AANA, AORN, ASPAN Position Statement on Workplace Civility

POSITION STATEMENT

American Association of Nurse Anesthesiology (AANA), the Association of PeriOperative Registered Nurses (AORN), and the American Society of PeriAnesthesia Nurses (ASPAN) support the development of collaborative, comprehensive facility policies that address the identification, mitigation, evaluation, and reporting of uncivil behavior; intervention and accountability for uncivil behavior; and maintaining professionalism in the perianesthesia and perioperative environment.

AANA, AORN, ASPAN BELIEVE:

• Civility in the perianesthesia and perioperative environment will lead to a safe culture for all.

• It is the responsibility of employers and all health care professionals to create an environment that is free of distracting, disruptive, or violent behaviors. Understanding what constitutes healthy, acceptable behavior is essential.

• Identifying the difference between incivility and bullying is also crucial. The words incivility and bullying are often mistakenly inferred to have the same meaning; the terms are not interchangeable. Incivility is addressed by transforming culture. Bullying is commonly addressed in workplace policy and the code of conduct.

• The mission, values, and code of conduct of a health care setting should address the importance of a healthy work culture. The following four components provide guidance and measures for creating facility policy related to workplace civility:

  1. Organization Assessment for Quality Improvement

     The Occupational and Safety Health Administration (OSHA) recommends conducting a full workplace assessment of conflict and disruptive behaviors to inform a workplace violence prevention program. Elements of a comprehensive program include management commitment, employee involvement through staff and supervisor training, and well-documented written records to prevent workplace violence and incivility.

  2. Organizational Policies and Resources

     • Code of Conduct

     The American Nurses Association Code of Ethics states, “The nurse creates an ethical environment and culture of civility and kindness, treating colleagues, coworkers, employees, students, and others with dignity and respect.” All health care professionals are expected to act professionally and respectfully.
• Zero-Tolerance Policy for Incivility

A zero-tolerance policy can help minimize abuse and possible harm to employees. OSHA requires that employers provide a safe workplace where employees can report workplace violence incidents and disruptive behavior without fear of retribution, criticism, and discrimination from peers or leadership.²,⁶

• Just Culture

Just culture refers to a safe and reliable environment in which the foundation of transparency, safety, trust, and accountability is established and maintained between the facility’s staff and the patients it serves.⁷

• Initial, Ongoing, and Post-Event Employee Support

Employees should have access to an employer-provided counseling service, clergy, peer support, or other employer support services to address stressful situations.¹

3. Ongoing Education, Stress Management, and Conflict Management

All members of the health care team should receive ongoing education specific to workplace incivility and other disruptive behaviors, with a focus on effective conflict resolution and communication skills.¹,⁸ These interventions are necessary for adopting a culture of safety. Additional education topics include assertiveness training, diversity training, and stress management.⁹ Education and training can be conducted in a classroom setting, online, or in real time with safety coaches present.²

4. Embrace and Acknowledge Civility

All members of the health care team should demonstrate civility and expect civil behavior in return, demonstrated through civil communication, tolerance, respect, responsibility, and positive interpersonal interactions.¹⁰

RATIONALE

Workplace civility is an essential component of a healthy work environment.¹¹ In health care, a healthy work environment allows for optimal patient safety and quality patient care secondary to staff’s physical and mental well-being.¹ A culture that supports awareness of others helps decrease psychological stress, increase patient and staff satisfaction, enhance productivity, and reduce health care costs.¹,⁸ Bullying, horizontal violence, aggression, harassment, intimidation, manipulation, threats, overt and covert acts of violence, microaggression, condescending tone, or physical violence within the workplace are morally unacceptable behaviors that should not be tolerated.⁵

Civility in the workplace is everyone’s responsibility and is inclusive of all levels and positions. Representing the professional nurses who work in the perianesthesia and perioperative environment, we can influence the culture of safety in a positive way that will improve the lives of the health care team members and improve patient outcomes. Through a systematic approach, we commit to working together to eliminate workplace incivility within the perioperative environment. Four guiding components can foster a safe and healthy work environment by promoting active elements for recognizing, responding to, and
reporting disruptive behaviors. Ultimately, collaborative kindness should prevail to ensure positive, effective communication and promote a thriving culture and workplace environment.

GLOSSARY

Awareness of others: Observing verbal and nonverbal clues and understanding the underlying emotion and impact on individuals.

Bullying: Repeated, targeted, unwanted harmful actions intended to humiliate, offend, and cause distress in the recipient either in a physical or online setting. Bullying actions include those that harm, undermine, and degrade. Actions may include, but are not limited to, hostile remarks, verbal attacks, threats, taunts, intimidation, and withholding of support.12 “Bullying often involves an abuse or misuse of power, creates feelings of defenselessness and injustice in the target, and undermines an individual’s inherent right to dignity.”13,14

Culture of safety: An important responsibility for all team members to cultivate and preserve a healthy environment for both patients and staff. The Institute for Healthcare Improvement details nine components of a culture of safety: leadership, psychological safety, accountability, teamwork and communication, negotiation and conflict management, transparency, reliability, improvement and measurement, and continuous learning.15

Incivility: Any “form of rude and discourteous actions, gossiping and spreading rumors, and refusing to assist a coworker. All of those are an affront to the dignity of a coworker and violate professional standards of respect. Such actions may also include name-calling, using a condescending tone, and expressing public criticism.”13,14

Just culture: “A just culture balances the need for an open and honest reporting environment with the end of a quality learning environment and culture.”17

Perianesthesia and Perioperative environment: Inclusive of the operating room, perianesthesia settings, office-based setting, preadmission testing unit, preoperative area, postanesthesia phase I area, postanesthesia phase II area, and extended stay unit where different phases of surgical and anesthesia care are rendered.

Perioperative health care team: Includes all perianesthesia and perioperative staff working in an office-based setting, preadmission testing unit, preoperative area, postanesthesia phase I area, postanesthesia phase II area, or extended stay unit; all staff working in the OR and central processing areas; anesthesia providers; surgeons; and ancillary staff from the pharmacy, lab, and blood bank who work ad hoc in perianesthesia and OR settings.

Workplace violence: “Any act or threat of physical violence, harassment, intimidation, or other threatening disruptive behavior that occurs at the work site. It ranges from threats and verbal abuse to physical assaults and even homicide.”16
References

10. Magley VJ. Enhancing civility at work - with attention to the healthcare sector. CPH News and Views. 2010;17.

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