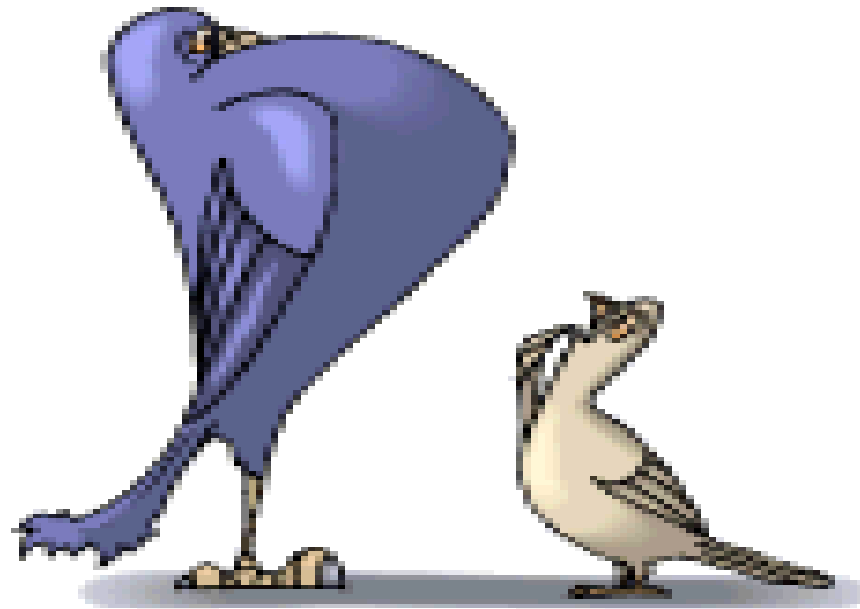


A multi-tiered approach to prevent bullying in the workplace



Introduction

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National Sales and Marketing

Marketing / Communications; Client Relations; Solution Groups; Tenders / Tender Fulfillment; Sales Skill Dev

Recovere
Workforce

Product Mix:

- All RTW services
- Career redeployment
- OH&S training
- OHS auditing & consultation
- Integrated Injury Management

Recovere
Occ Med

Product Mix:

- Second opinion medical services
- Consultation & advisory services
- Pre-employment medicals
- FFD medicals
- Wellness programs
- Corporate healthcare

Recovere
Corp Psych

Product Mix:

- Psych claims related
- Mediation services
- CID/Trauma
- Liability assessment
- 360degree feedback
- Leadership coaching
- Group & individual counseling / EAP
- HR consultancy

Recovere
Employ

Product Mix:

- Group & individual Programs
- Assessment & goal Setting
- Job specific training
- Outcome based models
- Niche programs
- Inc Job Network and corporate services

Recovere
Advisory

Product Mix:

- Provision of in sourced Rehabilitation Advisors

“It is the centrality of work to an individual’s life and sense of self that is at the core of the harm workplace bullying does to those who are targeted”

Lyn Turney

Wellbeing: more than just feeling good

- Happiness or satisfaction with life
- The search for happiness is often confused with the pursuit of pleasure
- Wellbeing is more than living ‘the good life’

The evidence shows:

- Physical activity and sound sleep
- Good diet
- Rewarding work
- Sufficient money
- A healthy relationship
- The company of friends
- Leisure activities
- Religious or spiritual belief and practice



Enhances our wellbeing
whilst their absence
diminishes it



Consider this.....(1)

- Worker injured in the workplace, severed tendons
- Physical damage is treated, some limitations in function
- Post Traumatic Stress Disorder
- Able to return to work, full hours, modified duties
- Alleged bullying behaviours at work (reported by another worker also)
- No apparent improvements re PTSD for some time



Question: Adequacy of psychological treatment

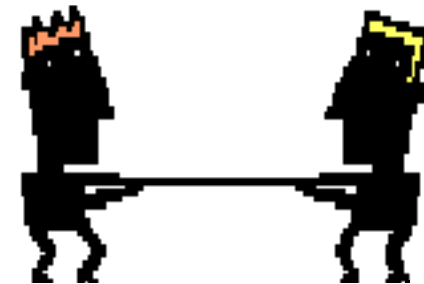
Question: What is being done re bullying?

Consider this.....(2)

- Employer concerned Worker about to lodge a stress claim
- Worker had concerning presentation (teary, anxious, etc.)

