

2018

Nursing Incivility: The Growing Epidemic

Emily Deedrick

Dyani Sanchez

Follow this and additional works at: <https://knowledge.e.southern.edu/jiur>



Part of the [Education Commons](#)

Recommended Citation

Deedrick, Emily and Sanchez, Dyani (2018) "Nursing Incivility: The Growing Epidemic," *Journal of Interdisciplinary Undergraduate Research*: Vol. 10 , Article 1.

Available at: <https://knowledge.e.southern.edu/jiur/vol10/iss1/1>

This Article is brought to you for free and open access by the Peer Reviewed Journals at KnowledgeExchange@Southern. It has been accepted for inclusion in *Journal of Interdisciplinary Undergraduate Research* by an authorized editor of KnowledgeExchange@Southern. For more information, please contact jspears@southern.edu.

Nursing Incivility: The Growing Epidemic

Emily Deedrick

Dyani Sanchez

November 30, 2017

Evidence Based Paper

A Paper Presented to Meet Partial Requirements

For NRS 497

Research Methods in Nursing

Southern Adventist University

School of Nursing

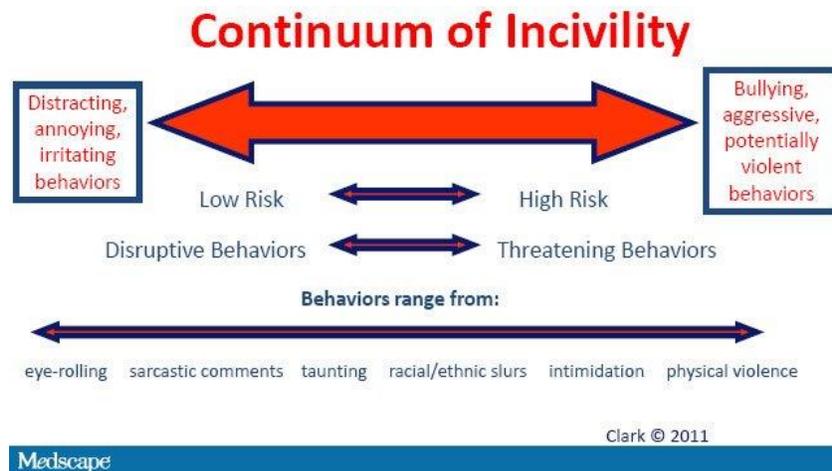
Chapter One INTRODUCTION

Description of the Problem

Incivility is a growing problem in the field of nursing. The dictionary defines incivility as a rude or disrespectful action towards another individual. When incivility occurs on hospital units, nurses feel unsafe and mistreated; therefore, it should come as no surprise that these worries interfere with nursing practice and patient care. Currently on nursing units across America, nurses are bullying one another and creating an unsafe work environment; however, hospital management is not actively seeking to solve this problem. This is leading to a poor retention of nurses on the unit, which will affect patient care negatively and due to this, hospitals are cumulatively losing millions of dollars. The paper will discuss the idea of incivility education as a method of reducing this problem. By teaching nurses how to handle situations where incivility is present professionally, nurses will be able to recognize the beginning of a problem, feel more confident addressing the issue, and put a stop to incivility before it is too late.

Research/PICO Question

Do medical-surgical nurses, when given incivility education, feel more empowered to combat incivility and feel more secure in their workplace? Many nurses ignore incivility because they do not know how to handle this issue properly. With incivility education, nurses can learn how to identify, address, and prevent this inappropriate behavior.



Chapter Two REVIEW OF LITERATURE

Researchers of the examined studies determined how incivility is effecting the healthcare environment and if educational interventions can help combat this problem. The problem with incivility is that it is causing a negative work environment, leading to unsatisfied nurses who are leaving and seeking employment elsewhere. Patients and hospitals have to deal with the negative consequences of incivility. The researchers used the database MEDLINE, through EBSCO Host, to find the research articles presented in this paper. The keywords used for the literature searches were “nursing incivility,” “nursing education regarding incivility,” “quantitative,” “qualitative,” and “nursing incivility in the workplace.” The number of citations found using the database was 20.

Description of Study

Study One

Research design. Lasater, Mood, Buchwach, and Dieckmann (2015) conducted a mixed methods study. The hypothesis chosen by the researchers was education on incivility could decrease incivility on nursing units. The research question addressed by the researchers was: did the nurses see a decreased incidence of incivility behavior and was workplace satisfaction among

nursing staff improved, after receiving incivility education. The purpose of this study was to bring light to the increasing problem of incivility, but also present tangible methods to solve this issue.

