Chapter 1
Incivility

ABSTRACT
Nursing professionals experiencing incivility and bullying within the workplace are affected physically and emotionally. The sole purpose of the healthcare environment is to provide therapeutic intervention to the ill. Nurses should not anticipate going to work within healthcare facilities to be harassed, disrespected, and threatened. Be it a nurse working within a clinical environment or employed as a nurse educator in an academic setting, incivility and bullying can cause harm. Chapter 1 will provide an overview of the terms incivility and bullying. Uncivil conduct will be examined through a case study involving a perpetrator to provide insight into how a bully thinks and reacts with regard to their own behavior.

WHY WRITE THIS BOOK?
The decision to write this book comes from over 29 years of nursing practice encountering incivility and bullying in the workplace in my roles as a direct care nurse, nurse educator, supervisor, consultant, and director. In my role as a licensed clinical social worker, I have also provided therapy and counseling to health care professionals that experienced incivility and bullying in the workplace. Nursing is a profession that women and men enter with the purpose of providing health care to others. Caritas is one of the driving factors for many persons who enter the profession.
The academic and clinical rigor that encompasses nursing training, focuses upon the five components of the nursing process; assessment, diagnosis, planning, implementation, and the evaluation of patients in the care of nurses (Alfaro, 2014; Taylor, Lillis, Lynn & LeMone, 2015). Foundationally, the nursing process for student nurses and nursing professionals, fosters the development of clinical reasoning, critical thinking, and clinical judgment (Alfaro-LeFevre, 2013). Application of higher level thinking in clinical practice by nursing professionals correlates with safer clinical environments and positive patient health outcomes (Quality and Safety Education for Nurses Competencies, 2019; American Nurses Association, 2015). Incivility and bullying behaviors can distract nurses and impede their ability to provide safe care to patients.

I am concerned that a profession founded upon the care of their fellow human beings, is being associated with poor behavior and unprofessional conduct in the workplace. Be it in academia, administration, or clinical environments, uncivil conduct must be addressed. When incivility and bullying is ignored and allowed to permeate within workplaces; everyone—patients, families, other health care professions, organizations, and nurses—are affected.

Everyone Falls Short

There is no perfect workplace because there are no perfect employees. Recognition of the finite mind(s) of self and others, helps to understand the human condition and why imperfection will always exist. However, how we cope and communicate within the workplace is an effective means of discussing the subject of incivility and how employees and employers can develop workplace environments that are healthy.

Effective Communication

Let’s begin by examining the basics of communication, of which I will refer to as, Communication 101. Communication is a process by which verbal and non-verbal cues are relayed using a pattern of sending and receiving of information from two or more people. Communication can be deemed effective, when the sender of information and receiver have a clear understanding of the intended message (Berlo, 1960). Therefore, it is imperative that messages be clear, concise, and be explained in a way that uses language and physical gestures that are comprehended by both parties.