

## Bullying guidance

### Overview and background

Workforce bullying is a small but important problem within the NHS. It affects the individuals involved and compromises patient care. There is a growing understanding of the many negative outcomes associated with it, however there is often a reluctance to deal with the complex situations which lead to bullying. In not dealing with these issues a culture is propagated where it is acceptable that individuals suffer ill-treatment and are unhappy at work due to their interactions with others. In not permitting everyone to achieve their full potential, this has a significant impact on their productivity during the working day, potentially leading to impacts on patient outcomes and patient safety. A supportive workplace environment will facilitate people to thrive and succeed, leading to increased levels of happiness and productivity at work leading to better outcomes for both patients and other staff.

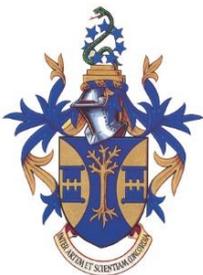
Bullying should not be confused with constructive criticism or feedback. Robust guidance and appropriate firm oversight is a required element of effective educational and clinical supervision to support the professional development of trainees. Often it is important that trainees receive immediate useful and relevant feedback on their performance and progress. On occasion, this feedback may be uncomfortable and in the form of an unsatisfactory assessment or adverse appraisal. However, this feedback should always be delivered in a developmental and supportive way. Bullying, on the other hand, is undermining and destructive. Good supervision should always be supportive rather than judgemental. There is much information available on what constitutes good supervisory practice, advice can be found on the [CQC](#) and [skills for care](#) websites. Effective clinical supervision has been linked to good clinical governance and associated with higher levels of job satisfaction and staff effectiveness.<sup>1</sup>

### What is it?

Bullying and harassment are often used interchangeably. Bullying is generally considered to be a form of harassment. There is no legal definition but it is defined by ACAS (Advisory, Conciliation and Arbitration Service) as "Offensive, intimidating, malicious or insulting behaviour, an abuse or misuse of power through means that undermine, humiliate, denigrate or injure the recipient." It is repetitive and intentional with an aim to do harm to the victim.

### What are its effects?

These are wide ranging and can result in physical and mental health issues.<sup>2</sup> They can include depression, stress and illness, feelings of dread at having to go to work and the taking of leave to avoid having to attend work. In addition, the victim may begin to consider that this is normal behaviour and perpetuate the cycle, becoming bullies themselves.



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There can be significant impacts on training and learning, perhaps with victims avoiding meetings or situations where they fear being shouted at or humiliated, being too afraid to ask questions or may consider leaving training altogether. These impacts on learning and training should not just be considered in relation to a registrar in training, but also to the growth and development of everyone in the work place. Bullying can stunt the development of all team members as they seek to avoid this bullying behaviour and is likely to significantly affect patient care. It often leads to strong feelings of anger, fear or shame. This heightened emotion is likely to impact on a person's ability to think clearly and logically, making it more likely that errors will result.

### What to do if you feel you are the victim of bullying or harassment

#### 1. Look after yourself.

It may be necessary to see a healthcare professional or take some leave. Part of coping with bullying may involve building resilience. There is much guidance available on building resilience from, for example; the British Medical Association (BMA), the charity Mind and your Human Resources (HR) department.

#### 2. Keeping records.

Keep contemporaneous records of any incidents you perceive as potentially bullying including; times, dates, locations and any witnesses. Email yourself with your account of the day's event on the same day. Keep all email correspondence between you and the person you feel maybe bullying you, perhaps in a separate folder for easy access. This along with writing down your feelings and frustrations can help you decide if you do have a bullying problem.

If it is possible it may be useful to have other colleagues or nurses with you in the situations where bullying may occur, primarily as a witness and potentially to defuse the situation.

#### 3. Informing others.

Discuss it with colleagues, have they noticed the problem? If you feel you are being bullied it may be that others feel the same way too. If you are in a training post there are a number of people to potentially discuss this with, including a supervising consultant, Educational Supervisors or your Training Program Director. For those working within a hospital setting it can be discussed with HR who in many hospitals have a separate parallel support system.

