Civility Saves Lives: Why behaviour matters

Helen Silver-MacMahon, VetLed

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Civility Saves Lives: Why behaviour matters

Helen Silver-MacMahon
Introduction and learning objectives

• To explore the **core concepts** of incivility
• To understand the **impact of incivility**
• To discover the **facts and science** of incivility
• To understand **what we can do** when faced with incivility
incivility

/ɪnsɪˈvɪləti/

noun

rude or unsociable speech or behaviour.
How do *we* define incivility?

Rudeness is defined by the interpretation of the recipient, regardless of intent.
What does rudeness look like?

**Blatant**
- Verbal aggression
- Aggressive body language
- Public humiliation
- Invading personal space
- Labelling/stereotyping

**Insidious**
- With-holding information for personal gain
- Inconsistent expectations
- Generalising
- Closed body language
- Dismissive
- Inappropriate humour

Rudeness is defined by the interpretation of the recipient, regardless of intent.
Can you recall a time when you experienced or witnessed incivility?
What happens when someone is rude?
Being Human
Why can we never think of the right reply when someone is shouting at us?
Pool of information
Recipients of rudeness

80% lose time worrying about this
78% reduce their commitment to work
63% lose time avoiding the offender
61% reduction in cognitive ability
48% reduce their time at work
38% reduce the quality of their work (deliberately)
25% take it out on patients
12% leave

The price of incivility.

Porath C, Pearson C. Harv Bus Rev. 2013 Jan-Feb;91(1-2):114-21, 146
Witnesses

• 20% decrease in performance

• 50% decrease in willingness to help others

The price of incivility.
Porath C, Pearson C. Harv Bus Rev. 2013 Jan-Feb;91(1-2):114-21, 146
Our clients

• 75% less enthusiastic for the organisation

The price of incivility.
Porath C, Pearson C. Harv Bus Rev. 2013 Jan-Feb;91(1-2):114-21, 146
“Seeing or experiencing rude behaviour impairs working memory and thus cognitive ability.

It has been shown to damage the immune system, put a strain on families, and produce other deleterious effects.”

Christine Porath, 2016
Witnessed incivility has a more detrimental impact on empathic people.

Minimally empathic people minimally cognitively affected by incivility.

Highly empathic people significantly more cognitively adversely affected by incivility.

Patients

A survey of Doctors and Nurses...

75% identified bad behaviours within their teams that led to medical errors

25% were convinced that these behaviours contributed to the deaths of their own patients

A survey of the impact of disruptive behaviours and communication defects on patient safety.

Alan Rosenstein and Michelle O’Daniel
What do we know in veterinary healthcare?

