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Commentary

Be the Change

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From as young back as I can remember I wanted to be perfect. I wanted to be everything I could to everyone. I also knew I wanted to be a nurse. Even as a young girl I saw the nurse as a perfect angel. They provided the care to make a person better. This intrigued me.

So naturally upon high school graduation I applied and thankfully was accepted to a Baccalaureate Nursing Program. This was like a dream come true. Nursing school was extremely challenging, but also a great period of growth on my life.

Upon graduation, I was eager to enter the professional workforce. I wanted to make a difference. I knew I could make a difference. It's funny how dreams, ideas, and thoughts can be shattered by destructive behaviors. The older, more seasoned staff would loudly criticize me in the middle of the nurses' station, in front of others. It was done during my orientation and throughout the time I was employed at this institution. This group of nursing staff would unfailingly criticize, finds error, and appear to relish in making me upset and appear fragile and incompetent in front of others. I started to notice that these particular nurses would do this to all new hires or new graduates. Workplace bullying is a significant issue confronting the nursing profession [1]. According to Pfaff, Baxter, Jack, & Ploeg (2014) demanding, stressful, and impudent work environments contribute to poor morale, decreased productivity, increased absenteeism, and greater job turnover among nurses [2]. New hires and newly licensed nurses require peer support to succeed in their new roles within an institution. This lack of encouragement, comfort, and assistance may lead to increased staff turnover, recruitment issues, and retention difficulties. Unfriendly, unsupportive behavior may have a greater impact on new nurses, who are dependent on the help of colleagues [3]. This ongoing instability in healthcare can ultimately contribute to early burnout, and lead to unsafe working conditions, poor patient care, and increased healthcare costs. However, conversely, supportive work environments facilitate the transition to the role of registered nurse [2]. Even though

I was observing this I felt like I was suffering silently and was so mixed up as to what to do. No one said anything to stop it, but we all had to see it. It made everyone uncomfortable, but no one wanted to talk about it. I knew this behavior was flawed and I did not deserve this, but I did not know who to go to when presented with this bullying behavior. I wanted to get out of this situation, although I still wanted to be in this wonderful profession. According to Lasater, Johnson, Ravert, & Rink (2014), a recent study reiterated that students and new hires proactively seek practice mentors [4]. Therefore, exposure to incivility further puts them at risk for replicating incivility. Considerations of leaving this position and even leaving acute care nursing for good started to plague my mind. According to Lowenstein (2013), bullying has an impact on the workplace environment and nurses in general; it can cause low morale and in some cases can make nurses seek employment elsewhere or even leave the profession of nursing entirely [5].

Given these points and in an attempt to promote patient safety, The Joint Commission (2008) put forth a zero tolerance for intimidating behaviors among hospital staff [6]. Nurses report that incivility negatively impacts patients by impeding and delaying care and disrupting patients' faith in the staff [7]. It is evident that incivility continues to pose a threat to both nursing staff and patients. Effective strategies to foster civility, essential skills must be taught within nursing education, and how education and practice can work together to foster civility in the profession are essential to improve this situation.

The literature describes educational strategies to address incivility among nursing students [8]. Just as simulation based learning is as effective for patient clinical situations it can be utilized for workplace situations. Student actors can portray nurses involved in uncivil interactions and role-play many potential situations. Students subsequently can discussed by pre brief and debriefing what they had observed and asserted that a strategy to better prepare them to manage incivility in the workplace [8]. In a follow-up study [8] it is noted that the

participants in their previous study [8] reported being better prepared to address incivility as new graduate nurses [8]. Some ways that an individual can respond to a particular situation may include:

- Communicate clearly
- Recognize intrinsic dignity of all persons
- Maintain clear boundaries
- Use de-escalation behaviors
- Maintain civility even in the face of incivility
- Suppress defensive reactions
- Model civility
- Encourage teamwork, respect, and camaraderie
- Update civility skills; they are learned behaviors

Always communicate with a mutual purpose and a mutual respect. Giving constructive feedback to a new hire, new graduate, or long standing colleague is a learned skill and takes practice. Institutions need to have mandatory education session for those who will be in mentoring positions. The individuals can assist the organization in changing culture. They can spearhead a movement within the organization. They can be the leaders of change. Feedback whether positive or negative should always be an unbiased reflection of events.

Furthermore, include staff in town meeting PowerPoint presentations and discussions on incivility, including its definition and evidence-based real life scenarios of what the picture of incivility looks like. Staff must understand how incivility develops, its manifestations, and impact on individual mental health, patient safety, and quality patient outcomes. Goals of all education and in-services should be to raise staff awareness of incivility in general as well as to set the stage to introduce strategies to combat such behaviors specific to that organization or unit.

This is the most respected profession by the American public. All nurses need to recognize and assist in changing the culture of nursing when it comes to bullying. The first year of practice is a vital confidence-building stage new graduates and any bullying behavior, whether covert or obvious may negatively impress on the new nurse.

Collectively, all nursing professionals need to speak up and speak out about recognition and prevention of such uncivil behaviors in a workplace environment. Collectively, nursing staff need to take back the profession and develop a culture of acceptance, love and support. This culture shift will improve care for our patients, morale on our units, and love for each other. It's essential for every healthcare professional and the organizations that employ them to work together to build a safe, healthy workplace environment. As I moved throughout my career, I realized that I can change my surroundings. I can

be the change agent that is needed to improve my unit. As you can be too!

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