabotage: deliberately setting up a negative situation

- I believe there is more to this situation than is readily apparent. Could we meet privately to discuss what might have gone on?

Infighting: Bickering with peers

- This behavior is not appropriate or professional here. Please end it (then physically move to a different area).

Scapegoating: Attributing all that goes wrong to one individual

- I don’t believe this is the correct correlation.

Backstabbing: Complaining to others not speaking directly to that individual

- I feel uncomfortable talking about him/her/this topic when I wasn’t there, or don’t know the facts. Have you talked to him/her about it?

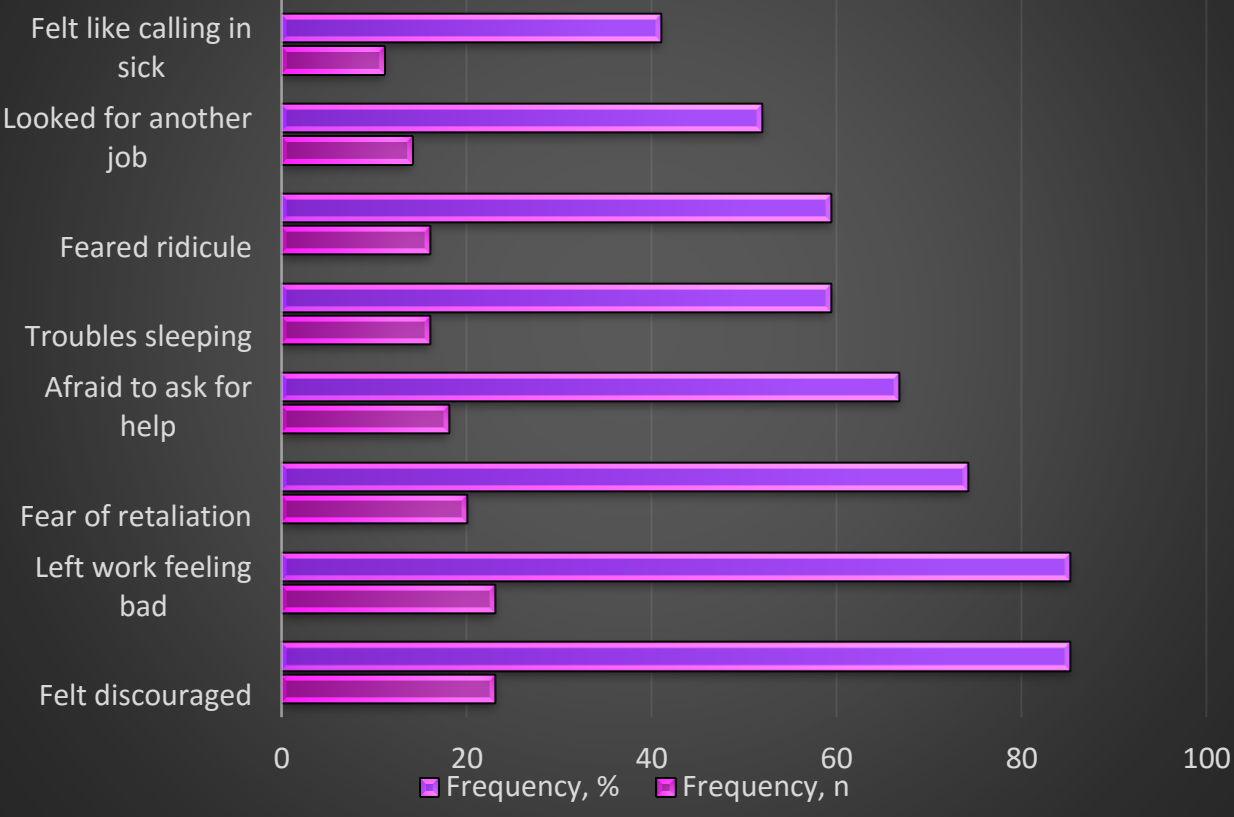
Failure to respect privacy

- It disturbs me to discuss this without his/her OK. That is hear-say and shouldn’t be reiterated.

Broken confidences

- Shouldn’t that remain confidential? I think that was said in confidence. He/she asked that I keep that private

PERCENT OF PARTICIPANTS IMPACTED NEGATIVELY AT LEAST ONCE IN THE PAST 12 MONTHS (N=27)



CONCLUSIONS

- Incivility is rampant and detrimental
- Education is effective in helping nurses recognize and combat incivility
- Cognitive rehearsal is an effective intervention toward combatting incivility

REFERENCES

Dumont, C., Meisinger, S., Whitacre M. J, & Corbin, G. (2012). Horizontal violence survey report. *Nursing* 2012, 42(1) 44-49. doi: 10-1097/01.NURSE.0000408487.95400.92

Griffin, M. (2004). Teaching cognitive rehearsal as a shield for lateral violence: An intervention for newly licensed nurses. *The Journal of Continuing Education in Nursing*, 35(6), 257-263. Retrieved from <http://www.healio.com/journals/jcen>

Griffin, M. & Clark, C. (2014). Revisiting cognitive rehearsal as an intervention against incivility and lateral violence in nursing: 10 years later. *The Journal of Continuing Education in Nursing*, 45(12), 535-542. doi: 10.3928/00220124-20141122-02

Riffkin, R. (2014). Americans rate nurses highest on honesty, ethical standards. Gallup Poll Social Issues. Retrieved from <http://www.gallup.com/poll/180260/americans-rate-nurses-highest-honesty-ethical-standards.aspx>

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