Leadership, Civility, and the ‘No Jerks’ Rule

Executive Summary

- Nursing organizations and hospitals are not immune from the ravages of incivility.
- Toxic behavior can range from the very serious bullying and sabotage of very destructive people to the annoying and hard to cope behavior of just plain jerks.
- When a unit does not have a clearly defined “No Jerk” rule and infrastructure to support healthy behavior, communication suffers and errors occur.
- Nurse leaders have the opportunity of changing the self-interest behavior of jerks in our communities of caring.

Hospitals and Health Care organizations are a reflection of the culture of our country. Many authors decry the state of declining civility in our society and in our organizations. Carter (1999) writes that the barbarians are truly at our doors and that the ability to create a functional life in a community is being taken over by the emphasis on one's own self-interest and individual rights. He also believes incivility is being fueled by the violent metaphors allowed in our language. Forni (2003) also notes that civility is rapidly turning to incivility in our culture. His view is that civility is part of an ethical code that we must live by, and the breakdown in these codes of ethical behavior has allowed incivility to grow and flourish. He writes about 25 rules that can bring a framework for civil and ethical behavior back into the workplace. And while civil behavior is desirable in the workplace to create the healthy environment we all want to be apart of, Gonthier (2002) notes that the effect on employee energy and productivity of the individual and the organization is a very serious problem. Civility is not just a nice concept to have at work. It is necessary for the orderly functioning of our organizations.

Incivility in Hospitals and Health Care

Nursing organizations and hospitals are not immune from the ravages of incivility. However, it doesn’t have to be that way. For example, Dan Wilford, the former CEO of Memorial Hermann Healthcare System in Houston, explained to this author that he believed in the “No Jerks” rule. This meant that he didn’t hire jerks; and if they were discovered, appropriate action would be taken. It was his ethical belief that the work of health care could not be accomplished with jerks overpowering the good work that needed to be done. To that end, he established the “Institute for Spiritual Leadership” with required courses and other programs to support the leadership and staff in the organization to lead in healthy, fulfilling ways.

Defining Jerks

Frost (2007) defines “toxic employees” as those who are rude, temperamental, abusive, spread gossip, create factions, distort communications to their ends, and sabotage work processes, colleagues, and managers. Eventually, organizational performance suffers. Staff may become distracted by this behavior and withdraw to protect themselves from these people. Sutton (2007) lists 12 characteristics (The Dirty Dozen) which includes personal insults, invading personal territory, uninvited physical contact, threats and intimidation, sarcastic jokes and teasing, toxic e-mail, humiliation, public shaming, rude interruptions, two-faced attacks, dirty looks, and treating people as if they are invisible. He describes two tests for spotting these people: (a) does this person create a feeling of oppression, humiliation, deenergizing and make one feel worse; and (b) does the person target others less powerful? Sutton points out the damage done to the victim, to the innocent bystander, to the perpetrator, and the cost to the organization in performance and managerial, legal, and human resources costs. The price to the organization is significant and cannot be ignored.

Toxic behavior can range from the very serious bullying and sabotage of very destructive people to the annoying and hard to cope behavior of just plain jerks. While the behavior of jerks might be less destructive than the very toxic, aggressive behavior of bullies and saboteurs, it can be just as difficult to cope with in the work environment. The preceptor who talks down to the orientee, who reiterates that nursing schools don’t teach as well as they did when the preceptor was in school, and who blames versus creates a learning environment when the orientee makes a mistake are common examples of jerks that new grads commonly encounter. This behavior doesn’t qualify as bullying but it is equally dehumanizing and difficult for a new grad to handle.
Why Are There Jerks?

There can be two very divergent explanations for this behavior. The first is that the person has that kind of personality and will inevitably act that way. When this person fails at creating chaos, he/she will move on to another venue to keep acting out this behavior. Another explanation is that a toxic environment creates toxicity in individuals and a failure of leadership allows this behavior it to exist (Frost, 2007). Probably both explanations are viable and the accuracy would depend on the individual and the situation. We know there are nurses who always have to be “super nurse” and need to portray others as stupid. These nurses, traditionally labeled the “Queen Bees,” became this way because of a variety of reasons. Whatever the explanation, we know that we are obligated to create healthy environments in which the patients can be assured of safety. The behavior of jerks cannot be allowed.

Developing a No Jerk Culture

In health care, we are dependent upon collaborative relationships to create safe outcomes for our patients. When a unit does not have a clearly defined “No Jerk” rule and infrastructure to support healthy behavior, communication suffers and errors occur. Poor communication is the leading cause of reported sentinel events, according to the Joint Commission. We cannot afford distractions from the work of patient care that dysfunctional members of the health care team can cause. We can learn from other organizations that have developed the rule of not allowing toxic people to poison their workplace.

It is important to clearly define the behavior that is not allowed. Sutton (2007) describes companies that have clearly articulated this stance. Southwest Airlines not only supports a jerk-free staff, but is also very aggressive in not letting any passenger who is a jerk abuse their employees. Barclays Capital has clearly articulated a “No Jerk” rule. The Men’s Warehouse in their philosophy states that they will respond immediately to anyone regardless of position who is degrading another. We in nursing can look at “best practice” outside of health care to build the best programs possible.

Once the philosophy and behavioral expectations are clearly established, the next step is to hire against that philosophy and to internally implement the standard with educational and support programs to help everyone achieve the standard. Monitoring the effectiveness of the interventions is necessary.

A leader or manager might want to ignore the problem and hope it will go away. Or the person might feel she does not have the skills to intervene correctly. This is the time the leader/manager must reach out for help. The costs of ignoring this problem are enormous both from a patient safety stance and in the very high cost to the organization from productivity and litigation.

When You Have to Work With Jerks

There will always be situations where there are jerks. You can become the brunt of their nasty e-mails, sabotage, and negative behavior. Several strategies will help you deal with jerks.

1. Take care of yourself: Emotionally, it is important that you do not personalize the attacks, although this can be very difficult. Professionally, you need to keep documentation of the incidents in case the behavior escalates to bullying. Consult with your boss and others and develop a plan.

2. Always take the high road. At no time should you ever allow yourself to drop down to the same level of behavior. This means never answering hostile e-mails with anything other than grace and dignity. It means keeping your own counsel and not discussing the situation with anyone except the appropriate people in the organization. Everyone has a dark side and events like this can precipitate anger, vengeance, or depression. Retaliating with behavior that is inappropriate is absolutely unacceptable.

3. Assume that a workable relationship can be established. Withdrawal from the person is probably the most natural reaction. Withdrawal makes it easier for the person to continue the behavior because, as Carter (1999) explains, it is easier to be hostile to someone you do not know well. Forni (2003) notes that incivility thrives among strangers and rudeness is often halted when people get to know each other. The game is often over when the person develops a relationship with you and mutual areas of concern and collaboration are found.

4. Reach out to experts when all else fails for advice and counsel. This is no time to go it alone. When one is in a difficult situation such as this, thinking can be distorted. Reality checks from mentors and experts will help guide you.

Summary

There are jerks in this world. There are jerks at work. As managers and leaders we are obligated to insure that people have a healthy environment in which they can be nurtured and grow. Patient safety cannot be compromised because we allow jerks to create chaos. This is a serious issue that is very expensive in terms of the toll it takes on people, patients, and the organization. However, there are solutions so we must act. Jerks don’t need to be a part of the culture of nursing. Incivility does not need to exist in hospitals and health care facilities. As Carter (1999) notes, the barbarians are truly at the door and this is true of hospitals and of nursing. However, we have the opportunity to change the self-interest behavior of jerks in our communities of caring. That is what leadership is all about.

REFERENCES