What is the evidence?
### Behaviour in veterinary practice survey 2017

<table>
<thead>
<tr>
<th>Behaviour</th>
<th>Total reports</th>
<th>Nurse</th>
<th>Vet</th>
<th>Practice manager</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number reporting at least one behaviour</td>
<td>677</td>
<td>390</td>
<td>252</td>
<td>13</td>
<td>22</td>
</tr>
<tr>
<td>Shouted at or screamed at</td>
<td>213 (31%)</td>
<td>127</td>
<td>71</td>
<td>13 (54%)</td>
<td>8 (36%)</td>
</tr>
<tr>
<td>Physically intimidated</td>
<td>45 (7%)</td>
<td>30 (8%)</td>
<td>13</td>
<td>1 (8%)</td>
<td>1 (5%)</td>
</tr>
<tr>
<td>Had things thrown at you in anger</td>
<td>46 (7%)</td>
<td>32 (8%)</td>
<td>11</td>
<td>2 (15%)</td>
<td>1 (5%)</td>
</tr>
<tr>
<td>Been belittled in front of clients</td>
<td>234 (35%)</td>
<td>147</td>
<td>75</td>
<td>4 (31%)</td>
<td>8 (36%)</td>
</tr>
<tr>
<td>Been belittled in front of other staff</td>
<td>495 (73%)</td>
<td>306</td>
<td>163</td>
<td>10 (77%)</td>
<td>16 (73%)</td>
</tr>
<tr>
<td>Criticised minutely</td>
<td>442 (65%)</td>
<td>277</td>
<td>142</td>
<td>9 (69%)</td>
<td>14 (64%)</td>
</tr>
<tr>
<td>Aware of others talking negatively about you</td>
<td>343 (51%)</td>
<td>204</td>
<td>120</td>
<td>6 (46%)</td>
<td>13 (59%)</td>
</tr>
<tr>
<td>Been on the receiving end of ‘sly glances’</td>
<td>325 (48%)</td>
<td>209</td>
<td>101</td>
<td>5 (38%)</td>
<td>10 (45%)</td>
</tr>
<tr>
<td>Been deliberately overloaded with work</td>
<td>194 (29%)</td>
<td>108</td>
<td>76</td>
<td>5 (38%)</td>
<td>5 (23%)</td>
</tr>
<tr>
<td>Repeatedly been allocated the worst jobs</td>
<td>184 (27%)</td>
<td>121</td>
<td>56</td>
<td>2 (15%)</td>
<td>5 (23%)</td>
</tr>
<tr>
<td>Had your work deliberately sabotaged</td>
<td>136 (20%)</td>
<td>83 (21%)</td>
<td>44</td>
<td>2 (15%)</td>
<td>7 (32%)</td>
</tr>
<tr>
<td>Felt deliberately excluded or ignored</td>
<td>297 (44%)</td>
<td>187</td>
<td>92</td>
<td>5 (38%)</td>
<td>13 (59%)</td>
</tr>
<tr>
<td>Had your authority undermined</td>
<td>339 (50%)</td>
<td>174</td>
<td>145</td>
<td>11 (85%)</td>
<td>9 (41%)</td>
</tr>
<tr>
<td>Been the subject of false / malicious accusations</td>
<td>209 (31%)</td>
<td>115</td>
<td>80</td>
<td>6 (46%)</td>
<td>8 (36%)</td>
</tr>
<tr>
<td>Other</td>
<td>80 (12%)</td>
<td>53 (14%)</td>
<td>22</td>
<td>2 (15%)</td>
<td>3 (14%)</td>
</tr>
</tbody>
</table>

- 73% of respondents had been belittled in front of other staff
- 65% had been criticised minutely
- 54% of practice managers had been shouted at or screamed at
- 48% of nurses felt deliberately excluded or ignored
Findings

• Higher levels of client rudeness than co-worker rudeness

• Nurses experience more rudeness from senior staff and co-workers, than vets.

• Rudeness from senior staff and co-workers is significantly:
  • linked to job satisfaction
  • correlated with job turnover intention.

• All sources of rudeness are correlated with burnout
Coping strategies

‘Talk/vent to other staff members and family about it’.

‘Try to avoid confrontation and keep a low profile’.

‘Talk to a colleague about it and try to rationalise the situation’

‘Personally, I have found the most effective technique to be to speak with an individual one-one at an appropriate time and ask what was going on?’

‘Talk it out with one trusted colleague. We come to the conclusion that we need to put it in the ‘f*** it bucket’. We have a big bucket. Try not to overthink when i get home’.

‘Get a new job. If this happens at work it means there is an environment where it is tolerated. That won’t change its much easier to leave’.
What makes you love your job and what makes a good workplace?
The aim: Great workplace culture

• Teamwork
• Support and inspiration to achieve your personal goals
• You don’t need to watch your back
• Able to speak freely and voice concerns
• Just culture
• Promotes civility
• Encourages mastery of skills.
Psychological safety

“Psychological safety is a culture of respect, trust and openness where it’s not risky to raise concerns and ideas”  Grant
The benefits of psychological safety

Positive Emotional state creates a state of trust and curiosity

Releases dopamine and oxytocin

Improves learning and retention
Broadens the mind
Improves resilience & persistence
Improves cognitive ability

Barbara Fredrickson and Shaun Achor
Universities of North Carolina and Harvard
How do you build psychological safety?

