Lateral Violence and Bullying

ANA-Illinois

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Objectives

• Describe Joint Commission Concerns
• Define Bullying and Disruptive Behavior
• Identify Why Workplace Abuse and Disruptive Behaviors Occur
• Describe Joint Commission Requirements and Suggested Actions
• List How You Can Protect Yourself
• Identify What Nurses Can Do
Many Names...Same Issue

- Workplace conflict
- Lateral/horizontal violence
- Workplace abuse
- Bullying
- “Eating our young”
- Incivility
- Disruptive behavior

Important to distinguish bullying from conflict

- CONFLICT - “tension or struggle arising from mutually exclusive or opposing actions, thoughts, opinions, or feelings.”
  - recognized immediately and handled quickly so the situation does not escalate.
  - Communication is key
  - Mediation techniques may become necessary
- BULLYING - repeated and negative acts that target one or more individuals

Prevalence

The incidence of reported bullying in nursing samples from the United States varies from 18% (Johnson & Rea, 2009) to 31% (Simons, 2008).

2009—Only 5% of nurse educators reported teaching in workplaces where faculty and administrators work and play well together (Heinrich, in press)

- In a study by Hader (2008), nurses were reported to display disruptive behaviors more frequently than physicians (51.9% vs. 49%)
- In a survey conducted by Johnson and Rea (2009), 38% of the participants identified a co-worker as a source of bullying, and 29.9% reported the physician as the source.
Contributing factors that increase the Risk for Bullying Behavior

- Significant organizational change
- Major internal restructuring
- Technological change
- Financial constraints
- Worker characteristics
  - Age, gender, parental status, apprentice or trainee
- Workplace relationships
  - Inadequate information flow between organizational levels
  - Lack of employee participation in decisions
- Work systems
  - Lack of policies about behavior
  - High rate and intensity of work
  - Staff shortages
  - Interpersonal conflict
  - Organizational constraints
  - Role ambiguity
  - Role conflict

Costs of Disruptive Behavior

- Decreased retention/recruitment
- Increased turnover
- Decreased nurse satisfaction/morale
- Decreased knowledge, learning, creativity, quality
- Decreased patient satisfaction
- Stress
- Culture of fear
- Disengagement
- Lost productivity
- Absenteeism
- Psychological and physical harm

Costs of Disruptive Behavior

- Undermines a culture of patient safety:
  - Foster medical errors
  - Play a role in preventable adverse outcomes
  - Increase cost of care
  - Cause qualified clinicians, administrators and managers to seek new positions in more professional environments

(Joint Commission, 2008)
Costs of Disruptive Behavior

- Recruit and orient a new nurse: $60,000-80,000
- Negative consequences widespread and enduring—learned tolerance (Hutchinson, 2008)
- Engagement of staff, meaningfulness of work is mediated by psychological safety (May, et al, 2004)
- Empowerment indirectly effected by burnout/work engagement (Laschinger and Leiter, 2006)

Global & National Standards

- Canada and many in the European Union – explicit anti-bullying laws
- Several states have introduced healthy workplace bills - none passed
- US has no legal mandate protecting workers from bullying – burden rests with the employer
- Joint Commission – 2008
  - Supported by
    - American Nurses Association (ANA)
    - American Association of Critical-Care Nurses (AACN)
    - American College of Healthcare Executives

Joint Commission Requirements

- Effective January 1, 2009
  - New leadership standard (LD.03.01.01) addresses disruptive and inappropriate behaviors
  - EP 4: The hospital/organization has a code of conduct that defines acceptable and disruptive and inappropriate behaviors
  - EP 5: Leaders create and implement a process for managing disruptive and inappropriate behaviors
**Joint Commission Suggested Actions**

- Educate all team members on appropriate professional behavior
- Hold team members accountable
- Zero tolerance

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**Zero Tolerance**

- Adopt a code of conduct that defines acceptable and unacceptable behaviors for all healthcare workers
  - Develop a policy that outlines the procedures to address breaches in the code of conduct.
- The policy should include
  - how to report a breach
  - what steps are taken once a breach is reported
  - what occurs when a resolution cannot be reached.
  - The mechanism for reporting a breach must be clear.

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**Recognizing Bullying**

**3 Forms of Bullying**

1. A personal attack, which includes isolation, intimidation, and degradation;
2. Erosion of professional competence and reputation, which damages professional identity and can affect career options; and
3. Attacks through work orders and tasks, which include obstructing work or denying due process

**Examples of Bullying Behaviors**

- Unwarranted or invalid criticism
- Unjustified blame
- Unequal treatment
- Exclusion
- Social isolation
- Humiliation
- Unreasonable demands
- Verbal abuse
- Denied opportunities
Learn to Recognize it

- Receiving unwarranted or invalid criticism
- Being blamed without factual justification
- Being treated different from the rest of your colleagues
- Being assigned undesirable work
- Being gossiped about or being the target of rumors
- Being yelled or shouted at in a hostile way
- Being sworn at or verbally abused
- Being excluded from work-related social gatherings
- Having your phone calls and e-mails constantly ignored
- Having resources or information withheld that affect your job performance
- Having impossible deadlines set for you
- Being denied appointments
- Being “put down” or humiliated in front of others

Covering up inappropriate behaviors by saying such things as “Oh, she’s having a bad day” or “He’s always like that” should no longer be tolerated.
Take immediate interventions when witnessing bullying

Possible Responses When You Witness Bullying

- **Backstabbing** (Complaining about a person to someone other than the person) "I don’t know the facts of the situation and don’t feel comfortable discussing it."

- **lack of respect** "I do not like to talk about others without their permission."

Possible Responses to Bullying in the Workplace

- **Verbal abuse** (Yelling in front of others) "I do not appreciate being yelled at in front of others. It sets a bad example for the staff and does not leave a good impression on the patients and family members. If there is something you need to discuss with me, let’s do it in a more private place."

- **Nonverbal abuse** (Eye-rolling, making faces) "I sense that there is something you want to say to me. Do you wish to discuss it?"

- **Overhearing someone talking about you** "If there is an issue that we need to talk about, please come to me directly so we can discuss it."
What Can You do to Eliminate Bullying in the Workplace?

• Inform the bully that bullying behavior will not be tolerated.
• Maintain a record of the bullying incidents.
• Increase awareness of bullying by discussing the issue of bullying at staff meetings.
• Handle conflict positively and creatively.
• Promote positive, professional behaviors.
• Support the development of antibullying programs and policies.

Questions?

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