Bullying in Nursing: Sepsis in a Caring Profession

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Objectives

- Identify behaviors that are considered bullying behaviors in nursing and the healthcare
- Recognize why horizontal violence occurs within nursing and healthcare and resources available to victims of bullying

American Nurses Association Code of Ethics

- Nurses are *required* to create an ethical environment and culture of civility and kindness, treating colleagues, coworkers, employees, students, and others with dignity and respect. This standard of conduct includes and affirmative duty to prevent harm. Disregard for the effects of one's actions on others, bullying, harassment, intimidation, manipulation, threats or violence are always ***MORALLY UNACCEPTABLE*** behaviors.

http://nursingworld.org/DocumentVault/Ethics-1/Code-of-Ethics-for-Nurses.html

Definitions:

Horizontal Violence:

across peer groups, violence between staff of similar levels

Vertical violence:

from senior to junior colleagues, from management to staff

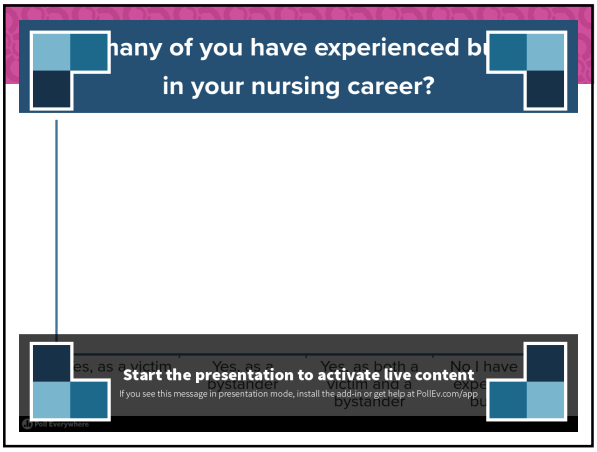
Incivility:

lack of civility or courtesy, rudeness

Definitions:

Horizontal Violence:

- *"repeated, health-harming mistreatment, verbal abuse, or conduct which is threatening, humiliating, intimidating, or sabotage that interferes with work or some combination of the three" (Gary and Ruth Namie)*
- *"systematic aggressive communication, manipulation of work and acts aimed at humiliating or degrading one or more individual that create an unhealthy and unprofessional power imbalance between bully and target, results in psychological consequences for targets and co-workers, and cost enormous monetary damage to an organization's bottom line" (Mattice and Garmen)*



Characteristics of Bullying

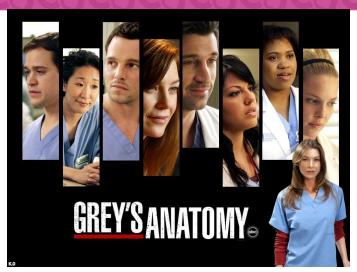
- Repetition
- Duration
- Escalation
- Power Disparity

What does bullying look like?

COVERT "Hidden"	OVERT "In your face"
• Mainly psychological • Isolating • Sarcasm or offensive language • Non-verbals (Eye rolling, arms crossed, hands on hips) • Refusing to help • Ignoring others • Tone of voice (condescending) • Withholding information (not giving all info during shift handoff)	• Name calling • Fault finding • Gossip • Backstabbing • Facial Expressions • Blaming • Intimidation/Humiliation • Physical threats • Voice raising, yelling, screaming • Writing retaliatory complaints

Examples of Bullying

- Unwarranted or invalid criticism
- Being the target of practical jokes
- Excessive monitoring
- Being treated differently than the rest of your work group
- Taking credit for other's work without acknowledging their contribution
- Asking inappropriate and/or excessive questions about personal matters or teasing about personal issues



- http://www.youtube.com/watch?v=d3pe_sl164E

Bullying Statistics

- 38% of healthcare workers have reported incidents of one or more types of bullying. (Quine, 1999)
- 48% have reported experiences of verbal abuse. (Institute for Safe Medication Practices, 2004)
- 2009 more than 50 percent of emergency center nurses experienced violence on the job by patients (Emergency Nurse Association)
- A study of student nurses reported that 53% had been put down by a staff nurse (Longo, 2007)
- 58% of bullies are women

