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How to Tackle Workplace Bullying

Strenuous work demands, an atmosphere that places an emphasis on performance, and a rapidly changing environment promote a culture in healthcare that is tolerant of workplace bullying, according to an article in the journal *Radiology Management*. While physicians can be considered as the primary culprit of bullying, healthcare bullies can be any one of the professionals who work in the organisation.

Bullying behaviour presents itself in various forms such as verbal abuse (including shouting); humiliating or threatening behaviour; abuse of authority; interference of work performance; and destruction of workplace relationships. A 2014 report from the Workplace Bullying Institute states that in 56 percent of the cases, the perpetrators held a higher rank than the target.

"However, bullying is not committed just by managers. In fact, managers can be the target of bullying by their subordinates. This is referred to as upward bullying," writes the author Becky Lamberth, MJ, MS, CRA, FAHRA, an adjunct professor for Midwestern State University. “Although the percentage of reported upward bullying is very small (11 percent of bullying cases), many managers feel as if it has become an occupational hazard."

Bullying doesn’t impact just the targeted individual. Witnesses to the behaviour (referred to as secondary targets) are impacted as well. The secondary target can suffer very real emotional symptoms resulting in increased stress at work and a decrease in job satisfaction. "Secondary targets rarely help bullied colleagues and, in fact, demonstrate negative behaviours toward the target to include ostracism and siding with the bully," says Lamberth.

She adds: "Quite frequently, bullying escalates to include more than a single perpetrator and 23 percent of cases involve multiple perpetrators (referred to as mobbing) who join the primary instigator to torment the target."

How to Stop Bullying in the Workplace

Organisations should adopt a framework for understanding disruptive behaviour and address it quickly. The approach consists of developing strong policies that clearly define guidelines for addressing the behaviour, staff education, and holding leaders in the organisation accountable, the author explains.

See also: Rudeness at Work- Don't Pass it On

Code of conduct. Organisations should develop a Code of Conduct that specifically defines professional behaviour. Training should be provided to everyone in the organisation, including physicians. Training should be

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an ongoing process with designated intervals (eg, annually).

Process for managing inappropriate behaviour. Create and implement policies that specifically address bullying, even if it consists of adding verbiage to existing harassment policies. There should be a mechanism for reporting claims (anonymously) with specific guidance if the bully is a manager.

Prompt investigation of complaints . All allegations should be taken seriously and investigated promptly. If necessary, the organisation may need to involve external investigators, especially if they have little experience (or expertise) with bullying or if the perpetrators are members of senior management. Appropriate and progressive disciplinary processes must be established so that the culprit can be addressed immediately and in a very specific manner following the investigation.

Bullying is an organisational problem that requires the commitment of top leadership and a unified approach. "Individual efforts to stop bullying are ineffective and must be a top-down approach within the organisation," the author notes. "It is far more common for the target to leave the organisation so failure to intervene on their behalf will undermine efforts to eliminate disruptive behaviour. Even if the target leaves the organisation (voluntarily or involuntarily) the bully still remains and the environment will be unchanged."

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