



# Discussion on the Influence and Adaptation "Nursing Workplace Bullying", on Experiences of Nursing Staff

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## Subject

In recent years, the shortage of nursing staff has become an alarming issue as it threatens to affect the smooth operation of the medical system and patient safety. And workplace bullying only serves to worsen the nursing shortage problem. Nursing staff subject to workplace bullying for a prolonged period of time may suffer from physical, psychological and social effects of the abuse. In more severe cases, the victims may develop suicidal thoughts and negative perceptions towards the nursing career, or even leave their job (Shu-Ching Ma, Hsiu-Hung Chen, Jih-Yuan Chen 2011). Nursing professionals who work in an environment where bullying occurs may experience burnout and fatigue which can affect their work performance while others may suffer from depression which can take a toll on the quality of care and threaten patient health and safety.

## Background /Problem/Objective

Workplace violence (WPV) is a serious global health issue. Healthcare workers around the world face a high risk of violence. Research in Europe and the United States has shown that 55-65% of the nursing staff in the healthcare industry have experienced some form of workplace bullying (Berry, Gillespie, Gates, & Schafer, 2012). This is a major problem to healthcare providers including nurses and other medical staff who are directly involved in taking care of patients. Workplace violence (WPV) is also a serious problem in the healthcare system in Taiwan as the percentage of nursing staff in Taiwan who have experienced workplace bullying is between 19.6 and 82.2%. This figure is rather high, and the problem is becoming more severe (Fei-Yi Lin, Li-Hua Huang 2016). Workplace violence (WPV) is defined as "any physical assault, emotional or verbal abuse, threatening, harassing or coercive behavior" in the work setting (Wolf, Delao & Perhats, 2014). Incidents of violent behavior that occur in hospitals not only affect healthcare staff, but also threaten patient safety and patients' rights to medical care.

## Methods/Intervention

The research purposes include:

1. Discuss the experiences and feelings of nursing staff at the hospital in regard to "bullying in the nursing work environment".
2. Discuss the impacts of "bullying in the nursing work environment" perceived by the nursing staff of the hospital and the adaptation they made.

Research method: This study adopts the cross-sectional study design and conducts the convenient sampling in the studied hospitals. Based on the principle of human rights protection, the research obtained approval from the IRB Committee with the code of KMUHIRB-E(II)-20180231. The survey period is from August 1, 2018 to October 15, 2018 for a total of 75 days. Out of the 300 questionnaires that were distributed, 284 questionnaires were returned, with a recovery rate of 94.67%. The data from the 284 questionnaires was included in the data analysis, with an effective recovery rate of 94.67%

## Results (of evaluation)

In recent years, the shortage of nursing staff has become an alarming issue as it threatens to affect the smooth operation of the medical system and patient safety. And workplace bullying only serves to worsen the nursing shortage problem. Nursing staff subject to workplace bullying for a prolonged period of time may suffer from physical, psychological and social effects of the abuse. In more severe cases, the victims may develop suicidal thoughts and negative perceptions towards the nursing career, or even leave their job (Shu-Ching Ma, Hsiu-Hung Chen, Jih-Yuan Chen 2011). Nursing professionals who work in an environment where bullying occurs may experience burnout and fatigue which can affect their work performance while others may suffer from depression which can take a toll on the quality of care and threaten patient health and safety.

## Conclusions/Lessons learned

The prevalence rate of "Prediction Model Construction of Taiwan Nursing Staff Being Bullied in Workplace" (17.73%) in the studied hospitals is more favorable than the rate of 55%–65% in other European and American hospitals (Johnson, 2011; Berry, Gillespie, Gates, & Schafer, 2012), and the rate of 19.6%–82.2% in 2016 (Lin Yiyi, Huang Lihua).

## Relevance to health promoting hospitals and health services

The prevalence rate of "Prediction Model Construction of Taiwan Nursing Staff Being Bullied in Workplace" (17.73%) in the studied hospitals is more favorable than the rate of 55%–65% in other European and American hospitals (Johnson, 2011; Berry, Gillespie, Gates, & Schafer, 2012), and the rate of 19.6%–82.2% in 2016 (Lin Yiyi, Huang Lihua).

## Comments

The present medical environment is intertwined with a diverse and complex network of interpersonal interactions among caregivers and physicians, patients, family members, nursing supervisors, and peers. In such a tense nursing workplace, workplace bullying has slowly become a problem. The results of this research show that although the studied hospitals feature a relatively positive workplace environment, many foreign researches, with the purpose of mitigating the problem of workplace bullying, propose that the establishment of a "zero tolerance" policy in the organizational environment is an important first step (Todaro-Franceschi, 2014). Moreover, raising employees' awareness of workplace bullying through education and providing newcomers with cognitive behavioral skills to enhance their judgment and response to bullying events are all effective improvement strategies that can be used as a reference and direction for future research.

## Keywords

Workplace Bullying · Workplace violence · Nursing Workplace