Sample. The sample size was 94 staff members (RN, LPN, and CNA) at a hospital for the incivility classes and survey. The researchers then asked for eight volunteers for the qualitative portion of the study, and researchers interviewed them individually. Of those researched, 80% were RNs, 13% were technical or support staff, and 7% were leadership staff. The majority of the population were Caucasian females, 31 years of age or older, who had a baccalaureate or master's degree. The hospital had employed most of the participants for five years or less. Researchers selected the sample by choosing employees who worked on the hospital floor with managers who agreed to participate in this study. The qualitative interview took place at the hospital. The participants took the quantitative survey online. The researchers used the interviews to support the quantitative research they gathered.

Data collection. The data collection tools used were Nurse Incivility Scale (NIS), New General Self-Efficacy Scale (NGSE), Workplace Collective Efficacy Scale (WCES), and National Database for Nursing Quality Indicators (NDNQI). The researchers used the data collected from these tools to comprehend the magnitude of incivility in the workplace.

Data analysis. The statistical test used was the linear mixed effects model. The researchers used this test for longitudinal analyses and because it has fewer assumptions and more flexibility than the standard ANOVA test.

Limitations. The data collected from the study supports the PICO question, if nurses receive incivility education, nursing satisfaction will increase. The biggest limitation to this research is they did not have a larger sample size. Researchers could use a larger sample with

nurses from different hospitals and different cultural backgrounds. If nurses receive proper education on incivility, RN satisfaction will increase, and therefore, will lead to better patient outcomes. The education is helping the units function better currently, but the question arises, “Do nurses need refresher courses in order to maintain a civil work environment?”

Study Two

Research design. Clark, Olender, Kenski, and Cardoni, (2013) conducted a quantitative research study. The purpose of this research was to determine the perception of nursing faculty on incivility between their peers in the workplace. The study conducted was to determine what incivility on a nursing unit looks like. The research question is why incivility is occurring, how much it is occurring, and few have addressed the increasing issues with incivility. The central concepts are the reasons behind incivility occurring, the types of incivility occurring, and the response by nurse managers and hospital leaders.

Sample. Of the participants, 95% were women, 88% were Caucasian, and 97% were from the United States, with the average age being 40 years of age or older. Of the participants in the study, 62% teach in either an associate or baccalaureate nursing program. The inclusion criteria of the study was that participants had to be registered nurses. The exclusion criteria was that if someone was not a registered nurse, they could not participate. The study’s sample relates to the PICO because the main population surveyed in this study was nursing faculty and growing incivility in nursing schools. Nursing school faculty have a direct influence on new nurses. Researchers collected data across 40 states. Researchers conducted the survey in nursing schools with their faculty.

Data collection. The data collection occurred across 40 different states among the nursing faculty. Researchers used the F-FI survey to collect data, then, compiled and tested the

data with statistic software. The researchers used inter-item coefficients to evaluate reliability. Cronbach's alpha software determined reliability. To ensure validity, a pilot test, conducted with 21 nursing faculty, reviewed the F-FI survey. There was no measured bias.

Data analysis. Researchers used SPSS software to analyze the data and provide statistical results. The calculated reliability of the survey was 0.965. This is very good to excellent reliability.

Limitations. The major weakness is that the study describes incivility among the nursing faculty more than it describes incivility in the hospital. The research also does not address solutions to the problem. The strength of the study is that it demonstrates the vastness of incivility in the nursing field and makes a call to action. The study's sample relates to the PICO sample because the study addresses incivility seen in nursing education. This research paper is addressing the usefulness of education, regarding incivility. Nursing school faculty have a direct influence on new nurses.

Study Three

Research design. Abdollahzadeh, Asghari, Ebrahimi, Rahmani, and Vahidi (2017) conducted a qualitative research study. The researchers of this article feel there is little prevention for incivility, and they wanted to research how to help enhance prevention strategies. The purpose of the study is to learn how to prevent workplace incivility from the nurse's perspective. The central concepts of the study are that addressing incivility directly influences patient outcomes in a positive way.

Sample. The sample included 34 participants, of which 29 were female and five were male. The age range is between 25 and 52 years of age. The work experience ranged from 12 to 30 years. The inclusion criteria was that they had to have at least one year of nursing experience

and at least a baccalaureate degree in nursing. No exclusion criteria noted. This fits the PICO because we are studying how incivility affects nurses and patient outcomes. Researchers recruited participants for this study from educational hospitals of Tabriz University of Medical Sciences based on saturation principles. The hospital and the research's workplace was where researchers conducted the interviews. The participants were able to determine the place and time of their interviews. Researchers conducted the interviews for 35 to 65 minutes.

