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Role of Workplace Civility Climate and Workgroup Norms on Incidence of Incivility Behaviour among Staff Nurses

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Abstract: Background: Little researches have been conducted on the role of civility climate and group norms in experiences and outcomes of incivility behaviour. Research on workplace incivility has shown that it relates to negative outcomes for the affected employees and organizations. Aim: This research aimed to examine the role of work place civility climate and workgroup norms on incidence of incivility behavior among staff nurses. Design: Descriptive co relational design was utilized in this study. Methods: study was conducted at all inpatient units at main Mansoura University Hospital, which provides care for Delta region. A convenient sample of 100 staff nurses working in the previous mentioned hospital was constituted the study sample. Data for the present study was collected by using personal characteristics data sheet, perceived workplace civility climate scale, civility norms questionnaire-Brief and incivility behavior questionnaire. Results: results of the present study revealed a statistical significant negative correlation between work place civility climate and total score of incivility behavior while there was no statistical significant correlation between group norms and work place incivility behavior among studied sample. Conclusion: Findings suggest that perceived workplace civility climate, play a role in incidence of incivility behavior among staff nurses while group norms for civility is not a predictor of occurrence of incivility behavior. Recommendations: Hospital administrators must establish a zero-tolerance policy regarding incivility. The policy must allow for corrective action and must relive unacceptable actions in a timely and effective manner. Employers must encourage a supportive work environment in which respectful communication is the norm, and organizational policies are understood and followed.

Keywords: Civility Climate, Incivility Behaviour, Staff Nurses, Workgroup Norms.

INTRODUCTION

At workplace, the interpersonal relationships are described as an important part of an employee's experience. A basic level of respect and civility is required in any type of relationship. In the workplace especially, people like to work in an environment where they are dealt with respect. Coworkers can be sources of respect, support, and validation, or they can be rude, frustrating and stressful. Research on workplace incivility has raised over the last 15 years and suggests rude behavior at work is hurtful to both employees and the organization (Patterson 2016). Incivility and bullying in nursing is a complex issue which attracts a lot of interest of researchers. Some of the reasons of these behaviors include working conditions changes, increasing workloads, health care systems complexity, and ineffective and incomplete communications in workplaces equipped with modern technologies such as voice mails, emails, and teleconferences (Heydari, Rad, & Rad 2015).

Workplace incivility is rising with the changing nature of work in the new thousand years (shy &Wang 2014). It has been recognized as a persistent and developing issue. It is described by low- intensity behaviors that abuse respectful workplace standards and norms, appearing vague as to intent to harm. Incivility reflects uncivil behaviors toward others, behaving without concern for others. Writing nasty and demeaning notes or emails, undermining a colleague's credibility, treating another person as a child are some examples of uncivil behaviors. In addition to , berating one for an action in which he or she has no part, providing people the silent treatment, reprimanding someone in public

, making unwarranted accusations., and spreading gossip (Trudel, Thomas & Jr 2011, Doshy &Wang 2014 and American nurses association 2015). Moreover, other forms of incivility include mockery and humiliation, hostile stares and ignoring others' questions or communications, neglecting others, shouting, interrupting others' conversations, gossiping, and abusing others' privileges (Luparell 2011).

Incidents of workplace incivility are pervasive with most employees experiencing at least one incidence. Majority of employees have experienced more than one act of incivility in the form of verbal or non-verbal violation. Researchers have revealed that verbal aggression and nastiness are related to harmful individual and organizational outcomes. Being treated uncivilly and rude treatment can result in unsatisfied employees, bad relationships, an unpleasant work environment, higher job stress, cognitive diversion, psychological distress, and job dissatisfaction with low creativity. On the organizational level, incivility results in high turnover rate among employees, lack of productivity, absenteeism, and financial losses (Walsh et al 2012, Tarraf 2012 and Fisher 2014).