HR manager's initial investigation of the situation revealed:

- Worker felt distressed within work situation - felt bullied
- Situation arose a year ago as a result of a conflict between two employees working within the unit.
- Frontline Managers participating in the conflict
- Unit Manager had not addressed the issues



What are we talking about?



- **Bullying** has tended to have various definitions – leading to broad and over-inclusive definitions

Under Victorian OH&S Act

“repeated, unreasonable behaviour directed towards an employee or group of employees that creates a risk to health and safety”

Four key elements:

1. Workplace conflict
2. Enduring and repeated in nature
3. Inappropriate and possibly aggressive
4. Results in a level of (physical/ and/ or psychological) distress

(Mellington in Gregor, 2004. Fighting back: Workplace bullying in Australia, APS)

Individual Impact



Physical

- Appears tense
- Appears tired
- Ailments such as headaches and nausea
- Shaking, sweating
- Appears anxious
- Hyper-vigilant/ on the lookout

Psychological

- Difficulty making decisions
- Reduced self esteem and confidence
- Poor memory, attention and concentration
- Negative thoughts/pessimism
- Lack of motivation and interest

Behavioural

- Absenteeism and lateness
- Social withdrawal/ isolation
- Increased mistakes
- Increased substance use (drugs/alcohol/cigarettes)
- Lowered productivity
- Deterioration of workplace relationships (eg., conflict)
- Avoidance (tasks/ work areas/ people)
- Self-harm

Emotional

- Easily Frustrated
- Irritable/short fuse
- Anxiety
- Teary/crying
- Out of character emotions
- Mood swings



Potential Psychological Injuries

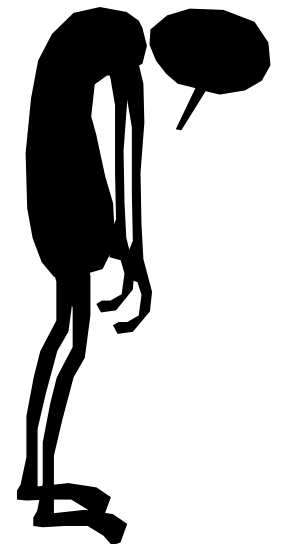
Major Depressive Disorder

Bipolar Mood Disorder (previously manic depression)

Anxiety disorders (e.g. panic disorder, obsessive-compulsive disorder, generalised anxiety disorder, social phobia)

Post-Traumatic Stress Disorder (PTSD)

Adjustment Disorder



Organisational Costs

Direct Costs

- Medical and like expenses
- Increased claims (25% of psych claims related to bullying)
- Increased compensation premiums
- Legal and related costs (eg., OH&S fines)



Hidden Costs

- Absenteeism
- Poor work performance
- Reduced morale
- Staff replacement
- Retraining
- Reduced efficiency
- Reduced productivity
- Effects to product quality
- Poor workplace relationships

Social Costs

- 50-70% experience bullying (past or present)
- An additional 13% report having witnessed it
- 38% report duration of over 6 months
- About 40% do not turn to anyone for support
- Making a complaint has been reported to be the most 'unsuccessful' method to resolve bullying
- Deemed most successful were taking 'no action' or 'seeking a new job'
- Heightened anxiety even after behaviour ceases
- Negative impact on health and general well-being

Leading to:

- Loss of productive time both in the workplace and in dealing with and recovery from trauma related injury is a substantial social cost
- Coupled with relationship and social difficulties
- Harmful coping strategies (e.g. avoidance through substance use, self-harm)



Workplace Bullying: Impact



INDIVIDUAL COSTS

Health and Well-being

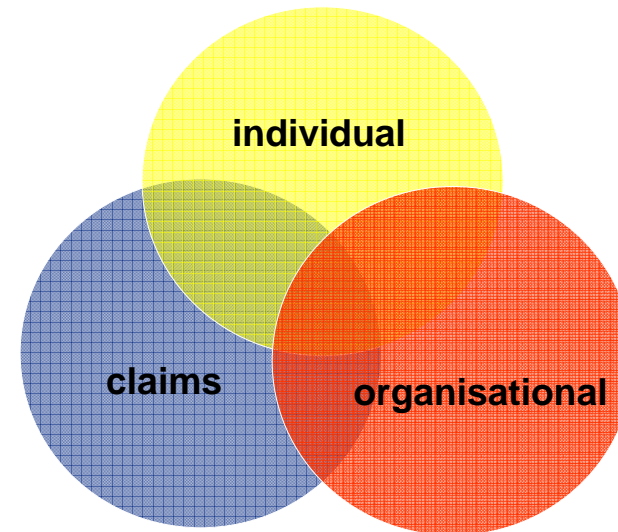
- Physical
- Emotional
- Cognitive
- Behavioural

