Lateral Violence, Bullying and Disruptive Behaviors

Does this still be happen?

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Objectives

- Define Lateral violence, bullying & disruptive behavior
- Cite the impact of lateral violence, bullying and disruptive behavior on caregivers, patients, families and the workplace
- Identify credentialing, accrediting and professional organization positions on lateral violence, bullying and disruptive behavior
Objectives

- Define effective strategies for handling lateral violence, bullying and disruptive behavior
- Cite resources for staff and managers on the topics of lateral violence, bullying and disruptive behavior
- Evaluate your professional role, and responsibility in reference to ensuring lateral violence, bullying and disruptive behaviors are identified, prevented and handled.

Lateral Violence, Bullying & Disruptive Behavior

When you hear these words.. does it make you pause and think..
- Have you ever been a victim, an observer, a party to these behaviors?
- Why do you think it happens?
- How does it affect the professional, the patient and the family?
- What about care & outcomes, is an impact ever felt?
- What might it look like, sound like?
What contributes to these events occurring?

- Leadership
- Expectations
- Accountability
- Role Models
- Policies & Procedures
- Norms, Mores, Culture
- Public Perceptions
- Change

DEFINITIONS**

Bullying:
is an offensive abusive, intimidating, malicious or insulting behavior, or abuse of power conducted by an individual or group against others, which make the recipient feel upset, threatened, humiliated or vulnerable, which undermines their self-confidence and which may cause them to suffer stress.

Bullying is behavior which is generally persistent, systematic and on going. (Task Force on the Prevention of Workplace Bullying, 2001) Bullying associated with a perpetrator at a higher level of authority, gradient, (Center for American Nurse, 2007)
DEFINITIONS**

- Lateral Violence:
lateral violence and or horizontal violence are
terms used to describe the physical, verbal or
emotional abuse of an employee.

This violence can be manifested IN VERBAL OR
NON VERBAL BEHAVIORS. The ten most common
forms of lateral violence in nursing are: “non-
verbal” innuendo”, “verbal affront”,
“undermining activity”, “withholding
information”, “sabotage”, “infighting”,
“scapegoating”, “backstabbing”, “failure to
respect privacy”, and “broken confidences”.
(Griffin 2004).

DEFINITIONS**

- Disruptive Behavior:
is behavior that interferes with
effective communication among
healthcare providers and negatively
impacts performance and outcomes.
This type of behavior is not supportive
of the culture of safety.
DEFINITIONS**

**Culture of Safety:**
is characterized by open and respectful communication among all members of the healthcare team in order to provide safe patient care. It is a culture that supports organizational commitment to continually seek to improve safety. (Institute of Medicine, 2007)

**Workplace Bullying:**
“Workplace bullying is repeated inappropriate behavior, direct or indirect against another or others, at the place of work and/or in the course of employment, which could reasonably be regarded as undermining the individual’s right to dignity at work”. (Task Force on the Prevention of Workplace Bullying, 2001)

DEFINITIONS**

**Verbal Abuse:**
A disruptive form of behavior involving verbal communication that is associated with horizontal violence and bullying. Cox describes verbal abuse as “any communicates a nurse perceives to be harsh, condemnatory attack upon herself or himself professionally or personally.” (Cox, 1991) Such abuse can include: silence, backbiting, gossip, and passive aggressive behavior. (Rowe and Sherlock, 2005)

**Center for American Nurses, Lateral Violence and Bullying in the Workplace, Approved February 2008.

Note: TJC also has definitions
Examples of Lateral Violence, Bullying & Disruptive Behavior

- Lateral Violence
- Bullying
- Disruptive Behavior

Anger Vs Disruptive Behavior

- What is the difference?
- Who decides?
- Key elements:
  - Location
  - Timing
  - Parties Involved/ Present
  - Threats
    - Real vs Perceived
    - Action Taken
What are the impacts of Lateral Violence, Bullying and Disruptive Behavior?

- Personal
- Professional
- Care & Outcomes
  - Patient Safety
  - Economic
  - Team Work
  - Cultural
  - Malpractice Claims
  - Retention & Turnover

Organizational Initiatives

- American Nurses Association
  - Educational Module
- The Joint Commission
  - Sentinel Event Alerts # 40
    - 11/10 Recommendations
    - Leadership Standards LD 3.10.01
Organizational Initiatives

- AHRQ
  - Hospital Safety Survey
    - Toolkit: [www.ahrq.gov](http://www.ahrq.gov)
  
- Medical Staff/Practitioner Health - MS 4.50, 6.01.05, 4.80
  - Management of Disruptive Behaviors, Fair Hearing & Appeal Process
  
- Emergency Preparedness OSHA

- Workplace Violence

- National Quality Forum 2009
  - Safe Practices

Organizational Initiatives

- Organizational Policies & Procedures
  - Code of Conduct
  - Violence in the Workplace
  - Sexual Harassment
  - Non Retaliation or Whistle Blowing Policies
  - Others Specific to Workplace

- AMA
Methods to Determine if a Problem Exists?

- Reports to:
  - Security
  - Human Resources
  - Risk Management
  - Employee Assistance
  - Administration
- Surveys
  - Direct & Indirect
  - Anecdotal Descriptions

Behavioral Types

- The King & Queen
- The Playground Bully
- The Terror-izer or Gang Member
- The Sherman Tank
- The Sniper
- The Underground
- The BMW
- The Protector
Lateral Violence Relationships

- Gender - “women have not been socialized to appreciate themselves or the roles they play” (Rowell)
- Self Esteem
  - Too much or too little
  - Student interactions shape future professional image
- Anger
  - driving or restraining force
  - hurt & disillusionment - female emotion (Thomas, 2003)
- Power & Control
  - ”Eating our Young”
  - Nursing Assistants, Secretaries, Other Nurses

Behaviors

- Insults
- Intimidation
- Physical Threat
- Verbal Threats
- Humiliation
- Lack of Respect
- Acting Out with Aggressive Moves
- Facial Expressions
- Harsh or Intimidating Tone of Voice
- Sabotage
- Backbiting
- Verbal Affront
- Withholding of information, support etc
- Undermining
- Gossip
- Silence
- Passive Aggressive Behavior
- Man, Many More
How to Address Lateral Violence, Bullying and Disruptive Behaviors

- Setting of Expectations
  - Professional Behaviors as per ANA Code of Professional Ethics & Standards of Care
    - Professional Image
  - Communication
- Code of Conduct
- Behavioral Standards & Policies
- Zero Tolerance Policy
- Accountability
- Transparency
- EAP & Support Resources for Issues

Healthy Workplace Elements

- Culture of Safety
- Respect
- Communication
- Interpersonal Skills Sets
- Education
- Collaboration & Teamwork
- Leadership
- Low Turnover & High Staff Retention
- Advocacy
- Use of Evidence Based Information
- Organizational Support
- Patient Family & Staff Centered
- Satisfaction
- Resources
- Documentation Tools
- Change Acceptance
What is Our Role & Responsibilities at Nursing Professionals?

- Be Educated
- Be Vigilant
- Be Supportive
- Teach Skills
- Know the Resources
- Participate in Development of Policies, procedures, Codes of Conduct etc.
- Document Incidences
- Be Sensitive
- Communicate Appropriately
- Be Professional

What’s it all about?

Doing the Right things for the Right Reasons!

Each One of Us Has the Power to Change Things!