Historically, the concept of "civility" comes from the ideas of citizenship, civilization and the city. The civilized people are those who are fit to live in cities, while the uncivilized represent a savage society. The idea of civility is essential because it helps people to live in close relations with one another and gives an underlying basis for cooperation, collectivism, and community (Patterson 2016). Workplace civility is the behavior that helps to preserve the standards

for mutual respect at work. It comprises behaviors that are basic to positively connecting with another and building relationships. Civility requires that one speaks in ways that are, responsible, respectful, restrained, and principled and avoid that which is offensive, rude, demeaning, and threatening (Ottinot, 2008 and Walsh et al., 2012).

The perceived workplace civility climate, which is a direct expansion of safety climate is referred to the perceptions employees form regarding the importance the organization puts upon managing and dealing with behaviors of incivility and verbally aggressive actions in the workplace. It deals with workplace conditions and policies and procedures that are implemented by the organization and encourage employees to treat coworkers in a respectful manner, and to avoid verbal forms of aggression in their relationship. An important issue that employees face is the extent to which organizations are aware about employee perceptions of these acts of aggression and the actions management will take, if any, to deal with these experiences (Ottinot,2008).

Andersson and Pearson's (1999) spiral theory of incivility is much known. The spiral begins at the starting point where an uncivil behavior is recognized and perceived as uncivil by an individual due to violated standards and norms or unacceptable conduct. Work group norms act as an informal guide to individual behavior both within and outside the limits of organizations. Norms are not formally described as the written rules of organizational policies and regulations. However they are "behaviors of group members that act as implicit rules, considered to be both descriptive of what group members are and prescriptive of how they should be. Despite being informal in nature, norms influence behavior over contexts. Empirical research suggests that norms have the potential to affect workplace behavior, such that employees might be prone to be disrespectful when they work with others who are often uncivil themselves (Walsh et al 2012). Group norms have been described as standards, both formal and informal, that oversee conduct and behavior in the group (Jex & Britt, 2008). O'Boyle, Forsyth and O'Boyle (2011) reviewed counterproductive workplace behaviors (CWBs) and argued that group norms are one of the knowing characteristics of whether uncivil behavior will occur in the workgroup.

Significance of study:

Although many researches have been conducted in the workplace incivility literature, there are still areas that need further investigation. One of these areas is incivility experiences within workgroups. Workgroups offer a unique setting in which to examine the impact of incivility. The reviewed literature provides support that group norms may impact incidences of uncivil behavior. Specifically, workgroups that have greater norms of civility should be less likely to perceive incidences of uncivil behavior than those with fewer norms for civil behavior. Additionally, in workgroups where civil behavior is the standard those individuals who do experience incivility should report more negative outcomes than individuals where civility is not the norm. More over, less attention has been paid to how the environment, specifically civility climate of the workplace, influence the occurrence of verbal aggression and what its affect upon employees might be. Therefore the present

research, seeks to address these issues by examining the role of perceived workplace civility climate and Workgroup norms on incidence of incivility behavior among nurses.

METHODOLOGY

Research aim:

The present study aimed to examine the role of work place civility climate and Workgroup norms on incidence of incivility behavior among staff nurses.

Research questions: the following research questions guide the present research:

- 1- How do staff nurses perceive workplace civility climate in their organization?
- 2- How are group norms manifested in organization?
- 3- How is uncivil work place behavior manifested in the organization?
- 4- Doses group norms and workplace civility climate play role in prediction of uncivil behavior among staff nurses?

Research design:

A descriptive co relational research design was utilized in the study.

Setting: The study was conducted in all inpatient units at main Mansoura University Hospital, which provides care for Delta region and it is affiliated to teaching University Hospital. The total bed capacity of all units was 1860 bed. Sample: The study sample composed of a convenience sample of (100) staff nurses out of a total of 160 nurses, working in the previously mentioned setting, and who are available at time of data collection and accepted to participate in the study.