ORGANISATIONAL COSTS

- Increase in workers compensation premiums
- Medical and Legal expenses (potential OHS fines)
- Absenteeism
- Poor work performance
- Poor workplace relationships and reduced morale
- Staff replacement and Retraining
- Reduced efficiency and productivity
- Effects to product quality

STRESS CLAIMS

- Workplace bullying leads to a significant number of stress claims
- There are usually high monetary costs associated with these



What is the solution?



Why Do People Bully?

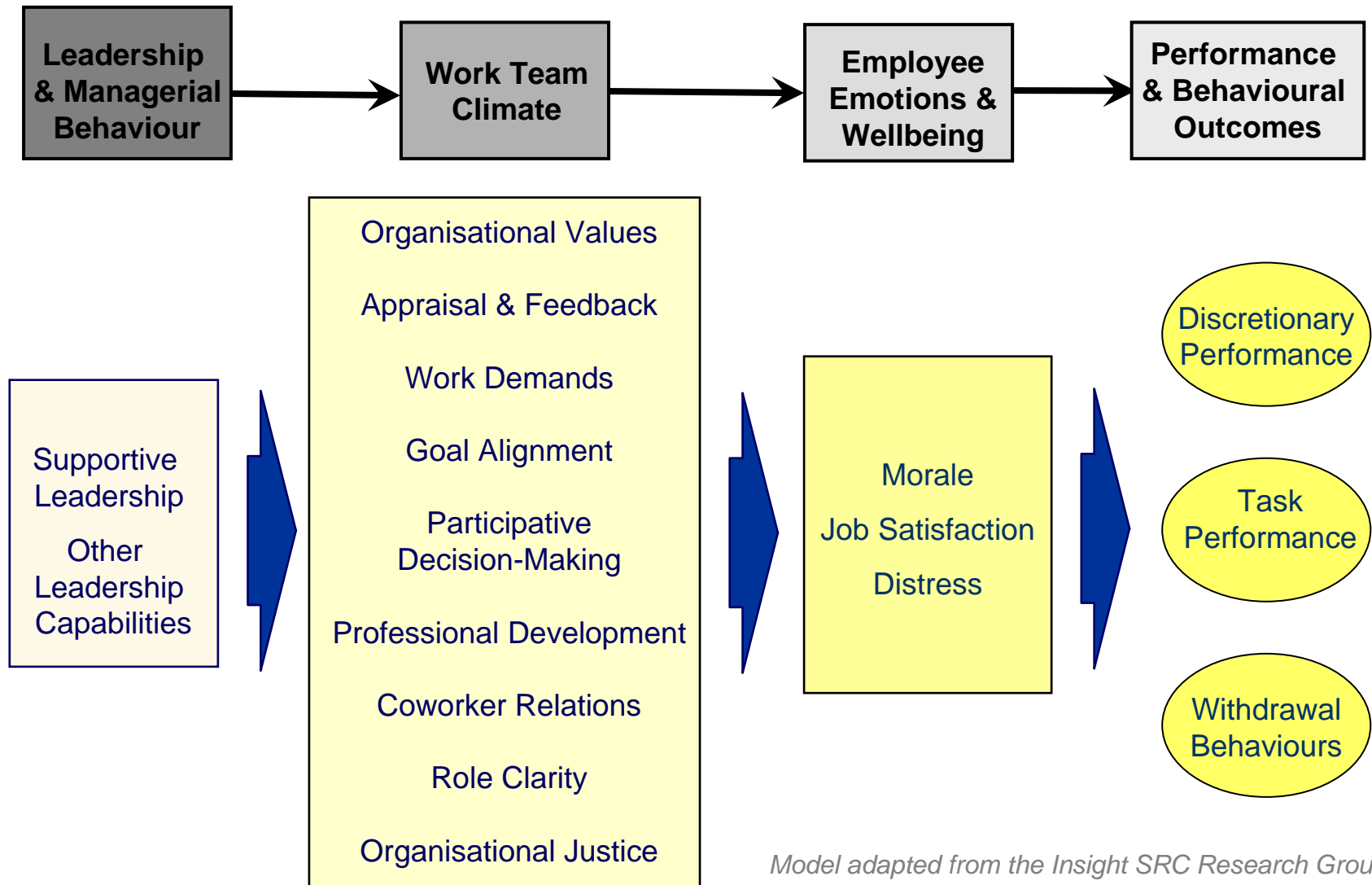
Organisational Factors

- Workplace culture (behaviours are tolerated)
- Role uncertainty/ unclear expectations
- Unclear work systems (eg., no policy/procedures or not used, high uncertainty, high workloads)
- Poor management practices (eg., display bullying or use coercive behaviour, lack of people management skills)
- Lack of clear job roles/responsibilities (recruitment & leadership)