(As reported by Center for American Nurses-now incorporated into the American Nurses Association)

Bullying Statistics

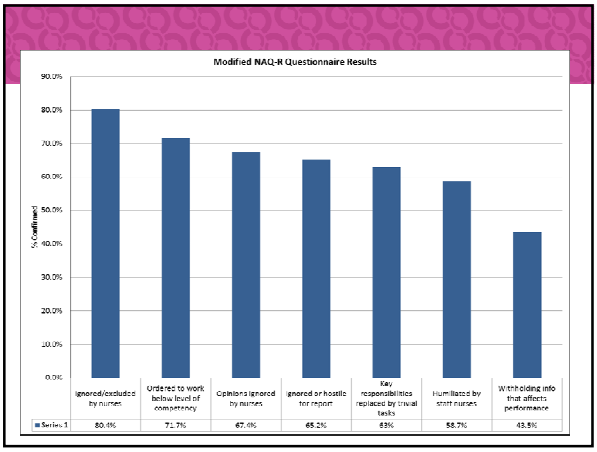
- 81% of bullies are in management roles
- Victims of bullying endure behavior for two years before filing a complaint
- Only 13% of bullies are punished or terminated
- 40% of clinicians allowed a medication error to occur and/or failed to report the error due to an intimidating colleague

(ANA, 2011)

Student Nurse Bullying Survey

- Negative Acts Questionnaire-Revised (modified for students)

- 46 Senior Level Nursing Students (100% participation rate)
- 45 reported bullying of some type during clinicals
- 1 student reported no experience with bullying during clinical



Narrative Responses

- Ignoring Students
  - Avoid students for report
  - Act like you don't hear students who ask questions
  - Ignore student opinions
- Treated as PCA's
  - Do work of PCA's or treated as extra PCA's
  - Use students as free ancillary staff
  - Use students " to get off easy for the day"
- Insulting
  - Made fun of and belittled students
  - "Talk down to" students
  - Mean and unwelcoming
  - Insult physical appearance

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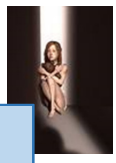
WHY Bullying/HORIZONTAL VIOLENCE IN NURSING and HEALTHCARE?

Background of Horizontal Violence

Causes

- *Internalizing roles and behaviors*
- *Aggression exposure*
- *Socialization*
- *Group membership*
- *Competition*
- *Generational*
- *Need for approval and acceptance*



ORIGINS
- Hierarchies
- Oppression
- Feminist

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Why are Victims Targeted?

Bullies often look for two characteristics

1. Decreased Self Confidence
   - -Shoulders slumped
   - -Eyes down
   - -Overt displays of nervousness
2. Passive behavior/Communication
   - -Doesn't want to rock boat
   - -Avoids expressing opinions
   - -Avoids conflict
   - -Keeps peace

(Renee Thompson)

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Why are Victims Targeted?

- Victims pose a threat to the bully
  - Popularity
  - Technical skills
- Victim perceived as weak
- Not a "game player" on the unit

(Workplace Bullying Institute)

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How Bullying Affects People

Victims of bullying experience both physical and emotional problems

- Weight loss/gain
- Hypertension
- Cardiac Palpitations
- Irritable bowel syndrome
- High Stress, post traumatic stress disorder

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How Bullying Affects People

- Sleep disturbances
- Musculoskeletal problems
- Reduces self-esteem
- Impaired personal relationships
- Excessive sick leave
- Poor morale
- Disconnect with other staff

(ANA, 2012, Embree & White, 2010)

How Bullying Affect's People's Job's

- Forced to transfer from loved job, often a punitive transfer (13%)
- Constructively discharged without reasonable cause (24%)
- Target quits to reverse decline in health and sanity (40%)
- Financial Devastation can occur as a result

(2010 Workplace Bullying Institute Survey)

How Bullying Affects the Organization

Increased	Decreased
• Disability • Workers Compensations Claims • Medical Costs • Absenteeism • Staff Turnover	• Quality Work • Productivity • Customer Relationships • Public Image

How Bullying Affects Organization's Increased Staff Turnover

$82,000
to
$88,000

(Journal of Nursing Administration, 2011)

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Staff want to gain a sense of belonging
to the profession,
therefore they bully
as they have been bullied!