Tools: data for the present study was collected through utilizing the following four tools:

 I^{st} tool: Personal characteristics data sheet was developed by the researches and include personal data items, related to age, marital status, educational qualification, place of work, years of experience in nursing career , and employment status

2nd tool: perceived workplace civility climate scale developed by Ottinot, (2008) and used to measure nurses perception of workplace civility climate .It includes 15statements and divided into the following three dimensions: intolerance for incivility (6 statements), response, (4 statements) and policies and procedures (5 statements). Participants rated statements using a five-point Likert scale from 1 = strongly disagree to 5 = strongly agree. Scale scores were calculated for each dimension, with higher scores on the response and policies/procedures dimensions indicating higher levels of perceived workplace civility climate along each dimension. Intolerance for incivility items were reverse-scored, with higher scores indicating employees perceived the organization as having greater intolerance for incivility. For the current sample, internal reliability for the policies and procedures dimension (α = .78), the response dimension ($\alpha = .66$), and the intolerance for incivility dimension ($\alpha = .76$) were all adequate.

3rd tool: civility norms questionnaire-Brief (CNQ-B) developed by **Walsh et al.**, (2012) and used to measure the

group norms for civility as perceived by staff nurses . This four-item scale asks participants about respectful behavior in their workgroup, such as "Rude behavior is not accepted by your coworkers." Participants rated these statements using a five-point Likert scale, with 1= strongly disagree and 5= strongly agree. Scores are summed, with higher scores indicating greater group civility norms. Internal reliability for the current sample was adequate ($\alpha=.69$).

 4^{th} tool: Incivility behavior questionnaire: developed by **Penny and Spector (2005) and McNeice(2013)** and modified by the researchers. It was used to measure nurses' perception of workplace incivility. It includes 41 statements under four dimensions: gossiping (9 statements), exclusion (18 statements), hostility (9 statements) and invasion of privacy (5 statements). Participants were asked to indicate how frequently they had been subjected to each of the behaviors in their present job. Statements were presented in a five point Likert scale ranging from "never" to "every day." The incivility measure demonstrated good internal consistency ($\alpha = .95$).

Tools validity: the three tools were handed to three experts in nursing administration department to test its contents validity. Based on their recommendations the necessary modifications were made. Double translation English-Arabic-English was done to ensure validity of translation.

Ethical consideration: Before commencing the study, ethical approval was granted from the research ethics' committee in which the study took place. The researchers ensured that the correct procedures were undertaken

concerning informed consent, autonomy, anonymity and maintenance of the subjects confidentiality.

Pilot study: A pilot study was carried out on a sample of 10% before starting the actual data collection to ascertain the clarity, and applicability of the study tools. It also helped to estimate the time needed to fill in the questionnaire. Based on the results of the pilot study, modifications and rearrangement of some statements were done.

Procedure: Once permission was granted from the nursing administrator of the selected hospital to proceed with the prepared research, the purpose and nature of the study was explained to study sample who accept to participate in the study. The respondents were assured for complete confidentiality. An explanation of the instrument was done before it handed to the studied sample on their work places in both morning and afternoon shifts. Sheets were filled out at range of 30 minutes. Data collection activities consumed two months from March to April 2017.

Statistical design: Data entry and statistical analysis were done using Statistical Package for Social Science (SPSS), version 22.0. The following descriptive statistics were used: frequencies, arithmetic mean: as average describing the central tendency of observations. The standard deviation: as a measure for scattering for outcomes around the mean. Correlation between variables was evaluated using Pearson's correlation coefficient (r). Significance was adopted at p<0.05 for interpretation of results of tests of significance.

RESULTS

Table (1): Personal Characteristics of the Studied Nurses (n=100).

	(n=100)			
Variables	No	0/0		
Age (years)				
1-20-<25	28	28.0		
2-25-<30	15	15.0		
3-30-<35	27	27.0		
4-more than 35	30	30.0		
Gender				
1-Male	3	3.0		
2-Female	97	97.0		
Marital status				
1-Single	12	12.0		
2-Married	88	88.0		
Educational qualification:				
1-Bachelor degree	15	15.0		
2-Diploma of nursing	68	68.0		
3-Others	17	17.0		
Experience years:				
1-1-<5	19	19.0		
2-5-10	15	15.0		
3-10->15	29	29.0		
4-more than 15	37	37.0		
Workplace:				
1-Medical	20	20.0		
2-Surgical	37	37.0		
3-ICU	20	20.0		
4-others	23	23.0		

Table (1) shows the personal characteristics of the studied nurses, regarding to their age ,it is clear that 30 % of studied sample had more than 35 years. Data in the same table

declared that the majority of studied sample (97%) were female and 88 % of them were married. As regard to educational qualification, the same table shows that the

highest percentage (68 %) had Diploma of nursing. Also it is clear from table (1) that 37 % of sample had more than 15

year of experiences as well as 37 % of them were working in surgical department.