#### 4. External Support Organisations.

It may be useful to speak to someone who is entirely removed from the situation. Much of what the BMA offers to its members is available to dentists in hospital or via the BDA. The BMA Counselling Service (operating 24/7) and "doctors for doctors" which offers the opportunity to speak to another doctor in confidence. There are a number of advice lines available including [www.bullying.co.uk](http://www.bullying.co.uk) and [www.bullyonline.org](http://www.bullyonline.org). As a specialty trainee you may be able to access your University counselling team.

#### 5. Decide whether you want to take an informal or formal route to address the issue.

This is often the area that people have significant difficulties with, whether the issue is raised formally or informally. There is often a fear that raising the issue will highlight that the victim is at fault or escalate the behaviour of the bully.

### What happens if you want to make raise a concern as a trainee?

Complain to the Trust;

They should take action in accordance with their Bullying & Harassment Policy. The Postgraduate Dean should be informed via your TPD.

Contact your HR department to see if there is harassment and bullying policy readily available. If you are uncomfortable doing this the BDA/BMA can do it for you. You may also wish to seek advice from the BMA prior to making a complaint, particularly if you wish to make a formal complaint.

Complain to the Deanery;

The trainee will be invited to discuss the situation in confidence with the Dean, Deputy Dean or Associate Dean. They may be accompanied by a friend. The trainee should be informed of their rights and, where appropriate, encouraged to take formal action.

If the initial discussion suggests there is a case of bullying or harassment, the Deanery will explore the situation with the Trust and agree a way forward.

If the allegation is against a trainer who is employed by the Deanery, the Deanery has responsibility for conducting a formal investigation in accordance with Deanery policy. The investigation report, when completed, will need to be presented to a senior Deanery manager/clinician for a decision to be taken whether formal or informal action is appropriate.

Following the initial discussion there are two possible routes, formal and informal.

The Deanery and Trust (or employer) should, where possible, liaise on the proposed action.

In all cases, expert advice should be sought and HR representatives involved.

Informal: Where possible the trainee will be facilitated to try to resolve the differences through discussions with the alleged bully, exploring solutions through mediation rather than confrontation. The Deanery may need to consider if the trainee's placements need to be changed or if there should be a different supervisor without change of location. If an informal solution is found, the Dean should check satisfaction with the arrangements after a period of time, no greater than 3 months. If informal action is taken, this must be carefully documented. All parties must be in agreement that this is the appropriate way to deal with the situation.

Formal: As a Trust employee, the individual's recourse should normally be to follow the Trust's procedures as outlined in the Bullying and Harassment Policy or, depending on the individuals involved, it may be appropriate to follow the Bullying and Harassment Policy of the Deanery and subsequently take disciplinary action.

If it is found there is no case, ways to improve their working life should be considered and support provided. There should be a follow up process by the HR department to ensure no victimisation has taken place and that both parties are happy with the decision.

#### Useful links and references

1. [https://cqc.org.uk/sites/default/files/documents/20130625\\_800734\\_v1\\_00\\_supporting\\_information-effective\\_clinical\\_supervision\\_for\\_publication.pdf](https://cqc.org.uk/sites/default/files/documents/20130625_800734_v1_00_supporting_information-effective_clinical_supervision_for_publication.pdf)
2. [www.acas.org.uk/index.aspx?articleid=5163](http://www.acas.org.uk/index.aspx?articleid=5163)
3. [www.skillsforcare.org.uk/Home.aspx](http://www.skillsforcare.org.uk/Home.aspx)
4. [www.bma.org.uk/advice/work-life-support/your-wellbeing/bullying-and-harassment](http://www.bma.org.uk/advice/work-life-support/your-wellbeing/bullying-and-harassment)
5. [www.mind.org.uk](http://www.mind.org.uk)
6. [www.bma.org.uk](http://www.bma.org.uk)
7. [www.bullying.co.uk](http://www.bullying.co.uk)
8. [www.bullyonline.org](http://www.bullyonline.org)

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