CIVILITY

THE SILENT KEY TO CIVILITY IN NURSING EDUCATION & ADMINISTRATION

GOALS

1. To share experiences of nurses in the realm of Civility.
2. To present nursing education behaviors that are fair, informative, and civil.
3. To identify specific nursing administrative silent methods and habits that promote Civility.

KEYWORDS FOR APPLICATION

1. Civility
2. Incivility
3. Nursing Faculty
4. Nursing Administrator
5. Reflection
6. Paraphrasing
7. Entropy

DERIVATION OF THE TERM CIVILITY

In the late 14th century, the word "Civil" was derived from Old French. The term was related to public life, behaviors befitting a citizen, and good citizenship. In the 15th century, it meant "State of Being Civilized." By 1540, it related to "Behavior Proper to a Civilized Person." Today, especially because we are nurses, we require CIVILITY (in all its historical and current forms) to be a necessary part of our nursing behavior.

Civility involves acts of kindness and caring. It is a simple word with a magnitude of simple to complex behaviors. Being nurse administrators and educators, we can say that every day requires our attention on behalf of others' needs. Indeed--we strive to practice the tenderness of Civility to humankind and other living creatures. It is part of us. It describes our basic nature. When we fail to exhibit Civility, thereby being uncivil, we forget our commitment to nursing. Let us be civil mentors to all nurses—especially nursing students by teaching them the unfortunate consequences of incivility and, conversely, the pride in Civility.

May we never forget who we are as professional nurses and the history that has always identified nurses as a civil part of our society.

To understand Civility, we must first understand what Civility is NOT. We will begin with the "NOT." It is like knowing the bad to appreciate the good!

THE UNCIVIL IMPLICATION: TO BUSY TO CARE---GO AWAY!

Standing silently at the nursing administrator's open door, I saw a female nursing administrator engrossed in the content on her desk computer. The desk was located in the middle of the room with the computer facing away from me. I could see her facial expression as she looked at the computer screen. Her facial expression screamed of disgust and concern. She grimaced and shook her head at what she saw on the computer. Her face contorted again and again with no awareness of my presence (or maybe not caring that I was standing at her open door). No vacant chair for a visitor was in sight. Needing work, I said, "Hello, may I talk with you?" Looking up with a flat affect and a "go away" look on her face, she said, "No, I am busy! You will need to come back at another time!" "All right," I said. I turned to leave and said to myself. "No! I will not return at another time!" "YOU did not care enough be respond to my need in a kind and helpful way." In keeping with my promise to myself as an outcome of uncivil administrative behavior, I never returned to contact her again.

This type of experience and obvious rejection always results in a negative outcome for all parties concerned. The nursing leader had an opportunity to make a meaningful and lasting positive impression on a fellow nurse. Caring for others, even at the expense of an administrator's untimely intrusion by another nurse, is Civility's historical basis.

THE UNCIVIL IMPLICATION: HOW DID YOU GET THIS FAR WITH YOUR NURSING EDUCATION? WHAT A MISTAKE!

Several times I have heard graduate nurses state that their nursing administrators/educators made insensitive and hurtful remarks about their student nursing academic behavior(s). One nursing administrator said that maybe she (a nursing student) did not have what it took to be a nurse and recommended that another profession might be a better choice. Another nursing program director told an educationally advanced nursing student that she (the student) came across to others as not very smart, but testing seemed to be just fine. Interesting—Both nursing students were devalued and felt less than they, as students, thought they academically deserved.

PLEASE REMEMBER THIS: Unnecessary and unkind words that intentionally demean a nurse or nursing student are remembered by that student and remain hurtful for a lifetime. Without question-- an unfortunate example of incivility!

THE CIVIL ROLE OF A NURSING ADMINISTRATOR AND EDUCATOR

Civility by nursing administrators and educators means accountability for what is said and done to nurses and nursing students. It is a lack of Civility (active incivility) to communicate insensitive comments. There is always an effort and need to reinforce a nurse's or student's goodness. Never tear down the dreams and any positive success toward an educational goal. Admonish current and past positive actions. Support actions that will (in most cases) lead to work or academic success.

Academic success means a nursing student is admitted to a nursing program and succeeds in a nursing course by meeting the pre-established criteria, standards, and policies of a program or academic study. There is a need to help with student success. Faculty "help" means civil support, kindness, and

encouragement for all nursing students accepted into a nursing program. Negative comments deter positive outcomes.