Table (2): Mean Scores of Workplace Civility Climate Domains and Group Norms as perceived by the Studied Nurses (n=100).

workpla domain	nce civility climate domains and group norm	Mean (SD)	Rank
1.	Polices &procedures for addressing incivility	19.73± 4.13	2
2.	Response	14.71 ± 3.22	3
3.	Intolerance for incivility	20.71 ±5.43	1
Total sc	ore	55.15 ±9.78	
Group	norm for civility domain * (20)	17.67 ±1.98	_

* (20) Maximum score that could be obtained for Group norm for civility domain

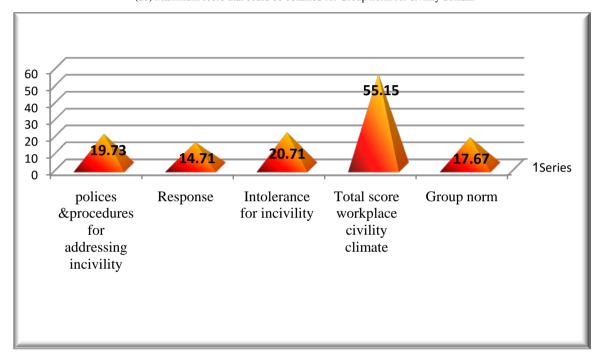


Figure (1): Mean scores of workplace civility climate domains and group norms as perceived by the studied nurses (n=100).

Table (2) and figure (1) illustrates the mean scores of workplace civility climate domains and group norms as perceived by the studied nurses. Regarding to workplace civility climate domains it is clear that the highest mean score was observed for intolerance for incivility subscale (20.71 ± 5.43) which was ranked as the first followed by

polices and procedures for addressing incivility subscale (19.73 \pm 4.13) and then by response subscale (14.71 \pm 3.22). Regarding to mean scores of nurses perception of group norms ,data in the same table and figure (1) shows that studied sample had high mean score of group norms for civility (17.67 \pm 1.98).

Table (3): Mean scores of work place incivility behavior domains as perceived by the studied nurses (n=100).

work	place incivility behavior domains	Mean (SD)	Rank
1.	Gossiping	16.25 ±7.23	2
2.	Exclusion	32.02 ±11.18	1
3.	Hostility	15.44 ±6.48	3
4.	Invasion of privacy	8.77 ±4.14	4
Total	score	72.48 ±23.95	

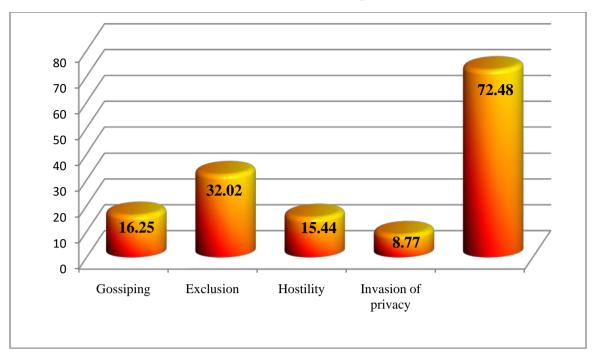


Figure (2): Mean scores of work place incivility behavior domains as perceived by the studied nurses (n=100).

Table (3) and figure (2) shows the mean scores of work place incivility behavior domains as perceived by the studied nurses. The highest mean score was observed for exclusion subscale (32.02 ± 11.18) which was ranked as the

first followed by gossiping subscale (16.25 \pm 7.23) and then by hostility subscale (15.44 \pm 6.48). While the invasion of privacy subscale was perceived as lowest mean score among studied sample (8.77 \pm 4.14).

