College of Respiratory Therapists of Ontario

Ordre des thérapeutes respiratoires de l'Ontario

CONDUCT COUNTS! Bullying SCENARIO

Jane has worked at a 500-bed community hospital for a long time. She's seen a lot of changes during that time – scope expansion of the RTs' role, the creation of AA positions, as well as some less positive things like the amalgamation of departments and management. Jane is far more likely to talk about the negative aspects of working at the hospital, and many steer clear of her because they don't like her abrasive style. Some colleagues go so far as to label her a "bully" and suggest that she ought to be reported to management. But no one wants to be the one to step forward because they will have to continue to work with her and are afraid she'd be spiteful towards whoever reports her.

Cindy had worked at this same hospital many years ago, but had left to obtain different experiences and, if truth-be-told, escape the lack of privacy that she associated with the small-town attitude of the community. Life brings many changes though, and Cindy finds herself wanting to be closer to her aging parents now so here she is back at the same hospital (as Jane).

Cindy had witnessed Jane's tirades when she was a Graduate RT working there, and managed to avoid the direct line of fire by staying under the radar and not challenging Jane on anything. She was surprised to see Jane was still working at the facility, and even more surprised that management hadn't reined in her attitude. From Cindy's perspective, Jane's bullying attitude had a negative effect on morale and tangentially patient care - because no one wanted to work with her and no one would question her opinion even when they thought her approach to patient care was sometimes dated.

One day Cindy walked into the lunch room to overhear Jane giving another RT grief about what she was eating. The RT had an eating disorder history, which Jane had told everyone about after the RT had confided in her. Jane was telling the RT in a loud, scolding tone that she "better not eat that because [she'll] end up binging again or getting fat." Cindy could see that the RT was close to tears as she turned away from Jane and headed towards the door. Cindy glared at Jane but said nothing. Two days later she heard that the same RT had gone on sick leave and had been admitted to Homewood Health. At that point Cindy went to her manager and said that she would like to report Jane's conduct. The manager asked Cindy to send her an email with descriptions of all of the incidents she had witnessed first-hand. Cindy submitted her email and encouraged a few of her colleagues who had complained about Jane to her, to do the same. In total, the manager received descriptions of sixteen interactions with Jane - more than half occurring during the provision of patient care – that her colleagues categorized as bullying.

After a more thorough internal investigation, Jane is required to attend sensitivity training and is suspended for a day by her employer. A report is then filed with the CRTO.



PROFESSIONALISM

"Professionalism" or professional conduct is a term often used to describe the behaviours that are expected of individuals who hold a certain role in society. A "professional" is typically someone who has obtained skills that are recognized as requiring specific, intensive training and who applies those skills in a position impacting others (e.g., engineer, lawyer, RT, PT, MD, etc.). Professionals are often held to moral, ethical and legal standards because of this potential impact.

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RESULTS

As follow-up to the employer report, the investigator appointed by the Inquiries, Complaints and Reports Committee (ICRC) contacted the hospital and obtained copies of the internal investigation record and Jane's HR file. In addition, the CRTO's investigator interviewed the staff who had complained, along with the RT manager. The investigator's report was sent to Jane, and she responded in writing to the ICRC.

Given that the employer was requiring Jane to attend sensitivity training, the ICRC felt that it would be redundant to do something similar. Instead, they asked Jane to sign an Agreement & Undertaking with the College wherein she agreed to "refrain from engaging in conduct that may reasonably be perceived as offensive, intimidating, harassing, inappropriate or otherwise reasonably be seen to be a breach of CRTO standards regarding professional relationships (this includes taking any action in reprisal against any hospital staff who may have contacted or spoken with the CRTO in the course of the investigation into [her] conduct)."

EXPECTATION

According to the Canadian Centre for Occupational Health and Safety, "bullying is usually seen as acts or verbal comments that could 'mentally' hurt or isolate a person in the workplace. Sometimes, bullying can involve negative physical contact as well. Bullying usually involves repeated incidents or a pattern of behaviour that is intended to intimidate, offend, degrade or humiliate a particular person or group of people. It has also been described as the assertion of power through aggression." Some of the ways that bullying may be displayed at work include:

- Underwork for example, creating a feeling of uselessness with less experienced RTs
- Yelling or using profanity
- Criticizing a person persistently or constantly
- Belittling a person's opinions

In addition, Jane's unprofessional behaviour may have contravened several standards of practice:

- Section 1.12: aspiring to a high level of professional efficacy at all times;
- Section 1.14: demonstrating compassion, trust and honesty;
- Section 1.24: conducting all professional activities and programs and relations honestly and responsibly, and by avoiding any actions that might discredit the profession;
- Section 4.4: refraining from making false, conscious, deliberately misleading or deceptive statements, orally or in writing.

The impact of bullying on the mental and physical health of Jane's colleagues was a real consideration by the ICRC, as was the potential impact patient care if her co-workers avoided interacting with her and collaborating in patients' interest.

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BOTTOM LINE

If you are being bullied, consider the following recommendations:

- FIRMLY tell the person that his or her behaviour is not acceptable and ask them to stop. You can ask a supervisor or union member to be with you when you approach the person.
- KEEP a factual journal or diary of daily events. Record:
 - The date, time and what happened in as much detail as possible.
 - The names of witnesses.
 - The outcome of the event.

Remember, it is not just the character of the incidents, but the number, frequency, and especially the pattern that can reveal the bullying or harassment.

Also you should,

- KEEP copies of any letters, memos, emails, faxes, etc., received from the person.
- REPORT the harassment to the person identified in your workplace policy, your supervisor, or a delegated manager. If your concerns are minimized, proceed to the next level of management. Consider reporting the individual to his/her regulatory College.

RESOURCES

Standards of Practice A Commitment to Ethical Practice Abuse Awareness & Prevention Professional Practice Guideline