As a nursing leader, you are trusted with the development of many students who love the idea of serving others. Never let it be said or remembered by any accepted nursing student that you, as a nursing administrator or faculty, discouraged an accepted nursing student's dream related to helping others! Always help students succeed in their level of ability through positive reinforcement. Never EVER have a student recall a nursing instructor's uncivil acts, comments, or inferences intended to remind students of their possible negative human inadequacies. A student never forgets in their lifetime such an insane lack of civil support!

If the civil approach includes advising a student, the effort is presented as *encouragement for future success.* Ongoing documentation (including date) of civil efforts to help a student toward academic success is advised. Latent after-the-fact statements that infer or state the student historically did not meet educational or behavioral standards is too late. If the nursing student achieves academic success by meeting the stated course criteria, objectives, and standards, positive faculty *civil praise is the expected professional response.*

Therefore, the nursing administrative reality is this:

Encouraging nursing students to succeed requires little effort. No one said that nursing education was easy. We admit it is a challenge for the best of students. It is different than a course in math or science. It adds the civil component of helping humankind.

Suppose a student has chosen to be a nurse and experience this wonderful feeling of giving kindness to others. In that case, it behooves the nursing faculty to support a student's hard-working effort within reason. Together (faculty and student) can often find common ground to encourage and succeed at academic success.

The nursing course/program expectations that lead to academic success:

Course performance expectations are encouraged and made clear to students by establishing course criteria, goals, objectives, and policies *before* exposing students to any academic course. Nursing program expectations are also outlined in writing by nursing administrators.

Some nursing program administrators and faculty feel it is important to inform nursing students when a student's academic performance is not conducive to performance expectations and might even result in state board exams' failure. A civil approach to such an informing philosophy and policy is best presented to students initially at the beginning of a nursing program as possible positive and helpful faculty input during the educational experience.

Nursing program and course criteria, including goals, objectives, standards, and policies, are important as <u>predetermined</u> academic success criteria. Therefore, well-prepared and thoughtful course expectations decrease the possibility of latent (after-the-fact) personal administrative and instructor <u>biases and discrimination</u> related to any student. The process of informing students of less than satisfactory performance involves a timely sharing of perceived and tested academic performance relative to already (previously) established expectations. Once a student has met an educational milestone (no matter how small), it is positively rewarded—hence, an act of educational Civility! Most educators consider this approach to be a civil, honest, and professional approach to nursing education.

UNSPOKEN CIVILITY IN A NURSING ADMINISTRATOR'S & EDUCATOR'S OFFICE

A nursing administrator or educator's office is sacred ground for imparting feelings of anxiety, concern, rejection, and acceptance. It just takes a little nonverbal consideration by an administrator/educator to say (without words) that "I care about what you want/need to tell me." Through visual acts, the true sense of caring (Civility) emerges. Consider the following recommendations:

*Leave your door open when you are willing to accept visitors. Close the door when you are too busy with work that cannot be interrupted. When someone appears at your open door, stand and invite the visitor into your office/space. Make a welcoming statement to the visitor. Call the person by name, if possible. If the visitor's name is unknown—ask—then use his/her name during the conversation! (People love to hear their name!) Ask the visitor, "What can I do for you today?" (Or a comment just as nice and accepting of the visitor). Determine where this visitor works, and what he/she does within the organization, what hours he/she works. If it is a person not employed, ask who they are, who they represent, or any other question that helps you, as an administrator/educator, better understand their role as it involves a situation. Put the total picture together—the face, the name, his/her location within the facility/organization, or their intent or purpose for the visitation.

*The goal is to provide a comfortable, informal atmosphere for conversing with the visitor. Refrain from having a table between you and the visitor. A table is not an object to lean on or become an obstacle barrier between a nursing administrator/leader and a visitor. A table is a place intended to hold things, such as books and papers. A table might be appropriate for projects or round-table discussions and written material. Sitting on one side of the table with the visitor and facing your visitor might be an option.

*When you are not in the office, leave a message on your door as to how you can be located, contacted by phone, and when you plan to return.

