Stopping Incivility: An Evidence-based Educational Intervention

Cathleen Opperman DNP, RN, NEA-BC, CPN
Professional Development Nurse Specialist
Nationwide Children's Hospital, Columbus Ohio
cathleen.opperman@nationwidechildrens.org

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Nationally Ranked in 10 Pediatric Specialties

Founded 1894
Columbus, Ohio
Licensed Beds 464
Leased Beds 140
6 Offsite NICUs

Over 1 Million Visits/Year
10,000 Employees
Level 1 Pediatric Trauma Center
Second Largest Neonatal Center in USA
Description
Whether labeled as coworker incivility, horizontal hostility, bullying, lateral violence, or intimidation, these deviant / disruptive behaviors contribute to poor patient outcomes.

Come explore our 8-hour interactive workshop: the setup, interactive activities, evaluations, and process outcomes.

Objectives
Discuss the impact horizontal hostility has on the profession of nursing.

Describe an effective educational strategy involving knowledge, skills and attitudes to minimize horizontal hostility.
Problem

The Joint Commission has made improved effectiveness of communication among caregivers a National Patient Safety Goal

Rosenstein and O’Daniel (2005)
- Surveyed 1,509 (1,091 nurses & 402 physicians)
- Overwhelming number perceived disruptive behavior and poor communication between physicians and nurses affected
  - patient safety,
  - patient and staff satisfaction,
  - quality of care

Problem
In civility / Hostility / Disruptive behavior fosters a toxic work environment which
- Increases staff burnout
- Reduces employee engagement
- Contributes to poor employee satisfaction
- Causes lack of retention
- Increases turnover rates

These factors affect
- Patient safety
- Patient and staff satisfaction
- Quality of care

Problem
Nursing Learning needs assessment:
- Communication
- Assertive behaviors
- Interdisciplinary teambuilding

Initial focus on helping nurses with
- Moral distress,
- Bullying,
- Intimidation
- Aggressive behavior
THE SET-UP

Educator Forum

- System-wide Educator Group - need to address
- “Keep It Simple”
- Used already developed content
  - Martha Griffin’s article
  - Kathleen Bartholomew DVD
  - Added our own exercises
- Measure participants perception of comfort with peers and managers before and 6-12 months later.

Martha Griffin

Teaching Cognitive Rehearsal as a Shield for Lateral Violence: An Intervention for Newly Licensed Nurses

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Pebble Effect Workshop

- 8 hrs: includes 3.5 hrs of DVD, group exercises
- 50-150 per session depending on room size;
- 6-7 per table; assigned seating
- Learning Strategies:
  - Read-before-you-come
  - Self reflection
  - Role playing
  - “I Can”/ “We Can” post-its
  - Case studies
  - Practice writing DESC statements
  - Storytelling
  - Writing action plans
INTERACTIVE ACTIVITIES

Reflection

List Positive NOUNS in your life
(people, events, things, experiences, etc.)

Therapeutic Use of Self
Give an example of when you felt good because you “made a difference” through therapeutic use of self.
Charades
Introduce yourself, years at NCH and where you work.

Each person at the table picks a paper from the center of the table. It has a form of lateral violence discussed in the Griffin article. As you introduce yourself, act out your form of LV for the group to guess.

Case Studies
Read case scenarios out loud and small group identify overt and covert behaviors.
Katie, a float nurse, has been rooming a patient for over 15 minutes. Sandy, another nurse opens the door and asks, “What is taking so long in here?”

Katie replies, “I am reviewing the medication list. There are a lot of medications on this list.”

Sandy sharply says, “Well, there are other patients and you need to get your act together. Updating that list can wait. Hurry it up in here.”

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**DESC statements**

Write DESC statement using template.

**Snooping and wasting time**

D. When you say things about other team members when they are not present.
E. I feel uncomfortable because they are not here to defend themselves and upset because it is interfering in our work load.
S. Therefore, I want us to work together in eliminating unhealthy conversations in our group.
C. So that we can all feel safe and be more productive.

**Respect**

D. When you speak to me like I don’t know the responsibilities of my job.
E. I feel frustrated and unappreciated for all of my work.
S. I need you to speak respectfully to me and go over what responsibilities I am not fulfilling.
C. So that I can improve my work habits and feel appreciated.
3 Month Following

- Emails are sent in the months after the workshop
  - “I cans”
  - “We cans”
  - DESC examples

PROGRAM EVALUATION

What Happened

- Offered 18 times from Sept 2013-Jan 2015
- @1700 interdisciplinary team members had participated by June 2015 with 4 more scheduled.
Impact so far...

Measuring Impact

- Anecdotal - earliest
- Initial Survey - for initial 8 groups
- This 2015 Survey - 10 groups from Feb 2014 until Jan 2015
- Metrics - to come
  - Compare turnover, absenteeism, staff satisfaction; 2013 and 2016 data

2015 Survey of 10 groups

- Survey link sent to 588 participants by e-mail
- Participants - 6-12 months after workshop
- 251 responses; 43% return rate
Before Workshop and Follow up Surveys
6-12 months later

Asked to score
- Respected by my PEERS
- Feel supported by my PEERS
- Can safely express myself to my PEERS
- Respected by my MANAGER
- Feel supported by my MANAGER
- Can safely express myself to my MANAGER

OUTCOMES

Survey: Workshop and Follow Up
Describe a situation when you used a concept from Pebble Effect Workshop.

Themes:
- Celebrate others and self
- Compliment/Encourage others
- Conflict Resolution using DESC
- Stop gossiping; No audience
- Assume Positive Intent
- Increased Self awareness
- Build social capital
Comment section

- Confront more instead of internalizing, remaining angry
- Trying very hard to not assume ill intent
- Had an open & honest discussion with peer about negativity
- Recognized some passive-aggressive behavior on my part.
- Held myself accountable for my contribution to the conflict.

References


JOURNEY TO BEST OUTCOMES
Through best people & programs

2013-2018 Strategic Plan
We are on the Journey to Best.
Our vision: Best Outcomes in everything we do, together delivering the best health care for children.