It is Cool to Be Kind: Promoting a Culture of Civility in BSN Students
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**Introduction**
Incivility in nursing education is a growing area of concern for students, educators, and the entire health care system. It takes many forms within the classroom and clinical setting. Students and faculty can be the perpetrator or the recipient of uncivil behaviors. Incivility can also have a negative effect on patient safety and the clinical outcomes for patients. Because of these issues, it is imperative that schools of nursing implement measures to educate and promote a culture of civility in the next generation of professional nurses.

**Purpose**
To measure the level of civility in first semester BSN nursing students and provide learning opportunities to improve the students’ understanding of incivility and equip them with knowledge and skills necessary to create a culture of civility.

**Research Question**
Do prescribed civility teaching strategies effect student’s perceptions of civility in themselves and their classmates and do they help to create a culture of civility in BSN nursing students?

**Population**
74 1st Semester BSN Students
9% Males  91% Females
71% White, 12% Black, 17% Hispanics/Other

**Supportive Evidence**

**Safety:**
Evidence suggests that incivility has significant implications for nurses. Poor communication and unprofessional relationships among health care workers have a direct effect on patient outcomes and safety (Rosenstein & O’Daniel, 2006; Porath & Pearson, 2013).

**Disrupts Teaching-Learning:**
Incivility in nursing education disrupts the teaching-learning environment, damages relationships and confidence, and increases the level of stress experienced by students and instructors. (Clark, 2008; Clark & Springer, 2007).

**Evaluation and Findings**
There was sufficient (α = 0.050) statistical evidence to suggest that students civility perception increased in both themselves and their classmates after participation in learning modules. These increases were sustained with no drop in scores throughout the semester.

The demographic groups of female and African American were found to have an initially high level of perceived civility. However, after participating in the learning modules, perceived civility scores leveled with that of their peers.

**Student Behaviors**
Improved level of professional interaction and communication between student nurses, faculty and clinical nurses in the hospital setting.

Newly admitted students reported kind, helpful and supportive behaviors being displayed by tested cohort.

**Implications**
Creating a culture of civility in beginning nursing students makes a positive impact on the nursing profession with the greatest effect contributing to quality, safe, patient-centered care.

**Intervention**
Participation in five civility teaching modules prior to beginning the hospital-based clinical experiences.