Table (4): Frequency of Occurrence of Work Place Incivility Behavior Domains as Perceived by the Studied Nurses (n=100).

Incivility behavior domains	Never (1)		Once or twice (2)		Once or twice a month (3)		Once or twice a week (4)		Every day (5)	
	No	%	No	%	No	%	No	%	No	%
A: Gossiping	56	56.0	24	24.0	10	10.0	4	4.0	6	6.0
B: Exclusion	58	58.0	23	23.0	14	14.0	3	3.0	2.0	2
C: Hostility	59	59.0	23	23.0	10	10.0	4	4.0	4	4.0
D: Invasion of privacy	56	56.0	26	26.0	10	10.0	3	3.0	5	5.0

Table (4) revealed the frequency of occurrence of work place incivility behavior domains as perceived by the studied nurses. It is clear from the above table that highest percentage (59 %) of studied nurses never subjected to

hostility behavior. While low percentage (2%) of them perceived that they subjected to exclusion behavior every day.

Table (5): Correlation between Total Score of Work Place Incivility Behavior and work place civility climate subscales

work place civility climate	Total work place incivility behavior	
	r	P
1. Polices &procedures for addressing incivility	0.17	0.08
2. Response	0.03	0.70
3. Intolerance for incivility	0.28	0.00**
Total score work place civility climate	0.24	0.01**

^{*} Statistically significant at $p \leq 0.05$

^{**} Highly statistically significant at p ≤ 0.01

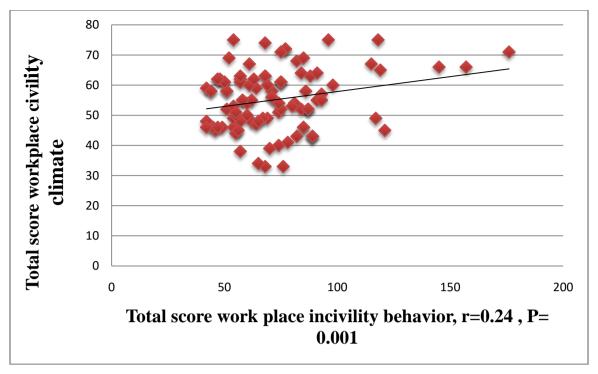
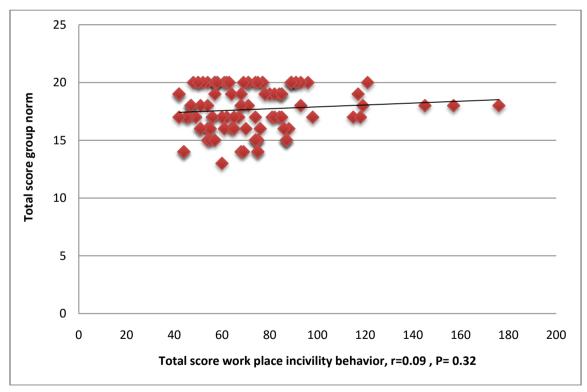


Figure (1): Correlation between total score of work place incivility behavior and total score of workplace civility climate

It is clear from table (5) and figure (3) that there was a statistical significant correlation between work place civility climate and total score of incivility behavior (r=.24)

p=0.001**).A statistical significant correlation was found only between intolerance for incivility subscale and total score of work place incivility behavior (r=.28, p=.00 $^{\circ}$)



* Statistically significant at $p \le 0.05$

Figure (2): Correlation between total score of group norms and total score of work place incivility behavior

It is clear from figure (4) that there was no statistical significant correlation between group norms and work place incivility behavior among studied sample (r=0.09 ,p=0.32).

^{**} Highly statistically significant at $p \! \leq \! 0.01$

Table (6): Relationship between work place incivility behavior, workplace civility climate and group norms and personal characteristics of studied sample (n=100).