• Framework as learning problem “we need everyone's brains and voices in the game”
• Acknowledge fallibility
• Model curiosity and ask lots of questions
That’s the way it's always been...
What do you look like on a bad day?
Recognising incivility in ourselves
The ‘3 C’s’ of Civility

Conscious: Awareness of the impact of our thoughts/actions/words

Continuous: Acknowledge our responsibility to ease the experience of others

Consistent: Civility at the forefront of our thoughts when we self reflect
Non-Verbal Communication
Scenario

• You have just arrived for your shift ready for a busy day working in theatre

• Prior to leaving the evening before, you asked the nurse working late to package and sterilise some surgical instruments that you know are needed for the operating list

• It has not been done
Nonviolent Communication

Clearly expressing how I am without blaming or criticising

Observations

Feelings

Needs

Requests

Empathically receiving what you hear without hearing blame or criticism
Nonviolent Communication

When I...
I feel...
Because I need/value...
Would you be willing to...?

Observations
Feelings
Needs
Requests

When you...
You feel...
Because you need/value...
Would you like...?
Addressing Incivility - Empathic communication

“EMPATHY HAS NO SCRIPT. THERE IS NO RIGHT WAY OR WRONG WAY TO DO IT. IT’S SIMPLY LISTENING, HOLDING SPACE, WITHHOLDING JUDGMENT, EMOTIONALLY CONNECTING, AND COMMUNICATING THAT INCREDIBLY HEALING MESSAGE OF ‘YOU’RE NOT ALONE.’”

BRENÉ BROWN

EST.2014 | VALOURINE
Science behind empathy

Voicing concerns calms down Amygdala response

Allows us to reconnect with frontal cortex
Compassion

‘Concern for others’ suffering and a desire to alleviate it’

Goetz, Keltner and Simon-Thomas 2010
Cup of coffee conversations...
calling it out with compassion
The ‘Vanderbilt’ Pyramid

Center for Patient and Professional Advocacy

VANDERBILT UNIVERSITY
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The 'Vanderbilt' Pyramid is a hierarchical model that categorizes concerns and interventions based on the nature and frequency of the issues reported. The pyramid is divided into four levels:

1. **Single concern**: This is the lowest level, where concerns are reported by individual witnesses. If the concern is egregious or mandates formal intervention, it moves up to the next levels.

2. **Apparent pattern**: At this level, there is a pattern of concerns that have been reported. The intervention is guided, aiming to correct the behavior.

3. **Pattern persists**: If the pattern continues without change, it reaches this level. The intervention is formal, often referred to as 'disciplinary' intervention.

4. **No change**: At the top of the pyramid, the concern persists despite efforts to intervene. At this level, 'call it out with compassion' is recommended.

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VetLed
ENHANCING PERFORMANCE IN PRACTICE
Calling it out with compassion

2 purposes
- Care about the person you are talking to
- Land the information

Check-in
- Refer to the event using open questions
- Help them to understand how it was received
Addressing incivility as an organisation
Think HALT
Do you or your team members often feel...
Hungry and/or Thirsty
Anxious and/or Angry
Late and/or Lonely
Tired

Plan Prioritise Pause
Plan ahead. At the start of the day, set out a suitable plan for short breaks for each team member. This is not intended to create disruption.

"Do I pause or not?" - recognise, as a team, the value in taking a break before pressing on. It is recommended to take at least 20 minutes every 5 hours.

Think HALT: support each other to take your break. Can you mitigate any of the HALT factors now?

Adapted from materials developed by Guy’s and St Thomas’ NHS Foundation Trust

What can you do to mitigate the stressors?
There are only good people working here today. Sometimes, however, we can get overloaded; sometimes we are not our best selves and if this happens we are sorry. If you let us know we will deal with this by letting the person know and, because they (like you) are good people, they will do their best to correct this.
Addressing incivility
- As leaders in an organisation

• Lead by example
• Observe and understand how people treat each other
• Create a safe environment to raise concerns
• Show gratitude for kind and compassionate behaviour
• Prioritise attitudes surrounding civility when hiring
• Articulate values and set expectations
• Consider training and/or coaching
Summary

• To explore the **core concepts** of incivility
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• To discover the **facts and science** of incivility
• To understand **what we can do** when faced with incivility
VetLed inspire, create and champion positive veterinary culture for our people, our patients and our profession.

For more information visit our website, drop us an email or follow us on social media

Facebook discussion groups...
• Veterinary Human Factors Community
Any questions?