

Rudeness damages medical staff performance

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Researchers have proven that rudeness—like poison in the water cooler—is toxic in the workplace, affecting both job and business performance. But what if your office is a hospital Intensive Care Unit where lives hang in the balance?

A new Tel Aviv University study published in *Pediatrics* suggests that even the most benign forms of impoliteness may impede medical personnel's ability to perform under pressure and damage the quality of patient care. Rudeness alone accounts for a significant drop in hospital staff's diagnostic and professional performance, according to research led by Prof. Peter Bamberger of TAU's School of Management. Prof.

Bamberger collaborated on the study with Dr. Arie Riskin, also of TAU's School of Management and the Bnai Zion Medical Center in Haifa, and Dr. Amir Erez and Trevor Foulk of the University of Florida Warrington College of Business Administration.

"Relatively benign forms of incivility among medical staff members—simple rudeness—have robust implications on medical team collaboration processes and thus on their performance as a team," said Prof. Bamberger. "This is important because rudeness is rampant in many medical contexts. Patients and their families may be rude to caregivers, and caregivers may be rude to one another."

Dr. Rude and Dr. Nice

For the purpose of the research, 24 Neonatal Intensive Care Units (NICU) teams from hospitals around Israel participated in a simulation exercise involving a premature infant suffering from the common but severe medical complication necrotizing enterocolitis (in which bowel tissue disintegrates).

The teams were informed that an expert on team reflexivity from the United States would be observing them by live video throughout the stimulation, occasionally making suggestions over the two-way link. Half of the teams performed in the presence of a "rude" expert, whereas the other half completed their tasks under the watchful gaze of a "neutral" commentator. The expert's rudeness was expressed in a comment made before the team he was observing even got to work: "I've observed a number of groups from other hospitals in Israel, and compared to the participants observed elsewhere in the past, I can't say I'm impressed with the quality of medicine in Israel."

The simulations were videotaped and presented to a team of management experts, who evaluated them based on dimensions of help-

seeking and information-sharing behavior among the medical staff, as well as their overall diagnostic and procedural performance. The researchers found that teams exposed to ill-mannered behavior shared less information with (and passed less information on to) each other, and demonstrated poorer diagnostic and procedural [performance](#) than those not exposed to rudeness.

A shift in focus

"We hope our findings will shift the focus of research on medical error toward interpersonal interactions and cognition," said Prof. Bamberger. "From a practical perspective, we hope it will call attention to the need to shift behavioral norms in medical contexts."

The researchers are continuing to explore the implications of rudeness in medical situations using other approaches and with an eye to better understanding protective and vulnerability factors.

Provided by Tel Aviv University

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