Variables	Total work place incivility	Total workplace civility	Total group norm	
	behavior	climate		
	mean (SD)	mean (SD)	mean (SD)	
	mean (SD)	mean (SD)	mean (SD)	
Age (years)				
20-<25	67.60 (23.95)	55.67 (9.47)	16.96 (2.06)	
25-<30	67.00 (14.46)	57.60 (8.76)	18.66 (2.02)	
30-<35	78.03 (24.21)	54.85 (12.31)	17.85 (1.99)	
35-≥	74.76 (26.91)	53.70 (8.02)	17.66 (1.70)	
P*	0.30	0.64	0.05*	
Gender				
Male	59.00 (12.76)	44.33 (4.72)	16.66 (0.57)	
Female	72.89 (24.13)	55.48 (9.72)	17.70 (2.00)	
P*	0.32	0.05*	0.37	
Marital status				
Single	70.00 (17.84)	57.50 (8.49)	18.33 (1.61)	
Married	72.81 (24.72)	45.82 (9.94)	17.57 (2.02)	
P*	0.70	0.37	0.21	
Educational qualification				
Bachelor degree	68.11 (24.81)	57.00 (8.59)	18.05 (1.79)	
Diploma of nursing	73.53 (24.63) 54.84 (10.14)		17.67 (2.06)	
Others	73.05 (20.98)	54.35 (9.86)	17.23 (1.88)	
P*	0.69	0.66	0.47	
Experience years				
1-<5	65.63 (15.44)	56.36 (10.32)	17.94 (1.50)	
5-10	74.60 (29.42)	55.86 (8.67)	16.13 (2.35)	
10->15	71.68 (23.30)	57.06 (9.47)	18.13(1.90)	
≥15	75.75 (25.70)	52.72 (10.04)	17.78 (1.87)	
P*	0.50	0.29	0.009**	
Workplace				
Medical	69.85 (15.26)	56.65 (11.95)	18.50 (1.70)	
Surgical	67.48 (28.27)	55.32 (9.24)	17.70 (1.54)	
ICU	85.30 (27.32)	54.10 (9.93)	17.85 (2.30)	
others	71.65 (15.13)	54.47 (8.85)	16.73 (2.28)	
P*	0.05*	0.84	0.03*	

Table (5) shows the relationship between work place incivility behavior, workplace civility climate and group norms and personal characteristics of studied sample. It is clear that there was a statistical significant relationship between gender and only workplace civility climate as female nurses had highest mean score of workplace civility climate than male (55.48 ± 9.72) ,p=0.05*.The same table shows a statistical significant relationship between incivility behavior and work place as nurses who working in ICU had highest mean scores of work place incivility behavior(85.30 ±27.32),p=0.05*. Also a statistical significant relationship was found between total group norms and work place as nurses who working in medical department had highest mean scores of group norms (18.50 ±1.70), p=0.03*. While It is clear that there was a statistical significant relationship between age group and only total of group norm as age group of (25-<30) had highest mean score of group norm (18.66 \pm 2.02), p=0.05*. In relation to years of experience there was a highly statistical significant relationship between years of experience and group norms (p=009**) with the highest mean score (18.13±1.90) at the (10->15) years of experience.

DISCUSSION:

The organization that characterized by a positive workplace civility climate should relate to a lower occurrence of verbal aggression in the workplace. The climate for incivility would make a solid circumstance where employees who commit acts of verbal aggression would be likely to perceive negative outcomes for their aggressive actions and help motivate employees to get along with coworkers because of norms of conduct in the workplace (Ottinot 2008). The present study aimed to examine the role of work place civility climate (WPCC) and Workgroup norms on incidence of incivility behavior among staff nurses.

Civility climate is referred to the perceptions employees form about the importance the organization places upon managing and dealing with acts of incivility and verbally aggressive behavior in the workplace (Probst, 2004). Regarding staff nurses perception of work place civility climate, results of the present study revealed that the highest mean score was observed for intolerance for incivility subscale which was ranked as the first followed by policies and procedures for addressing incivility subscale and then by response subscale. From the researchers point of view this indicates higher levels of perceived workplace civility climate among studied sample as they perceived the organization as having greater intolerance for incivility and policies/procedures which measures the extent to which employees perceive the organization as providing the measures needed in order to address acts of incivility.

