

DN Essentials

# Bullying in the workplace

Joan Kingsley and Dr Sue Paterson investigate bullying and fear in healthcare.

The world of work is all too often riddled with people experiencing high levels of fear. This holds true in healthcare organisations as it does in all work environments. Stress, anxiety and fear create a perfect environment for bullying.

NHS England's NHS staff survey 2014, published last year, showed that almost a quarter (24%) of staff said that they experienced harassment, bullying or abuse from their manager or other colleagues in 2014, a slight increase from 23% in 2013.

NHS employees at all levels say it is not safe to speak out which has led to a 'cover-up culture'.<sup>1</sup>

In July 1948, the same year the NHS was created, Professor Harold Ellis qualified as a doctor. Professor Ellis is 89 and still working as a clinical anatomist at King's College, London. In February 2015, Ellis talked about how disturbing he found Sir Robert Francis' report on whistleblowing; the levels of bullying exposed in the NHS shocked him. Ellis believes the increase in bullying is to a large extent down to the failures of modern NHS systems to assign clear lines of responsibility for managing staff and for delivering patient care. As increasingly more services are outsourced there is increasingly less clarity about who is in charge.<sup>2</sup>

Bullying is on the increase in all areas of work, including organisations dedicated to healthcare. According to a report published in August 2015, 'almost six in 10 people have witnessed or suffered bullying in the workplace.... but less than half (48%) did anything about it'.<sup>3</sup>

Bullying is generally carried out face-to-face but can also occur in writing by telephone, text messaging, email and on social media and may include:

- Intimidation
- Ostracising behaviour
- Verbal and physical aggression
- Psychological harassment
- Unfair treatment
- Hostility
- Sabotage
- Using someone as a scapegoat.

Fear is one of the most powerful forces in our working culture today. Far too many organisations, including healthcare, run on fear in the mistaken belief that fear motivates. The reality is that fear tactics weaken individuals and weaken the structure of organisations. People running on fear are drained of energy, and suffering from stress-related psychological and physical problems. Fear is the easiest of the emotions to trigger, and thus is readily used by bosses who have little understanding of what makes a person tick. Unfortunately, fear leaves people focused on surviving rather than thriving.

Human brains, like the brains of all mammals, are hard-wired with eight basic emotions that are the basis of the way people think, act and feel. Of these, five are related to keeping us safe and letting us know about danger (fear, anger, shame, disgust and sadness), and two get us closely involved positively with people, objects and action (joy/excitement, love/trust), with the remaining one being left to take us in either direction (surprise).

## Sense of self

Fear in organisations does not necessarily lead to bullying, but persistent bullying only occurs in organisations that are run on fear. In a fear-driven work environment there is little or no value placed on honesty, openness or trust. A person working in a fearful work culture will not feel safe, will constantly have their guard up, will not know who to trust, will be watching his or her back; he or she will tell managers what they want to hear rather



**Joan Kingsley** is a consultant clinical and organisational psychotherapist. She has a private practice in London and is honorary consultant psychotherapist at The National Hospital for Neurology and Neurosurgery.  
**Dr Sue Paterson** is a qualified IOD Chartered Director, and has board experience in the oil, public and voluntary sectors. They are co-authors of *The Fear-Free Organization: Vital Insights from Neuroscience to Transform your Business Culture*. For more, visit [www.thefearfreeorganization.com](http://www.thefearfreeorganization.com).



than the truth.

A person who is bullied very quickly loses their sense of self, their confidence, and their self-belief; he or she feels excluded, frightened, unsafe, ignored and not trusted. Whilst the effects of bullying are long-term and difficult to overcome, the impact is immediate and devastating. Healthcare organisations would do well to create policies and programmes that encourage the establishment of fear-free organisations.

### References

1. <http://www.telegraph.co.uk/news/nhs/11432976/Bullying-in-the-NHS-is-getting-worse-annual-survey-shows.html>
2. <http://www.theguardian.com/society/2015/feb/18/harold-ellis-surgeon-nhs-whistleblowers-suspension-bullying-never-happened>
3. <http://www.slatergordon.co.uk/media-centre/press-releases/2015/08/most-people-have-experienced-bullying-at-work/>

### GDC expectations when managing and working with others

1. Take a patient-centred approach to working with the dental and wider healthcare team
2. Recognise and respect own and others' contribution to the dental and wider healthcare team and demonstrate effective team working, including leading and being led
3. Recognise the importance of and demonstrate personal accountability to patients, the regulator, the team and wider community
4. Where appropriate lead, manage and take professional responsibility for the actions of colleagues and other members of the team involved in patient care
5. Recognise and comply with the team working requirements in the Scope of Practice and Standards documents
6. Describe the scope of practice of the dental team and manage and delegate work accordingly, ensuring only those with appropriate training undertake procedures
7. Recognise, take responsibility for and act to raise concerns about their own or others' health, behaviour or professional performance
8. Recognise the need to ensure that those who raise concerns are protected from discrimination or other detrimental effects.