Individual Factors

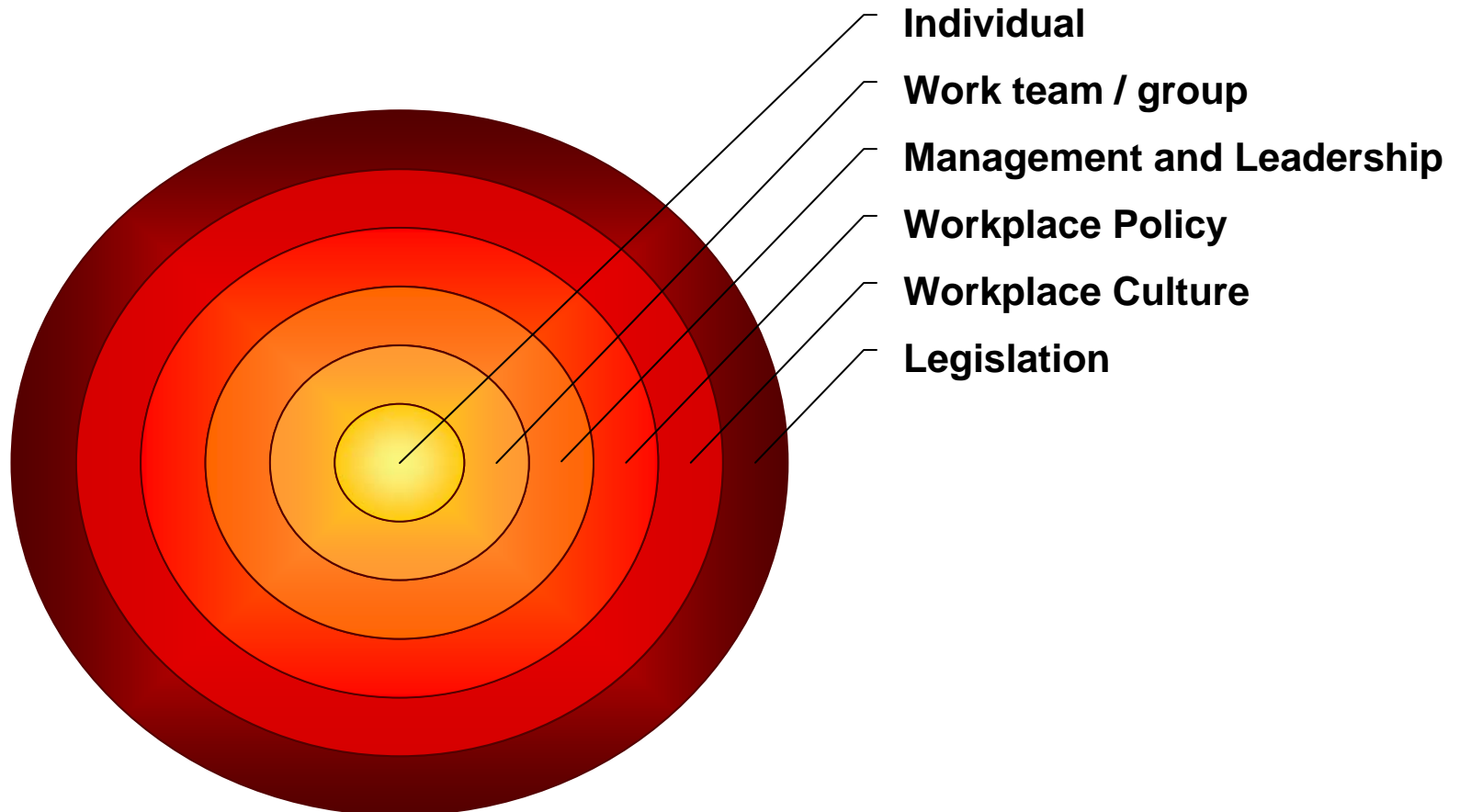
- As a reaction to being bullied or attacked themselves
- To exercise authority or control
- To get their own way (learned behaviour)
- Inability to cope with circumstances
- Unintentional: unaware that behaviour is unacceptable to others, inappropriate or offensive
- Failure to recognise and acknowledge individual difference
- Actual prejudice / bias – may fall under unlawful discrimination