*Arrange your office into two areas—one area with a desk, computer, files, etc. The other site is a less formal area where you can sit across or next to the visitor. If you don't feel you have enough room in your office, consider putting the desk against the wall. Moving the desk away from the center of the room makes more room for facing a visitor for a one-on-one conversation. Verbally invite the visitor to have a seat in the less formal area. With the desk against the wall, conversation exchange is encouraged by turning your chair away from the desk. It, then, allows for conversing with a visitor sitting in a chair

across from you. Your office furniture arrangement says you care (or don't care) about truly listening to the message. Your furniture placement—is it currently a sign of your Civility or incivility? --- you decide!

*If you have your computer on the desk when it is against the wall, the computer could be turned so that the visitor is in a comfortable position to watch any computer presentation you, as an administrator/leader, desire them to view.

*Civility is encouraged by giving your full attention away from other work distractions. Sit directly in front of the visitor. Lean forward and look into their eyes. If you require a visitation from this person at another time due to a time-constraint or need to acquire related information about the topic, make it known. Make another arrangement regarding another time. Perhaps there is a more *mutually* convenient time for a more extensive visit. Attention to the problem/concern is more likely to occur when there is uninterrupted time.

*Make an initial verbal statement confirming your appreciation for his/her visit. Know the name of the visitor. Say out-loud his/her name. If you don't know his/her name, ask. Consider, "Hello, it is nice to see you (say his/her name). Make a note to yourself if you need to remember this person's name in the future.

*Your room/office is to be a place of intellectual exchange, problem-solving, decision-making, and foremost a place where every visitor feels welcome and his/her message is heard. Maybe your office is not an appropriate or convenient place for a private conversation. If so, find another place!

*Your nursing administrative/faculty job (as stated in your job description) should require you to respond intellectually and in a caring way to questions or concerns. Use problem-solving expertise. Represent yourself as a true example of nursing compassion and dignity in your communication. Consider asking related questions to understand the reason for the visit. Use open-ended questions requiring the sharing of cognitive/intellectual information. The increase in verbalization regarding a problem or concern increases shared understanding, rather than asking questions that need only a "yes" or "no."

*Consider the urgency of the message brought to you. Know the predetermined definition of a crisis when you see or hear about it to avoid a tragedy! That is, know intellectually and experientially how long you might have before the message/problem/concern becomes an insurmountable problem or a disaster.   If the message you hear is not clear, try to understand and clarify the *inferred, implied, intended, or an underlying* message.

*Use the communication skills of Reflection by repeating to the visitor one or more keywords you have heard—encouraging the visitor to expound on these words to increase understanding of the desired message. Or, Paraphrase by repeating in your own words what you think you have heard. Confirmation of what you heard helps assure a civil and appropriate response.

*Watch the visitor's body language to determine if what you have interpreted to be the verbal message appears accurate. Does the visitor's body language confirm your understanding of the message? Does the visitor need an enhancement to the message to promote your correct and thorough understanding?

*This total exchange--an invitation to sit down and use communication skills to hear a message requires your full attention. If the phone rings, do not answer it. Hopefully, the phone has a message in place from you when it is inappropriate to interrupt a conversation. The phone message says: "This is (state your name and title). Please leave a message and phone number, and I will return your call as soon as possible." There is nothing more irritating than to have the nurse administrator/educator with whom you are talking answer the phone! The message is lost. Attention is diverted.

*Clarify the problem or concern. Encourage visitor input to help resolve the problem (if the reason for the visit is a problem). Make a mutual plan for the next "move" to fix the problem or concern or improve the situation. Watch the demeanor and body language of the visitor. If you are successful as a mediator, you will hear a change in the tone of the visitor's voice, see physical relaxation as he/she sits in the chair, observe a smile, or hear a statement of appreciation. All aspects of behavior that you note will confirm or disconfirm your success in the practice of Civility.

*Thank the visitor for coming to see you and sharing thoughts, etc. Make an appropriate gesture that denotes a shared understanding of the meeting's closure. Be sure you have determined how to communicate with the visitor in the future—name, email, phone number, or other means. Record this information where it is convenient and accessible in the future.

TELEPHONE CALLS

Cell phones are as "smart" as nurse administrators/educators choose to make them. Cell phones usually allow for the programming of the acceptance or nonacceptance of phone calls. Phone calls programmed as "acceptable" phone calls from individuals are calls that are necessary or desired. They are professional and work associates, friends, family members, and perhaps a person who has visited your office. Their name shows on the phone screen. When your programmed "acceptable" phone calls show on your phone, you know who is calling. Say "Hello" to the caller on your phone by addressing him/her by name. It is a nice way to increase *Civility* on a device known to allow or disallow (by your choice) the acceptance of phone calls.