Moreover, this indicates that management has a formal process for filling complaints of verbal abuse from coworkers as well as the work place has written policies that disallows verbal abuse among coworkers. In this respect, Kessler, Spector., Chang, and Parr, (2008) stated that intolerance for incivility deals with conditions that contribute to a workplace where uncivil behaviors such as verbal abuse and nastiness go unchecked. Employees can form these perceptions because of negative outcomes resulting from abuse and the lack of action taken by management to address these issues. More over Hershcovis & Barling, (2010) reported that the types of policies and procedures used in organizations also influence work place incivility (WPI) and they added that lack of formal policies/procedures regarding incivility, as well as policies that reinforce uncivil behavior should readily affect the incidence of incivility within workgroups.. In addition, response subscale as one dimension of work place civility climate is critical to the measurement of PWCC because it main reasons why incivility occurs despite examine management actions. In this respect, Kelloway, Mullen, and Francis (2006) reported that when leaders fail to intervene until problems are brought to their attention or become genuine enough to warrant their attention is contribute to negative organizational outcomes related to civility climate.

Regarding to mean scores of nurses' perception of group norms, findings show that studied sample had positive work group norm for civility behavior. This result is consistent with Magley (2013) who reported that employees perceived positive group norms. In this respect McGonagle et al., (2014) stated that the presence of civility norms within a workgroup encourages respectful behaviors, improves helping, and makes an in general certain work environment. Employees perceive these civil norms as an indication that the organization and their coworkers concern about them and in exchange employees are more likely to follow appropriate safety measures. From the researchers point of view this might be contributed to their perception that rude behavior is not allowed in work place and respectful treatment is the standard among their work group.

When work place incivility behavior domains were investigated, findings of the current study revealed that the highest mean score was observed for exclusion subscale which was ranked as the first followed by gossiping subscale and then by hostility subscale. While the invasion of privacy subscale was perceived as lowest mean score among studied sample. This result is contrary to study done by Hevdari, Rad, & Rad (2015) who found that hostility behavior is perceived by study sample as first rank followed by gossiping then privacy violation and lastly with exclusion behaviour.In the same line, Shoghi et al (2008) reported that regarding exclusion behavior, about one third of nurses reported one or two instances of incivility. These behaviors could appear as taking away employee's authority and freedom in his job which was reported by about one third of the participants. Moreover, Kamchuchat, Chongsuvivatwong, Oncheunjit, Yip, and Sangthong (2008) reported that the highest percentage of nurses experienced hostile and bullying behavior.

Regarding frequency of incivility behavior as perceived by study sample, results of the current study revealed that the that highest percentage of studied nurses never subjected to hostility behavior, While lowest percentage of them perceived that they experienced exclusion behavior every day. This result in contrary to study done by Heydari, Rad, & Rad (2015) who found that the lowest percentage of nurses reported one or two instances of hostility behavior from their superior matrons. More over they found that lowest percentage of participants had perceived splitting behaviors and gossiping behaviors at least one or two times from their superior matrons. Also they found that privacy violation was reported by lowest percentage of nurses for one or two times. In the same line, study done by Trudel, Thomas &Jr (2011) revealed that workplace incivility occurred frequently among nurses participating in this of the sample study. As the highest percentage experiencing some form of incivility in the workplace within the past year, with lowest percentage experiencing incivility on "sometimes" to "always" levels of frequency.