Data collection. Researchers collected the data by recording their interviews with the participants and observing the participants in the workplace, specifically when giving nursing care. Researchers made transcripts from the audiotapes of the interviews and collected field notes taken by researchers observing direct nursing care. Authors did not specify any specific research roles. The researchers established reliability by making sure there were researchers consistently in the clinical setting and consistently discussing their findings. Researchers ensured trustworthiness by requiring more than one researcher to be present when conducting research at any given time. The researchers described their role as conducting interviews, observing in the clinical setting without interference, and analyzing data.

Data analysis. Authors did not specify any specific research roles. They used MAXQDA software version 10 to analyze the data. Data saturation did occur. Researchers saturated the data when there was repetitive information collected, despite additional sampling.

Limitations. We agree with the interpretation of the results. The results were thorough in identifying problem areas and solutions and make sense theoretically. The findings do support the PICO. There are no limitations and the major strength of the research was their desire to identify ways to improve incivility in nursing.

Study Four

Research design. Penconek (2015) conducted a qualitative descriptive research study. The researcher found that nursing incivility begins early, during nursing school and continues into nursing practice. The purpose of the study is to understand how student nurses deal with incivility in the clinical setting and whether they feel comfortable addressing it. The central concepts of the study are understand what incivility in nursing education looks like and if schools are addressing it.

Sample. The sample included six nursing students. The inclusion criteria was that they had to be newly graduated nurses who had graduated within the last 6 to 18 months from any undergraduate program in Canada. No exclusion criteria noted. This fits the PICO because the study looks at incivility that begins in nursing education and affects nurses in practice and the purpose of this paper is to study nursing incivility and the factors that affect it. The researchers conducted interviews of the participants through online public domain blogs.

Data collection. Researchers collected the interviews using online blogs and personal interviews. Authors did not specify any specific research roles. Researchers gathered qualitative data by interviewing the participants individually and recording the described encounters of incivility.

Data analysis. Authors did not specify any specific research roles. The researchers analyzed the data by comparing the recorded interviews of the participants and finding similarities.

Limitations. The limitations of the data are that researchers interviewed a small number of students. For a future study, researchers could interview more nursing students. The findings do support the PICO. The major strength of the paper is that it identified how nursing incivility presents in nursing education and how nursing professionals are ignoring it.

Study Five

Research design. Altmiller (2012) conducted a qualitative research study. The study used focus groups of nursing students to understand how incivility is taking place in nursing education. The purpose of the study is to gain insight into the perspectives of undergraduate nursing students who have witnessed incivility and compare these perspectives to those of nursing professors. The central concepts discovered were that students view nursing professors as escalating nursing incivility and that student incivility is justified when nursing professors act uncivil.

Sample. The sample included 24 undergraduate junior and senior nursing students from four universities, located in the Mid-Atlantic States. The inclusion criteria was that the participants had to be baccalaureate-nursing students in the last two years of the nursing program. No exclusion criteria noted. Researchers interviewed four male students and 20 female students. The students who participated were between the ages of 18 and 45. This fits the PICO because the research examines incivility in nursing education, including from professors. Researchers recorded what the participants of the study had to say in four different focus groups. The participants discussed acts of incivility they had witnessed in nursing education.

Data collection. To gain participants for the study, researchers attended classes at four different universities and asked for students who were willing to share their experiences with incivility in nursing education. The researchers conducted four focus groups and there were three to nine participants in each group. Research assistants audiotaped and transcribed the sessions.

Data analysis. Content analysis examined the transcribed data to find similarities for the data analysis. A doctorate nurse educator, with prior research experience, performed the data analysis.

Limitations. The limitations of the data are that the participants of the study were all from large universities. For a future study, researchers could interview more nursing students from universities with smaller class sizes. The findings do support the PICO. The major strength of the paper is that it identifies the need for, “Faculty reflection, the sharing of experiences, and adequate preparation for classroom management will support an environment where incivility can be deterred” (Altmiller, 2012). With accounts of incivility increasing, nursing professors must learn new ways to prevent and combat incivility.

Study Six

Research design. Thompson (2016) conducted a mixed methods research study. The purposes of the study was to introduce nursing students to an online module to prepare them for workplace bullying. The central concept of the study is to examine how nursing students are using what they learned in nursing school to combat incivility in the professional environment.

