DISRUPTIVE BEHAVIOR – A THREAT TO PATIENT SAFETY

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Conflicts of interest disclosure

I have no conflicts of interest with regards to this presentation.
Disruptive Behavior
Disruptive Behavior

- During an emergency intubation the anesthesiologist berates and uses foul language towards the respiratory therapist for not having the proper equipment available during the procedure!

- When a respiratory medication is written for a patient that does not require inhaled medication intervention. The therapist phones to inquire about the order and is admonished and told they just need to give the order that is placed!

- During an ECMO deployment the physician throws a cannula across the room and demands the some more competent provides them with the correct size!
Disruptive Behavior

- This common “toxic, uncivil, disruptive, or intimidating” theme among healthcare professionals can be seen in many facets of our personal and work lives...
- 2008 survey of nurses and physicians at more than 100 hospitals revealed...
  - 77% Witnessed physicians engage in disruptive behavior.
  - 65% Reported witnessing disruptive behavior by nurses.
- 25% of healthcare workers believe that disruptive behaviors are positively correlated with patient mortality, and 49% stated that intimidation by another practitioner resulted in misadministration of medication. (Felblinger DM, 2008)
- Prevailing belief that unprofessional actions increased the potential for medical errors and preventable deaths.
- No more than 2-4% of these individuals regularly engages in this behavior.

(U.S. Department of Health and Human Services, June 2017)
Disruptive Behavior

67% of the respondents agreed that disruptive behaviors were linked with adverse events.

- 71% resulted in medical errors.
- 27% associated with patient mortality

Disruptive behaviors lead to...

- adverse events
- errors
- safety and quality of care
- increased patient mortality

(Rosenstein AH, O'Daniel M, 2008)
Disruptive Behavior

- Profane or disrespectful language
- Demeaning behavior, such as name-calling
- Sexual comments or innuendo
- Inappropriate touching, sexual or otherwise
- Racial or ethnic jokes
- Outbursts of anger
- Throwing instruments, charts, or other objects
- Criticizing other caregivers in front of patients or other staff
- Comments that undermine a patient's trust in other caregivers or the hospital
- Comments that undermine a caregiver's self-confidence in caring for patients
- Not addressing safety concerns or patient care needs expressed by another caregiver
- Intimidating behavior that has the effect of suppressing input by other members of the healthcare team
- Not abiding by organizational policies
- Retaliation against any member of the healthcare team for speaking up
Disruptive Behavior

- No Standard definition, but an amalgamation of behaviors...
  - Display disrespect for others
  - Interpersonal interactions that impede delivery of patient care
  https://www.jointcommission.org/assets/1/18/SEA_40.PDF

- Disruptive behaviors among healthcare workers threaten the safety and well being of both patients and staff.

- These concerning actions have often gone unchecked and have become part of and are highly influenced by the organizational culture.
Disruptive Behavior

- With incivility on the rise and the prevailing issues associated with its ingoing occurrences the Joint Commission stepped in and developed mandates to challenge healthcare organizations to develop and implement policies and procedures to that address professional incivility and disruptive behaviors of staff.

- These decrees required all healthcare organizations implement policies and procedures to address disruptive and inappropriate behaviors among personnel.

- This has led to internal organizational initiatives to create collaborative and respectful work environments, with zero tolerance for such behaviors.
Disruptive Behavior

- Difficult because...

  Cultural shift: physician-centric to team-based patient management and accountability.

  Economic factors

    billable hours

    reimbursement issues

    resources and staffing

Results:

*High Stress Environment* → *Short Fuses* → *Misaligned Expectations* → *Miscommunication* → *Resentment* → *Team Struggles*
Impact of Disruptive Behavior

- A health system wide problem that impacts the organizations ability to promote a “safe culture”

- It impacts/creates...
  - communication and collaboration
  - individual contribution to patient care
  - staff morale
  - hostile workplace
  - absenteeism, resignation, and career abandonment

**ULTIMATELY HARMS PATIENTS**
Disruptive Behaviors

Disruptive behaviors can lead to personal and professional issues...