Linking Leadership to Wellbeing and Performance

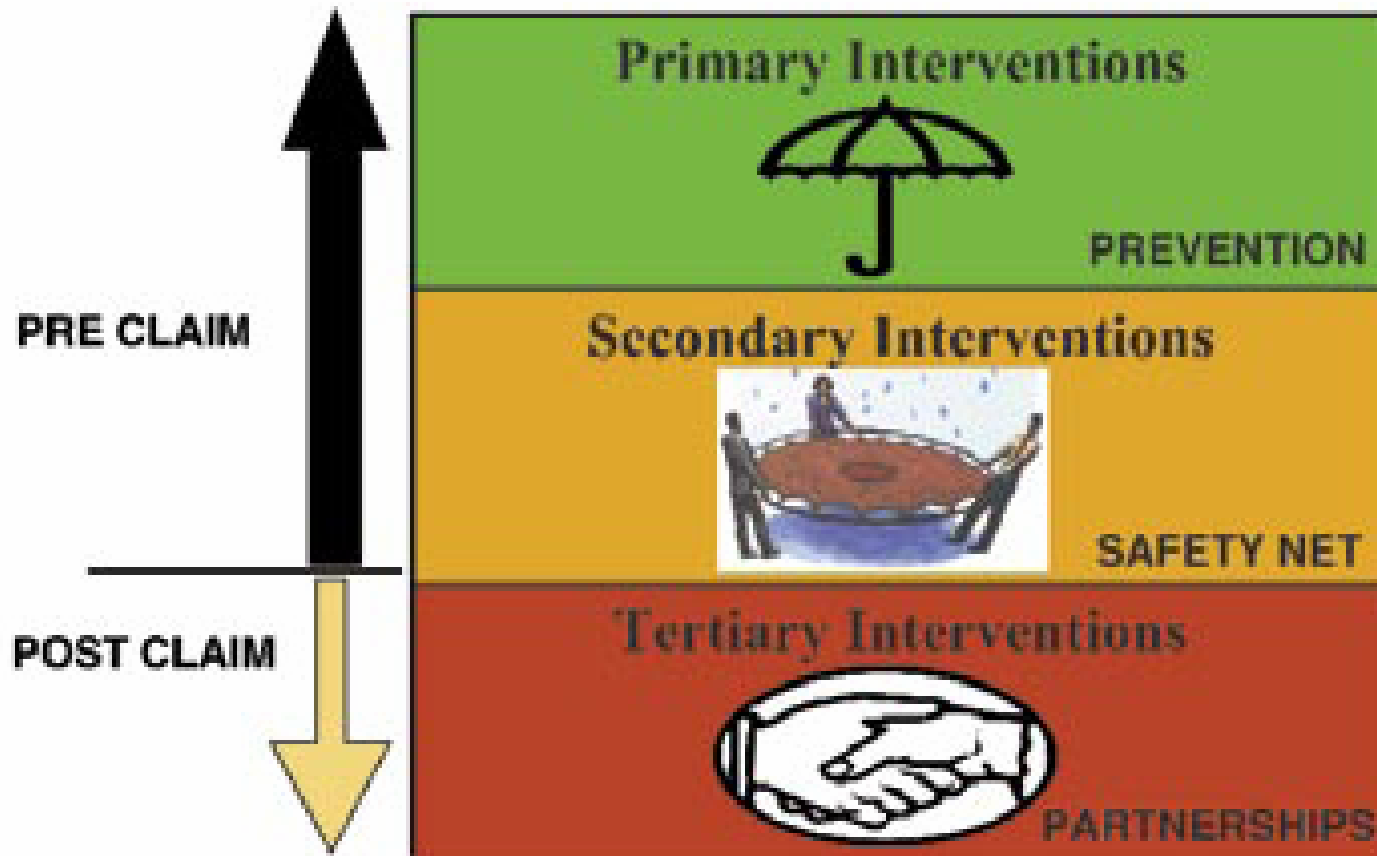


Model adapted from the Insight SRC Research Group

A Multi- Tiered Approach



Managing Stress in the Workplace (Mellington, 2003)



Primary Interventions



Aim to prevent workplace stress by addressing organisational culture, structures, systems and practices, such as:

- Policy and procedure development (e.g. OH&S, no bullying policy)
- Conduct employee opinion and culture surveys and focus groups (to identify pertinent issues)
- Personnel selection and recruitment strategies (e.g. try to best match skills and personality to the job)
- Identify hazards and risk factors, control the risks



Leadership and Management

Significant research to indicate that Leadership plays a crucial role in determining workplace health.

