

Title:
Responding When Incivility Arises in the Workplace

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Session Title:
Responses to Workplace Bullying
Slot:
F 05: Saturday, 18 March 2017: 11:15 AM-12:00 PM
Scheduled Time:
11:15 AM

Keywords:
crucial conversations, incivility and workplace bullying

References:
References

Beattie, L., & Griffin, B. (2014). Accounting for within-person differences in how people

Respond to daily incivility at work. *Journal of Occupational and Organizational Psychology*, 87, 625-644.

Malone, B. R. (2016). Intimidating behavior among healthcare workers is still jeopardizing

Medication safety. *Nephrology Nursing Journal*, 43(2), 157-159.

Oyeleye, O., Hanson, P., O'Connor, N., & Dunn, D. (2013). Relationship of workplace incivility, Stress, and burnout on nurses' turnover intentions and psychological empowerment.

Journal of Nursing Administration, 43(10), 536-542.

Porath, C./L., Gerbasi, A., & Schorch, S.L. (2015). The effects of civility on advice, leadership, and performance. *Journal of Applied Psychology*, 100(5), 1527-1541.

Abstract Summary:
Almost a decade has passed since a Sentinel Alert linked intimidating behaviors to medical errors, patient dissatisfaction and adverse outcomes. Workplace incivility, bullying and physical abuse still undermine healthcare cultures of safety. The purpose of this presentation is to describe strategies aimed at individual responses to acts of workplace incivility.

Learning Activity:

	LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
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1. Differentiate workplace bullying and incivility.	I. Workplace intimidation in practice and academic settings a. Incivility b. Bullying c. Frequency and intensity of uncivil/bullying behaviors leading to harm in victims d. Sense of belonging versus alienation e. Linking the behavior to negative outcomes
2. Describe strategies for crucial conversations when incivility occurs.	II. Identifying contextual features a. Honing skills of observation of overt and subtle affronts b. Trivializing the experience c. Normalizing problematic behaviors that has been allowed to continue unchallenged d. Dealing with colleagues too busy and/or too important to deal with victims' claims
3. Formulate a plan that engages key persons to effectively deal with workplace bullies whose behaviors have been normalized.	III. Resilience in the context of empowering nurses who are victims or bystanders of incivility and bullying in the workplace a. Roles nurses play: rescuer, instigator, bystander, victim, target b. Supervisor support plays a pivotal role i. Creating psychologically safe workplace ii. Rescuing victim iii. Minimizing harm iv. Follow-up to disavow intimidating/harmful behavior c. Core Self-evaluation important in minimizing negative effects of incivility/bullying i. Resilience ii. Self-efficacy iii. Empowerment

Abstract Text:

Almost a decade has passed since the Joint Commission issued a Sentinel Alert linking intimidating behaviors to medical errors, patient dissatisfaction, and adverse outcomes. More recent studies confirm that workplace acts of incivility, progressing to bullying and even physical abuse in some cases, continue to significantly undermine the culture of safety that facilitates effective healthcare practice.

While professional comportment policies pay lip service to what 'should occur' in instances of intimidation and bullying, the inherent, complex and subtle contextual elements of those acts present challenges that supersede the benefits of legislated, cookie cutter approaches to their management. As a result, nurses, whether in practice or educational settings, may find themselves ill-supported as they try to navigate the choppy waters of workplace incivility, even when administrators claim to have established guidelines for addressing it. The purpose of this presentation is to describe strategies aimed to directly support individual responses to acts of workplace incivility and bullying.

The investigators used pragmatic utility to synthesize findings from published studies addressing workplace bullying. The work resulted in new insights and guidance to advance understanding of the target-to-victim cascade that occurs for many who are confronted by the confusing assaults of bullies. Moreover, findings speak to the variance of personal responses to workplace bullying and to the significance of organization-wide commitment to establishing a just culture.

Promoting civility and stemming workplace bullying has implications for nurses in all settings. Role modeling professional comportment and implementing policies that recognize the unique responses of

individuals who are victimized by their bully counterparts are essential components of supportive work environments and consistent practice for acceptable behavior. However, these skills do not just happen with exposure and it behooves nurses to add to their personal repertoires these highly specialized interpersonal skills.

Continued allegiance to organizational policies that support narrow definitions of incivility and that recognize only highly visible workplace bullying affronts will not promote workplaces that are safe and healthy, nor will they support the individuals who work within them. This presentation seeks to empower nurses by providing them with a useful skillset and positive coping strategies that are appropriate to the clandestine nature of workplace incivility and bullying.