Researches on violence climate support the idea that safety climate can be extended into the domain of workplace violence. Workplaces with positive civility climates should have policies and procedures in place that help to relieve the effects of verbal aggression acts in the workplace. Results of the present study revealed a statistical significant negative correlation between work place civility climate and total score of incivility behavior. This result is consistent with Walsh et al (2012) as they found that, as employee perceptions of civility climate decrease, incidences of uncivil behavior among workgroups increase. In this respect Spector, Coulter, Stockwell and Matz (2007) developed a perceived violence climate instrument that examine the degree to which employees perceive that management assures the control and prevention of work place violence and they investigated the impact of workplace climate on violence and other outcomes. They found a significant negative relationship between nurses' perceptions of security climate and experiences of violence and verbal aggression, supporting their hypothesis that a positive violence climate is linked to low levels of aggression. In addition. Fisher (2014) reported that intolerance and policies/procedures were negatively related to WPI, whereas response was positively linked to WPI.

Another finding of the current study revealed that there was no statistical significant correlation between group norms and work place incivility behavior among studied sample. This finding is contradicted to **Fisher (2014)** who found that group norms for civility was negatively related to WPI and they added that group norms and standards have a larger role in negative outcomes than civility climate because the group-level stressor is greater to the individual within the workgroup than an overall organizational stressor. In the same line **Walsh et al.,(2012)** reported that more positive civil norms were linked to lower customer incivility, and intentions to leave .

Results of the present study revealed that there was a statistical significant relationship between age group ,years of experience and only total of group norm among the study subjects. This means that age group and years of experience are likely to play a larger role in group norms for civility . More over findings revealed that there was a statistical significant relationship between gender and only workplace civility climate as female nurses had highest

mean score of workplace civility climate than male. In this respect Fisher (2014.) reported that females might perceive incidence of incivility from males as something more than incivility, such as sexual harassment, male chauvinistic behaviors, and equality issues, men were more likely to involve in uncivil behavior than women . While, Reio and Ghosh (2009), found that males were more likely to perceive uncivil behaviors. Another finding indicates a statistical significant relationship between incivility behavior and work place as nurses who working in ICU had highest mean scores of work place incivility behavior. This result is contradicted to study done by Heydari, Rad, & Rad (2015) as they reported that there was no difference between incivility occurrences in various departments. While Kalantari, Jouybari, Sanagoo, and Mohammadi (2012) reported that there is a significant relationship between work place and incivility between nurses, and the highest level of incivility was reported in emergency departments.

CONCLUSION

Workplace civility climate, play a role in incidence of incivility behavior among staff nurses while a group norm for civility is not a predictor of occurrence of incivility behavior. So findings of the present study revealed a statistical significant negative correlation between work place civility climate and total score of incivility behavior while there was no statistical significant correlation between group norms and work place incivility behavior among studied sample.

Recommendations: based on the findings of the present study the following recommendations were suggested by the researchers:

Health care organization:

- Employers must ensure that the organizational, mission, philosophy, vision and shared values are closely aligned with a culture of respect and safety.
- Hospital administrators must establish a zerotolerance policy regarding incivility and bullying.
 The policy must allow for corrective action and must relive unacceptable actions in a timely and effective manner.
- Employers must encourage a supportive work environment in which respectful communication is the norm, and organizational policies are understood and followed.
- Design organization-wide interactive educational programs on disruptive behaviors that involve all staff in every discipline and at every level within the healthcare setting.
- Health care organization must provide a mechanism for RNs to use and seek support when feeling threatened. As well as orient those to strategies available for conflict resolution and respectful communication.
- Organizations should use empirical strategies to assess the type and level of incivility or bullying occurring and to develop and implement an action plan that addresses the problem.

Academic:

- Nursing faculty members have to play key roles in preparing nursing students to foster both a healthy workplace and culture of civility. They had to provide initial civility education, integrating civility content into the curriculum and in policy development, and by role-modeling the desired actions.
- Provide disruptive behavior education for all faculty and set clear expectations about faculty members' responsibility for supporting and intervening with colleagues and students who may be liable for disruptive behavior

Further Nursing research:

- Develop instruments that provide information about frequency and types of disruptive behavior, causes of behaviors, reasons for not reporting or confronting the problem and the effects of the behavior on individuals and work culture.
- Identify and disseminate evidence-based strategies designed to eliminate disruptive behaviors within nursing profession.

CONFLICTS OF INTEREST DISCLOSURE

The authors declare that there is no conflict of interest.

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