- experience stress
- frustration
- physical and psychological disorders

Leads to increased employee dissatisfaction → resignation → increased resource allocation → diminished care!!!!
Disruptive Behavior

Continuum of Incivility

- Low Risk
  - Disruptive Behaviors
    - eye-rolling
    - sarcastic comments
    - taunting
    - racial/ethnic slurs
    - intimidation
    - physical violence
  
- High Risk
  - Threatening Behaviors

- Bullying, aggressive, potentially violent behaviors

Their woodland continued to provide a narrative for the gnomes, both within the stories they told and as a lived reality. The gnomes of the forest created a rich tapestry of traditions, beliefs, and practices that were intricately woven into the fabric of their daily lives. Each stage of their woodland narrative was a testament to their resilience and adaptability, as they navigated the challenges and opportunities that came their way. As the seasons changed, the gnomes embraced the cycles of nature, finding meaning and purpose in the rhythms of the forest. Their stories, passed down from one generation to the next, served as a guide for their actions, ensuring that the woodland remained a vibrant and thriving community. In the midst of their discussions, the gnomes highlighted the importance of mutual respect and harmony, recognizing that the health and well-being of the forest were dependent on their collective efforts. Through their narrative, the gnomes demonstrated an unwavering commitment to preserving the natural beauty and integrity of their environment, a testament to their deep connection with the land and its inhabitants.
Disruptive Behavior

Figure 1. Toxic Organization Change System (TOCS) interventions.

(Elizabeth L. Holloway, PhD and Mitchell E. Kusy, PhD 2014)
Toxic Employee’s
What’s the cost/impact of a team member’s toxic behavior?
- Decreased performance
- Decreased morale
- Poor work culture
- Risk of the behavior spreading
- Increased turnover (the staff you don’t want to leave!)
- Loss of respect for the manager/leader over the team
- Financial
Who are your toxic employees?

- Overconfident in their abilities
- Self proclaimed rule followers
- Self centered
- Excessively/frequently late
- No interest in being a team player
- Can be productive, but the quality of work is lacking
- Not someone you would rely on to complete a task
Types of Toxic Employees

- The Slacker
- The Hot Mess
- Passive Aggressive
- The Whiner
- The Arguer
- The Bully
- The Backstabber
- Credit takers
- The incompetent
- The Socialite
- The sociopath
- The Oppressive manager
- Never to be found
- The zombie
- The black clouds
- Holier than thou
The Slacker

Traits

- Un-enthusiastic about the job
- Little or no motivation
- Frequently calls out
- More worried about personal life while at work
- Frequently wastes time online or with personal business
- No attention to detail
- Does not keep up with deadlines
The Slacker

Strategies

- Figure out the root cause
- Put your self in their shoes
- Approach with a conversation rather than confrontation
- Outline measurable expectations
- Send reminders
- Meet with them frequently and provide feedback on these expectations
- Give positive reinforcement
- Send reminders
- Relate the work to their self interest
- Hold them accountable!
The holier than thou employee

Traits

■ Very high opinion of themselves
■ Feel superior to their co-workers
■ Frequently puts down peers to benefit their reputation
■ Gossip/jokes at coworkers expense
■ Frequent bouts of spontaneous amnesia when called out
■ Will act surprised/shocked if the behavior is traced back to the
The holier than thou employee

Strategies

■ Don’t inadvertently encourage the behavior!
■ Do not ignore the behavior, confront the situation
■ Align behavior with values of the organization
■ Be specific concerning the problem behavior
■ Encourage them to come to you with co-worker concerns in the future
■ Be clear on consequences of this behavior
"I'm not being a tattle-tale! — I'm being a reliable source!"
The snitch...

Traits

- Always quick to point out errors in coworkers
- Frequently complains
- Does not like confrontation
- Not trusted by coworkers
- Passive aggressive to coworkers
The snitch...

Strategies

- Encourage the employee to discuss the issue with the offending person
  - “What did he/she said when you brought this to their attention”
  - *Offer to be a mediator*

- Encourage a team to own their mistakes and discusses them openly

- Discuss the negative impact on the team with this behavior; align with organizational values

- Give the person additional duties
THE BULLY
27%bullied at work
21% witnessed bullying
72% aware it happens
65 million workers affected
The Bully

Traits

- Poor interpersonal skills
- Frequent disruptive behavior
- Manipulative
- Belittles co-workers
- Publicly insults/humiliates coworkers
- Inappropriately interrupts meetings
- Condescending
The Bully

Strategies

■ Prompt action with bullying complaints
■ State the facts concerning the bullying behavior
■ Listen to the employee’s side
■ Enforce and action plan
■ Document negative behaviors
■ Involve HR if problem persists
■ Termination
THE DICTATOR
(OPPRESSIVE MANAGER)
The Dictator (oppressive manager)

Traits

- Micromanages situations
- Unable to delegate
- Likes to control the situation
- Overly punitive
- Staff fears of retaliation
- Doesn’t trust staff
- Poor communicator
- Intimidation
- Seem unhappy in their jobs
The Dictator (oppressive manager)

