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# How can we save lives with civility?



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Raising awareness of incivility within healthcare through the use of lectures and workshops. Exploring the effects rudeness and inapproachability has on patient outcomes. Disseminating the literature and research through these talks, which demonstrates how incivility affects resilience and how a lack of social support can impede effective team working and diminish staff and student satisfaction within the clinical and practice learning environments (PLE).



## BACKGROUND:

The health board currently has a myriad of strategies to tackle incivility, bullying and harassment within the trust. This is as a result of the Cwm Taf staff survey findings from 2018. Where 18% of staff reported some form of abuse at work which resulted in feeling stressed and unable to fulfil their roles to the best of their ability. The strategies in place run concurrently rather than collectively. An 'All Wales' approach was called for as a result but is yet to become a reality. In addition, the Nursing and Midwifery Council (2018) states that programmes, placements and the learning environment must have team work embedded, with a positive ethos. With respect for innovation, diversity and inter-professionalism.

Although minimal knowledge exists of strategies to tackle incivility, qualitative research undertaken in the practice learning environment, suggests that the issue exists across disciplines and is not explored with any depth. There is also a lack of understanding of the perception and wider effects of rudeness within the workplace. The civility saves lives project exists, but is in its infancy. The initiative proposed explores the findings from the staff survey and those found through research within the PLE to support this fully inclusive educational enterprise.

## AIM:

- To develop a series of communication-focused experiential workshops that will enhance participants' understanding of civility and exploration of its effects, therefore improving culture (Zhang et al 2012).
- Identifying situations that may give a rise to incivility, with exploration of human factors.
- As key educator within an acute medical setting it is of the utmost importance to ensure a positive learning environment is established (NMC 2018).
- To enhance the learning experience by articulating issues around civility in workplace and learning environments. Enabling multi-disciplinary professional development, fully incorporating health board staff. Emphasising the importance of effective communication skills in deterring incivility, thus improving health outcomes for patients.
- Consider facilitating the use of visual aids to alert others to our mood, to let others know of our own fragility. As well as being instantly reactive when incivility occurs, with the use of cue cards to provide real-time feedback to those being uncivil.

## METHODOLOGY:

- A critical review of the literature to establish that incivility impacts patient outcomes and employee well-being.
- Explore existing strategies endorsed by the health board surrounding professional behaviours and standards.
- A review of call for actions document produced by health board executives.
- Analytical review of staff survey results.
- Multiple research methods used, a systematic review of the literature to ensure robust statistics and to fully identify the problem.
- Action Research model framework in the form of a PDSA cycle was used to continually reflect and ensure the initiative is fit for purpose (NHS Improvement 2018).

## PLAN:

- Engage relevant stakeholders. Quality improvement teams, health board educational leads, senior doctors and corporate teams.
- Liaise with Civility Saves Lives to involve guest speakers.
- Establish an initial audience – likely to be undergraduate nurses, enabling a benchmarking process.
- Project lead being a transformational leader, with the passion, drive and dynamism leading an authentic approach.
- Use a humanist approach, to facilitate exploration of the subject matter, its effects and explore outcomes (McIntosh et al 2011).
- Formulate an evaluation form to ensure learning outcomes met and quality assurance by involving the learner (Elassy 2013).



## DO:

- Facilitate a communication focused workshop.
- Provide students with a questionnaire to examine their initial understanding of incivility and their experiences of it within practice (Bates 2019).
- Establish perceptions on why incivility might happen in clinical practice and disseminate the research of its effects on the whole healthcare community.
- Inclusive learning styles to be operated for equitable access to learning, particularly covering such a complex subject with potentially complex outcomes (Higher Education Authority: HEA 2015)

## ACT:

- Form a summary of the learning outcomes achieved and an overall summary of the workshop (Stuart 2013).
- Further changes and quality assurance assessed in order to ensure inclusivity of all future participants. Engaging multiple staff groups.
- Engage relevant stakeholders. Quality improvement teams, health board educational leads, senior doctors and corporate teams.

80% of people facing rudeness lose time worrying about it, with 25% taking it out on service users – patients!

Prevalence of incivility within the nursing profession ranges between 21% and 70%

Incivility can lead to increased stress, anxiety and a reduction in the belief of one's clinical competence and ability