Research shows that Supportive leadership is

- Being approachable
- Knowing problems that staff face
- Supporting staff
- Communicating well with staff
- Being reliable



Important factors in assisting with stress and health in workplace

Secondary Interventions



Focused at an individual level, and aim to educate and equip employees with various skills:

- Mediation / conflict resolution services
- Investigation / resolution procedures
- Employee Assistance Program (e.g., counselling, CIM)
- Stress management, work-life balance training, etc.,
- Skills training / workshops (e.g. time management, assertiveness and conflict resolution skills).

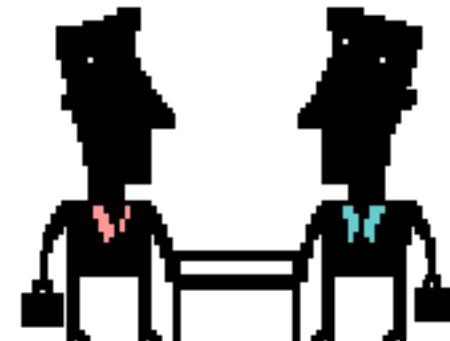


Tertiary Interventions



Focused on treatment and resolution:

- Occupational Rehabilitation (e.g. RTW)
- Investigation / resolution procedures
- Psychological counselling / therapy



Solutions: Case (1)



	Interventions
Individual	<p>In-house consultant (psychologist)</p> <ul style="list-style-type: none">•Clarify worker's concerns•Clarify treatment plan and issues <p>Provide counselling</p>
Leadership /Management	<p>Discuss allegations re bullying behaviours with claims manager</p> <p>Package strategies re how this may be addressed</p> <p>Provide support to injured workers</p> <p>Conduct workplace meeting with supervisors</p>
Workplace Culture	<p>Provide information to managers and employees</p> <p>Role model appropriate behaviours in the context of supporting injured workers</p>

Clarifying the issues: Case (1)



- Psychological factors
- Distress and reduced productivity in the workplace
- Treatment of PTSD
- Lack of clarity regarding progress/ prognosis/ timeline
- Lack of clarity re impact of leadership behaviour
- Allegations re bullying behaviour from colleagues/ supervisors
- Perceived lack of support/ intervention from manager
- Apparent reluctance to enforce existing policy
- Potential for a concurrent psychological injury claim

Strategies: Case 1



Individual

- In-house consultant (psychologist)
 - Clarify worker's concerns
 - Clarify treatment plan and issues
- Provide counselling, direction

Leadership Management

- Discuss allegations re bullying behaviours with claims manager
- Package strategies re how this may be addressed
- Conduct workplace meeting with supervisors
- Provide support to injured worker

Workplace Culture

- Provide information to managers and employees
- Role model appropriate behaviours in the context of supporting injured workers

Outcomes: Case study (1)



- Reports of bullying behaviour ceased (included both workers)
- No additional claims
- Improved understanding re RTW process
- Increased support from supervisor re RTW process (positive role-modeling)
- THP, worker and employer agreed on subsequent course of action
- Worker receiving assistance to find alternative employment
- Employer able to fill ongoing position



Clarifying the issues: Case (2)



- Psychological symptomatology
- Distress and reduced functioning and productivity in the workplace
- Ongoing conflict between two workers
- Creation of a divided team
- Passive management of initial conflict
- No management of team situation
- Resulting in lack of supportive work culture
- Potential for psychological injury

Strategies: Case 2



Individual

- Provide EAP
- Mediation

Work Team

- Cultural diagnosis
- Occupational stress inventory
- Series of workshops

Leadership Management

- Leadership Style Inventory
- Feedback session and development plan
- Individual Coaching

Workplace Culture

- Broader organisation culture survey
- Plan to address identified issues

Organisational Values

- Drafted a set of organisational values
- Designed to guide the organisation on how they will meet their goals and visions and provide a framework for how they work together

Solutions: Case (2)



	Interventions
Individual	Provide EAP Mediation
Work team	Cultural diagnosis Occupational stress inventory
Leadership/ management	LSI Feedback session and development plan Individual Coaching
Workplace culture	Broader organisation culture survey Plan to address identified issues
Organisational Values	Drafted a set of values Designed to guide the organisation on how they will meet their goals and visions and provide a framework for how they work together

Given the endemic and chronic nature of some of the issues identified we recommended a strategy to addresses issues on an individual, team and organisational level.