Sample. The sample included 50 nursing students from the traditional nursing track offered at a small private university in southwestern Pennsylvania. The inclusion criteria was that the participants had to be enrolled in the final semester of the traditional track of the pre-licensure baccalaureate nursing program with access to online learning modules. Of the 50 nursing students who began the study, 40 students completed it. No exclusion criteria noted. The research study supports our PICO because the study examines how online modules about how to combat bullying in the professional environment can be beneficial with nursing students.

Data collection. Researchers collected data using pre and post surveys. In addition, researchers used an evaluation to gather information about effectiveness of the modules. They used a paired t-test to determine if the pre- and post-survey scores had a statistically significant

difference. Descriptive statistics analyzed the survey responses about the quality of and usefulness of the surveys.

Data analysis. SPSS analyzed the quantitative data. Researchers used a paired t-test to visualize the difference between pre- and post- survey scores.

Limitations. The limitation of this research is the small sample size. For a future study, more nursing students could review the modules on how to combat bullying in the workplace. The findings do support the PICO. The major strength of the paper is that it highlights the need for education on workplace bullying during nursing school and prior to students begin to work professionally.

Outcome variable	Never, n (%)	Once or twice, n (%)	More than twice, n (%)	Total, n (%)
During your education experience in the nursing program, do you have any nursing instructors?				
Put you down or been condescending to you?	51 (44.0)	41 (35.3)	24 (20.7)	116 (100)
Made insulting or disrespectful remarks to you?	71 (61.2)	29 (25.0)	16 (13.8)	116 (100)
Made jokes at your expense?	88 (75.9)	19 (16.4)	9 (7.8)	116 (100)
Accused you of stupidity or incompetence?	92 (79.3)	18 (15.5)	6 (5.2)	116 (100)
Interrupted or spoken over you?	63 (54.3)	31 (26.7)	22 (19.0)	116 (100)
Ignored, avoided, or failed to speak to you?	82 (70.7)	18 (15.5)	16 (13.8)	116 (100)
Yelled, shouted, or sworn at you?	106 (91.4)	6 (5.2)	4 (3.4)	116 (100)
Given you hostile looks, stares, or sneers?	87 (75.0)	23 (19.8)	6 (5.2)	116 (100)
Addressed you inappropriately or in an unprofessional manner?	79 (68.1)	23 (19.8)	14 (12.1)	116 (100)
Criticized or embarrassed you in front of others?	74 (64.3)	30 (26.1)	11 (9.6)	116 (100)
Behaved in a general uncivil way toward others in your presence (insulting remarks, put-downs)?	72 (62.1)	26 (22.4)	18 (15.5)	116 (100)
Made rude gestures toward you?	105 (90.5)	7 (6.0)	4 (3.4)	116 (100)
Was cold or distant toward you?	78 (67.2)	22 (19.0)	16 (13.8)	116 (100)
Sent rude or insulting emails to you?	98 (85.2)	13 (11.3)	4 (3.5)	116 (100)

Chapter Three FINDINGS

Findings

The articles studied reported growing accounts of nursing incivility, in the professional workplace, but also in nursing schools. The researchers of the articles are calling for nursing professors and nurses working in hospitals to make a change. More people need to be aware of

the growing accounts of incivility and more people need to be educating themselves on how to stop this epidemic. To prepare nursing students for any bullying they may while still in school or in the future, nursing schools are incorporating training on how to identify, prevent, and combat incivility. Lasater, Mood, Buchwach, and Dieckmann (2015) and Thompson (2016) conducted research studies to understand how incivility training could help new nurses with self-efficacy. Many new nurses do not know how to be assertive in the workforce. New nurses are often not prepared to combat workplace bullying. Training that begins in nursing education will help prepare nurses to help end this epidemic of incivility occurring among individuals who need to be working together to advocate for their patients' rights.

Clark, Olender, Kenski, and Cardoni, (2013) discussed how incivility is being seen among nursing faculty members. Altmiller (2012) discussed how many of the participating nursing students of their study believed their nursing professors were also guilty of incivility. Some students their rude behavior was acceptable because their professors were acting unprofessionally. Penconek (2015) discovered that incivility among nurses first occurs in nursing schools and continues. To combat incivility, more nursing schools need to include incivility education and teach students how to apply what they learn as they enter the workforce. Education and knowledge breeds a better understanding of why people choose their actions and can lead to a more civil work environment.

Chapter Four UTILIZATION OF RESEARCH

Recommendations/Implications

The research demonstrated a need for more education about incivility during nursing school. Prepared nurses are better able to recognize, prevent, and combat bullying in the workplace. The authors of this paper received little education on incivility. One class period,

during the baccalaureate level, focused on incivility. The writers received no education on incivility in nursing school, and feel as though it needs to be included in the curriculum.