By programming acceptable and unacceptable phone calls, unnecessary calls during the work-day are thwarted. Numerous scam calls seem to occur too frequently. It is important to be selective about personal communication due to the time and mental attention it involves. Having such communication control is "power-rewarding," and knowing how to control phone communication attempts with a welcoming response is a necessary part of being a civil, effective, and productive nursing administrator/faculty member.

RECORD KEEPING

A nursing administrator/educator is a busy person! How do you "juggle" everything and every conversation on a busy day and then try to remember conversations from an earlier time? To help with remembering, acquire an email address from every visitor with whom you have a conversation regarding a problem/issue/concern. The purpose of the email is to *share a post-script* of the visitor's

meeting date, important discussion topics, and final decision(s)—at that time--regarding the important issues or problems discussed. Sending a reiteration as to what was understood to be the issue/problem and resolution (at that time) allows for confirmation that you did or did not understand his/her intended message. It also confirms what you intend to do about the topics of the conversation. In review, it provides a reminder as to your intended commitment.

Entropy (universal movement toward degrading change) occurs in all things—even messages and processes to resolve problems/concerns need to be updated relative to changes. Keeping facts straight and revised can be challenging. Timely notes and computer updating are reminders of specifics and a means of confirming a resolution plan as "things" change.

A special email of "Thank You" to a visitor who took the time to trust in your ability to respond appropriately to a concern or problem is an act of Civility.

Record keeping allows easy access and an opportunity to reclaim information at a given point in time relative to a past conversation. Record keeping needs to occur in <u>every</u> exchange of important information!   Keep a notepad (or other means) in your pocket for an easy reminder of original and necessary updating related to each situation.

We could say that nursing administrators/faculty are the "Civil Engineers" of the involved facility/organization—constantly surveying situations and monitoring possible outcomes.

ON-THE-JOB MEETINGS

Nursing meetings occur for many reasons—change of shift, family conferences, in-services, committee, etc. Certain people (staff or otherwise) attend. However, nursing responsibilities require patients/residents to come before everything else. Their safety and immediate needs are paramount.

When an individual is mandated to be in a meeting and does not appear, does/should the situation concern the meeting leader?

Civility says that there might be a reason for that person not to be in attendance! Common sense also says that it might be prudent to find that person in the building and see if there is a problem with their nonattendance.

Nurses sometimes have to make logical safety decisions on behalf of a patient/resident or safety measures. These decisions might keep a nurse from attending a scheduled meeting. Taking the time to locate a non-attending nurse expected to be in attendance might be the extra help needed to save a patient's life or maintain safe working conditions. Compassion and Civility would mean that the non-attending nurse is located and helped resolve the problem or safety measures that keep him/her from the meeting.

Attending a scheduled meeting is NOT always considered as "most important." We know, as nurses, who and what is "most important!" Professional Civility means putting a patient's/resident immediate and necessary caring needs and safety before all else when making choices.

Meeting minutes can be shared with a missing nurse from a meeting after the patient crisis or safety concern is resolved. This post-meeting sharing should be known and accepted under some unexpected situations. Civility results when a required nurse's nonattendance is recognized as important for a patient/resident or a safety issue.

Composure in the face of unexpected happenings is a sign of professionalism and positive control that speaks loudly of Civility. Civility understands the uncontrollable incidents and emergencies of life as an outcome of caring for others.

RECOMMENDED READING

Communication by this author
Entropy by the author
The logic of Civility by this author

LAST THOUGHTS

IN A WORLD WHERE YOU CAN BE ALMOST ANYTHING YOU WANT TO BE---BE KIND!

In *Humankind*, Bregman cites a parable.

An old man says to his grandson: "There's a fight going on inside me. It's a terrible fight between two wolves. One is evil—angry, greedy, jealous, arrogant, and cowardly. The other is good—peaceful, loving, modest, generous, honest, and trustworthy. These two wolves are also fighting within you and inside every other person, too."

After a moment, the boy asks, "Which wolf will win?"
The old man smiles, "The one you feed."

ALWAYS FEED KINDNESS AND A CARING ATTITUDE—CIVILITY!

AUTHOR: Carolyn Taylor, Ed.D. M.N. R.N.