

BULLYING IN THE HEALTH CARE WORKPLACE

A guide to prevention and mitigation

What is workplace bullying?

The American Medical Association defines workplace bullying as repeated, emotionally or physically abusive, disrespectful, disruptive, inappropriate, insulting, intimidating, and/or threatening behavior targeted at a specific individual or a group of individuals that manifests from a real or perceived power imbalance and is often, but not always, intended to control, embarrass, undermine, threaten, or otherwise harm the target. Individual, organizational, and health system factors may contribute to the overall workplace climate or culture that allows unprofessional behavior, such as bullying, to persist (AMA Policy H-515.951).

Factors that contribute to workplace bullying include the following¹:

- A bullying culture
- Poor staffing levels
- Excessive workloads
- Power imbalances
- Poor management skills
- Role conflict or ambiguity
- Stress
- Lack of autonomy

Whom does bullying affect?

Bullying in the medical profession is a well-documented issue involving the abuse of power or control over a person and repeated offensive, intimidating, malicious or insulting behavior.²⁻⁷ A 2017 Workplace Bullying Institute survey showed 63% of workers are aware of bullying in their workplace.⁸ Bullying in the workplace is more common than sexual harassment and is initiated by both men and women.⁹ All health care workers, including physicians, nurses, medical assistants, and pharmacists can be victims and perpetrators of workplace bullying.

What are the consequences of workplace bullying?

The effects of bullying in medicine can reach beyond the target to the patients, care teams, organizations, and the families of the patients and victims. The effects of bullying on the organizational culture and professional attitudes of the medical staff are significant and lasting, emphasizing the importance of changing the culture to address the problem.¹⁰

How can health care organizations prevent and address bullying?

Because bullying in the workplace occurs as a result of individual, organizational, and systemic factors, prevention and mitigation should happen at all levels.

Implement or improve workplace policies

The first line of defense against this destructive behavior are physicians, residents, medical students and other health care workers. In addition, it is vital for health care organizations to implement policies to prevent and address bullying in their workplaces.

An effective workplace policy should:

- Describe management's commitment to providing a safe and healthy workplace. Show the staff that their leaders are concerned about bullying and unprofessional behavior and that they take it seriously.
- Clearly define workplace violence, harassment and bullying, specifically including intimidation, threats and other forms of aggressive behavior.
- Specify to whom the policy applies (i.e., medical staff, administration, patients, employees, contractors, vendors, etc.).
- Define both expected and prohibited behaviors.
- Outline steps for employees to take when they feel they are a victim of workplace bullying.
- Provide contact information and a clear process for confidentially documenting and reporting incidents.
- Prohibit retaliation and ensure privacy and confidentiality.
- Document training requirements.

Improve organizational culture

In addition to formal policies, organizations should cultivate a culture in which bullying does not occur. Organized medical staffs should work with all interested stakeholders to ensure safe work environments within their institutions. Fostering respect and appreciation among colleagues across disciplines and ranks can contribute to an atmosphere in which employees feel safe, secure and confident in their roles and professions.

Tactics to help create this type of organizational culture include:

- Surveying employees anonymously and confidentially to assess their perceptions of the workplace culture and prevalence of bullying behavior, including their ideas about the impact of this behavior on themselves and patients
- Showing employees their feedback is taken seriously by using the survey results to inform the development of programs and resources for employees, such as employee assistance programs, that provide them a place to confidentially address experiences of bullying

- Encouraging open discussions in which employees can talk freely about problems and/or encounters with behavior that may constitute bullying
- Assessing situations and intervening as soon as reports are received (as is appropriate per policies) and enforcing consequences for perpetrators of bullying
- Establishing procedures and conducting interventions within the context of the organizational commitment to the health and well-being of all staff

Key steps for management

In addition, experts suggest organizations can begin to address bullying in the workplace by taking these two key steps:¹¹

- 1. Make the administration aware that unprofessional behavior is a threat. If the team doesn't recognize that there is a problem, they won't have a plan to do something about it, nor recognize the threats to quality care.
- 2. Educate the entire staff—from physicians to custodians—about why unprofessional or hostile behavior is a problem. If the staff recognizes that the leaders are concerned about bullying, they are more likely to come forward when they feel that bullying has occurred, or better yet, tell their co-worker that their behavior is inappropriate.

Additional resources

Workplace Bullying Institute

Vanderbilt Center for Patient and Professional Advocacy

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