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Importance of addressing bullying

- Worldwide Nursing Shortage
- Aging workforce
- Change the Culture
- Patient Safety
- It is the right thing to do!

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2009 Joint Commission Mandate

"Behaviors that undermine a culture of safety"

Healthcare is one of the most bullying-prone industries. Many staff simply want to heal, help, comfort or teach others. Bullying happens when highly educated, well-paid professionals who enjoy unchallenged status enter the mix.

The Joint Commission
HELPING HEALTH CARE ORGANIZATIONS HELP PATIENTS

2009 Joint Commission Mandate

Intimidating and disruptive behaviors can:

- Foster medical errors
- Contribute to poor patient satisfaction
- Increase the cost of care
- Cause qualified clinicians to seek employment in more professional arenas

The Joint Commission
HELPING HEALTH CARE ORGANIZATIONS HELP PATIENTS

Where do we go from here?

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Tools for victims to Stop Bullying

1. Project Self-Confidence
   - Look confident -even if you aren't
   - Walk tall – head high, shoulders back
   - Dress professionally
2. Assertive communication
   - Cooperative words – "we, us, our, together"
   - Give specifics
   - Focus on topic, not person
   - Non judgmental verbal's and nonverbal
3. **Scripting**
   - "I'm concerned about…"
   - "I need your support, not your criticism…"
4. The Power of the Pause
   - What is my objective?
   - How can I communicate in a honest and respectful manner?

(Rose Thompson)

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What Is Your Role In Preventing Workplace Bullying?

- Recognize bullying for what it is
- Don't engage in it
- Don't excuse it
- Don't talk it away
- Don't be afraid to let someone know that their behavior is not acceptable
- Learn how to manage it

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Confronting Bullying Behavior

Steps to Confronting

- Recognize the behavior as bullying (Document)
- Speak up about your experience - Report
- Respectfully confront the bully
- Follow policy
- Remember – the only thing you can truly control is how you respond

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Why Don't Peer's Act	Why Don't Manager's Act
• Fear • Don't want to become a target • Don't recognize it • Lack of support • Don't want o get involved • Don't know how to intervene	• Lack clarity/awareness • Lack support of organization • Inept at asserting authority • Victim of bullying themselves • Lack appropriate training

What should management do?

❖Training

❖Follow policy and procedure

❖Document

❖Be in control

❖Change work environment - Safe environment

Health Care Leaders Responsibility

HEALTH CARE LEADERS have a RESPONSIBILITY to employees and the public to provide work ENVIRONMENTS that are FREE FROM ABUSE AND HARASSMENT. When WORKPLACE BULLYING has been identified as a PROBLEM, senior leaders must take SWIFT, APPROPRIATE ACTION to ensure the ABUSE STOPS, the PERPETRATOR is held ACCOUNTABLE, and steps are taken to ensure bullying does not occur again. POLICIES and PROCEDURES must be implemented and ENFORCED to ensure nurses FEEL SAFE to REPORT INCIDENTS of incivility / bullying.

(RWJF Fellows Action Learning Team)

What is Your Role?

- Informally
  - ✓ Strengthen collegial relationships – team building
  - ✓ Encourage responsibility and accountability
  - ✓ Support each other
- Skills
  - ✓ Assertiveness training and conflict resolution
  - ✓ Improved communication – Crucial Conversations
- Provide Support
  - ✓ Peer support
  - ✓ Employee assistance programs

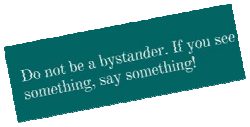
Core Values

- Respect Everyone- *Treat others as they would like to be treated*
- Tell the Truth - *Be honest and transparent in all interactions*
- Work as a team - *Inspire, challenge and support colleagues, patients and families to advance the mission*
- Make a Difference -*Go above and beyond in the service of others and Cincinnati Children's*

CCHMC Resources

- Employee Health 6-4464
- Protective services 6-4204
- Balance Works Services 1-800-EAP-CALL
- CCHMC Code of Ethics
- Policy DOE-O2 Harassment Free Workplace
- Policy MCP-17 Weapons and Workplace Violence: Critical Incidents
- Crucial Conversations Course

Thank You



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