Incivility rates are rising among nurses and nurses must recognize the need for a change.

Application to Practice

As nursing students, the writers of this research paper have been victims of incivility in the clinical setting. The writers have witnessed and been victims of bullying in the hospital and agree that nursing students could be more educated by professors and clinical instructors on how to handle incivility when faced with it in the professional setting. Many nurses have a negative attitude towards nursing students. A negative setting where nursing students feel embarrassed and feel like obligations for their preceptors is not a good learning environment and can be detrimental for patient safety. Professors and nurses must foster an environment of learning and one free of fault and blame early in nursing school and let this transfer into the hospital. More education about incivility in nursing school and continuing education for nurses in the hospital would be very beneficial for all parties involved.

Application to Biblical Practice

In Matthew 22:36-40, the Bible says, “Teacher, which is the greatest commandment in the Law? Jesus replied: “‘Love the Lord your God with all your heart and with all your soul and with all your mind.’ This is the first and greatest commandment. And the second is like it: ‘Love your neighbor as yourself.’ All the Law and the Prophets hang on these two commandments.”

God calls His followers to love Him, and then demonstrate His love to others. No one can fully reflect the love of God, without a relationship with Him.

Further Research

The researchers could conduct further research on the topic of incivility by including more participants, including nursing students, professors, and hospital nurses. In addition, a long-term study could be conducted involving first-year nursing students and following them throughout nursing school and then as licensed nurses. Many of the studies included in this research paper included samples of primarily Caucasian females. More male nurses and minority nurses could be included to understand how nursing affects them and if it seen more in these groups. Incivility can affect anyone, so everyone must be involved in the prevention.

Chapter Five CONCLUSION

Conclusion

Incivility is a growing issue in hospitals and in nursing schools. Research found on the topic of incivility supports that a majority of nurses and nursing students have either been victims or been witnesses of workplace bullying. Some researchers are exploring how education on the topic of incivility in nursing school and as continuing education classes can aid in the prevention of incivility. Do medical-surgical nurses, when given incivility education, feel more empowered to combat incivility and feel more secure in their workplace? Many researchers are finding that nurses who participate in incivility education describe the classes as helpful. Researchers could develop more studies to understand if nurses who receive incivility training have higher levels of job satisfaction. Incivility is a growing issue in healthcare and is an issue that can negatively influence patient care. Nurses must advocate for their patients, but rarely are they taught to advocate for themselves, but ought to, before patients suffer the effects.

References

- Abdollahzadeh, F., Asghari, E., Ebrahimi, H., Rahmani, A., & Vahidi, M. (2017). How to prevent workplace incivility?: Nurses' perspective. *Iranian Journal of Nursing and Midwifery Research*, 22(2), 157-163. doi:10.4103/1735-9066.205966
- Altmiller, G. (2012). Student perceptions of incivility in nursing education: Implications for educators. *Nursing Education Perspectives (National League for Nursing)*, 33(1), 15-20. doi:10.5480/1536-5026-33.1.15
- Clark, C. M., Olender, L., Kenski, D., & Cardoni, C. (2013). Exploring and addressing faculty-to-faculty incivility: A national perspective and literature review. *The Journal of Nursing Education*, 52(4), 211-218. doi:10.3928/01484834-20130319-01
- Lasater, K., Mood, L., Buchwach, D., & Dieckmann, N. F. (2015). Reducing incivility in the workplace: Results of a three-part educational intervention. *Journal of Continuing Education in Nursing*, 46(1), 15-24. doi:10.3928/00220124-20141224-01
- Penconek, T. (2015). Perspectives on bullying. *Alberta RN*, 71(1), 28-29 retrieved from www.nurses.ab.ca/content/carna/home/learn-about-carna/publications-and-reports/alberta-rn-magazine.html.
- Robertson, J. E. (2012). Can't we all just get along? A primer on student incivility in nursing education. *Nursing Education Perspectives (National League for Nursing)*, 33(1), 21-26. doi:10.5480/1536-5026-33.1.21
- Stokowski, L. A., RN M. (n.d.). The downward spiral: Incivility in nursing. Retrieved from https://www.medscape.com/viewarticle/739328_2
- Thompson, R. (2016). Preparing new nurses to address bullying: The effect of an online educational module on learner self-efficacy. *MEDSURG Nursing*, 25(6), 412-417.

Todd, D., Byers, D., Garth, K. (2016). A pilot study examining the effects of faculty incivility on nursing program satisfaction. BLDE University Journal of Health Sciences. Retrieved from- <http://www.bldeujournalhs.in>