Strategies

■ Frequent rounding with staff for feedback (360 feedback)
■ Share feedback and expectations
■ Support manager with coaching and development
■ Frequent structured 1:1 sessions with the manager
■ Model the management behavior you would like to see
■ Encourage respect and trust in the staff
■ Remove from manager role
THE BEST WAY TO DEAL WITH A TOXIC EMPLOYEE

Don’t hire them in the first place...
Hiring practices

- Major focus on behaviors during the interview process
- Develop a structured format
- Include questions that surface common behavior issues
- Use real world scenarios
  - A physician has ordered an intervention you disagree with, the physician is adamant concerning the intervention how do you handle this situation?
  - Tell me about a time you had to deal with a stressful situation or conflict in your current or previous job. How did you handle this situation?
Hiring practices

- You’re looking for someone that works well with the team
- Include high performing staff in the interview process
- Go with your gut
- REFERENCES!
  - Ask for 1-2 references from a previous manager and/or supervisor
  - Unstructured phone call to the reference
  - Letters of recommendation are typically not a good judgment of previous behavior
Hiring practices—Red Flags!

- Difficult to contact for an interview
- Show’s up late for interview without an appropriate reason
- Speaks negatively of former employer/employee’s
- Unable to share a mistake they have learned from
- Currently unemployed or has been unemployed for long period of time
- Resume is a mess
- Resistant to give manager references
- Lack of professionalism
- Only interested in personal benefit
Hiring practices - Supervisors/Managers

- Strong clinicians don’t always make good managers
- The candidate should understand what's expected of the role
- Interview should focus on leadership abilities more than clinical abilities for internal candidates
- How they interact with and support employees
- How they will handle positive and negative behaviors
- Are they someone that can learn the role?
- What is their interest in becoming a manager?
- New managers need ongoing coaching, mentoring, and development
GENERAL TIPS WHEN DEALING WITH TOXIC BEHAVIOR

Feedback, issue/conflict resolution, performance discussions
Disruptive Behavior

Promoting Professionalism Pyramid


Vast majority of professionals - no issues - provide feedback on progress

Level 3 "Disciplinary" Intervention

Level 2 "Guided" Intervention by Authority

Level 1 "Awareness" Intervention

"Informal" Cup of Coffee Intervention

Mandated Reviews

Single "unprofessional" incidents (merit?)

Apparent pattern

Pattern persists

No Δ
Do...
- Prepare yourself for the conversation.
- Be upfront with the topic, don’t dance around the issue
- Remain calm, maintain your emotions through the discussion
- Stick with the facts
- Listen to their side
- For issues, address and resolve quickly
- Work together on a solution if possible
- Make sure the outcome/resolution is understood
- Reinforce good behavior
- Maintain professional boundaries
- Document, document, document!
Don’t...

- Punish all staff for the toxic behavior of one
- Avoid/Ignore the toxic behavior
- Rationalize the toxic behavior
- Inadvertently encourage toxic behavior
- Use absolutes (always or never) in discussions
- Try to be everyone's friend
- Get emotional
Disruptive Behavior

Organizational Strategies
- Policy of respectful engagement
- Core values are benchmarks in
  - Performance management
  - Leadership development

Team Strategies
- Values of civility are part of team
  - Team norms
- 360-degree team assessment
- Identification of toxic protectors
- Identification of toxic buffers

Individual Strategies
- Performance management with criteria
  - for values of civility
- Systematic feedback

Figure 1. Toxic Organization Change System (TOCS) interventions.

(Elizabeth L. Holloway, PhD and Mitchell E. Kusy, PhD 2014)
Disruptive Behavior

Addressing the problem of disruptive behavior requires more than simply adopting policies and educating staff.

It requires the organization to...

- undertake a cultural transformation such that each member of the healthcare team is able to function effectively in an atmosphere of respect and collaboration.
- shift away from a model that identifies healthcare workers as customers.
- stop tolerating disruptive behavior → rather do the work necessary to effectively manage and eliminate it.
- adopt and foster an organizational culture where all members of the healthcare team are trusted collaborators who are patient centric.
Disruptive Behavior

- The role of leadership cannot be overemphasized, because an organizational culture that demands devotion to patient safety and refuses to abide behaviors that undermine that safety is absolutely essential.

- These behaviors continue to challenge that culture of safety and are unacceptable.

- To circumvent this prevailing attitude requires all levels of organizational leadership to clearly, constantly and consistently lead by example.

- By developing an organizational philosophy that does not tolerate intimidating and/or disruptive behaviors, leadership can ensure an effective and collaborative approach is being utilized and patient safety is not being jeopardized.
Questions?

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