Stage 1: Individual level; to reduce immediate distress, counselling services through EAP

Also recommend mediation take place between the two workers.

The aim was to document and obtain mutual ownership of a clear set of behavioural expectations around their inter-personal interaction and communication. This set a mutually agreed basis from which any future behaviour could be managed.

Stage 2: Team level Conducted cultural diagnosis – using the Occupational stress inventory

We then provided a briefing to the Team to relay feedback from initial Cultural Diagnostic and to gain ownership and ‘buy in’ to effect a significant cultural change. This was provided in conjunction with Management at Council.

Stage 4: Team level; Recovre also recommended that the team attend 4 half day workshops. The aim of this training program would be to give staff motivation, skills and knowledge to generate a work culture in which staff own and take responsibility for their behaviour, in which unacceptable behaviour is not tolerated and in which there is a greater sense of cohesion and improved communication;

Self awareness and impact of behaviour

Role clarity and responsibility

Conflict Resolution

Effective Communication

Stage 5: Organisational level; To address the significant leadership issues noted above a leadership development program was undertaken by the council. This comprised an initial 360 degree leadership assessment for key personnel to improve self awareness and identify leadership style and areas for development. In addition this was followed by individual coaching sessions to address developmental needs. To create consistency across organisation this was implemented with senior managers.

Stage 6: Organisational level; To help mitigate risk it was recommended that Council also formally establish and promote an Employee Assistance Program with staff to help address and resolve some of the high levels of psychological distress noted to help mitigate risk and promote employee well being.

Feedback to management verbal and summary report
Manager and HR director
Leadership needs to be addressed
LSI – leadership screening inventory 360o assessment
Each got a development plan

Received feedback:
One manager got quite resistant
Didn't acknowledge his issues, difficult to implement the recommended changes
HR manager was fine
General manager – quite passive
Individual development plans

4 workshops with staff
MBI – preferences and working styles. Appreciate differences, understand the impact in a work context.
Conflict resolution
Effective comms

Mediation between original trouble makers
Talked about the issues
One woman's son 14yrs threatened to kill the other's son
She took off in a huff
The other wouldn't forgive
Personal issues relating to other matters
Outcome of mediation??

Outcomes: Case study (2)

Recoveré



- Original conflict resolved
- No psychological injury claims
- Manager who appeared to be resistant to change resigned
- Organisation took positive steps towards becoming a high functioning organisation – incorporating:
 - Integrated framework and approach across all levels
 - “Beacon on the hill” the picture of what success looks like
 - Aligning goals and values with leadership behaviour and processes, focusing people on performance and alignment of front-line staff.

“High performance organisations are a little bit better on every dimension”

Challenges

- Understanding a common framework for resolution
- Understanding stakeholder roles within this
- Getting 'buy-in' from all stakeholders
- Investment in pro-active strategies



Don't just take my word for it.....



Jan was promoted over her Supervisor in a restructure. No training was provided. Some team members maintained loyalty to the former Supervisor and disobeyed requests, failed to provide assistance, made whispered vindictive remarks and behaved rudely. They drew up a list of complaints without consultation and presented it to her Manager. Jan felt humiliated and undermined, but appeals to her Manager for support were met with response that she should “sort things out” with the team herself...

Outcome



Jan ceased work due to stress. A formal investigation recommended: leadership skills training be provided for her; counselling for team members re **workplace ethics/conduct; counselling for her Manager re his lack of action in managing the situation or implementing the code of conduct; action plan established to develop his people management skills.**

Jan was unable to RTW due to illness. Employer found negligent due to failure to address a foreseeable risk. \$339,722 settlement paid; employer appealed; judgement upheld by NSW Supreme Court.

Conclusion

- It is possible to deal effectively with issues of bullying
- Implementing a multi-tiered approach requires collaboration from all stakeholders
- Understanding is the key
- We can make a difference





Thank You

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