Tackling Bullying in Ambulance Trusts
A guide for action
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Introduction

Ambulance trusts across the country deliver vital services to the population. Staff work in challenging situations, often under extreme pressure. Despite this, the quality of care delivered remains high. However, the NHS including ambulance trusts has more work to do in creating positive and healthy workplace cultures and ensuring zero tolerance of bullying and harassment.

Bullying has serious consequences on mental and physical health. The staff opinion survey in ambulance trusts provides the data on bullying and harassment where, 29 per cent of staff reported experiencing bullying, harassment or abuse from other staff members. Compared to 24 per cent in the NHS overall, indicating the need for trusts to recognise this as a priority and implement improvement actions. This guide provides a summary of some local initiatives ambulance trusts have implemented and is a source of information and best practice from which others can learn.

We define bullying as “the unwanted behaviour, one to another, which is based upon the unwarranted use of authority or power” and while each ambulance trust may have their own local definition, it is important for us to agree that there are behaviours which may fall outside of the definition but this does not diminish the impact on staff. People on the receiving end of bullying behaviour do not use a definition to decide how they should feel, and we respect that this is a very personal and subjective area which needs sensitive and compassionate responses.

We are delighted to introduce this document which sets out learning and advice from ambulance trusts. We believe this will be useful for all of us in ambulance trusts working in partnership on this important issue, and we hope that our colleagues in the wider NHS can take inspiration from our work so far. This is a snapshot of our activity which continues beyond the document. There is more to do, and we are determined to make a bigger difference. Our staff, and our patients expect nothing less.

We would like to thank our colleagues who contributed to this work for their honest and helpful contributions.

Kerry Gulliver
Director of HR & OD
East Midlands Ambulance Service NHS Trust

Alan Lofthouse
National Officer
Unison Health Group
1. Background

Leaders across the NHS, at all levels of the system, have committed to take action that creates positive cultures. These cultures, ultimately, will make a difference to the experience of staff and reduce incidences of poor behaviour and bullying in the NHS.

A system wide effort, led by trade unions, employers, Department of Health and Social Care (DHSC) and Social Care Ministers and system leaders has made good progress in the raising profile of activities that contribute to the creation of positive cultures. The work so far has involved gathering evidence and advice from experts, listening to affected staff and learning from people who have taken positive action to successfully address cultural change, poor behaviour or bullying in their organisations.

One key output from this work is the *Tackling Bullying in the NHS: A collective call to action* (SPF, 2016), published to stimulate action across NHS organisations to reduce the incidence of bullying.

The collective call invites all NHS organisations to:

- achieve the overarching leadership and cultural change to tackle bullying
- support staff to respectfully challenge problem behaviours
- publish their plans and progress so staff, patients and the public can hold them to account.

The Social Partnership Forum is supporting partnership action:

- by system leaders led by DHSC and NHS Improvement
- by organisations supported by NHS Employers
- by individuals and teams supported by unions working with their members.

National and regional networks in the NHS have considered their positions and taken action in response. The National Ambulance Service Strategic Partnership Forum (NASPF) in collaboration with trade union colleagues and NHS Employers established a health and wellbeing programme, the NASPF have also developed a call to action. One of the work streams of the programme focused on tackling bullying in the ambulance service, supporting the aims set out in Tackling Bullying in the NHS: A collective call to action.
2. Tackling bullying in ambulance trusts

The tackling bullying in ambulance trusts project set out to support colleagues in ambulance trusts in order to:

- better understand the situation in their organisation
- take action that would reduce the incidence of bullying
- compare activity across organisations in a framework of evidence based action
- develop a guide illustrating learning and success to share with colleagues.

This document is the result of collaborative work using organisational development methods to illustrate salient issues and recommend further action between and across ambulance trusts. The task group involved in this work have identified practice that is making a measurable difference as well as obstacles that still need to be overcome.

“We provide individual and confidential counselling and support where staff can refer themselves directly.”

North West Ambulance Service NHS Trust (NWAS)

Throughout the document, examples of good practice are highlighted to demonstrate the significant action already being taken in ambulance trusts. There are also questions for you to consider that can help you prioritise and maintain activity that will help to tackle poor behaviours and bullying.

“We publish data relating to bullying and harassment on East24, our staff intranet.”

East of England Ambulance Service NHS Trust (EEAST)
Identifying themes and areas for action

Tackling bullying and harassment was identified by some of the participants as a major issue for some organisations. Some of the participants had commissioned external reviews on bullying and others were using internal data from staff surveys alongside trade union and HR intelligence. All organisations had already taken action to address any incidents of bullying and poor behaviour.

“The chief executive and chair have been very clear and robust in their expectations of behaviour.”

South East Coast Ambulance Service NHS Foundation Trust (SECAmb)

It was recognised that staff are working in very stressful situations, often for long periods of time. Working in pairs or small groups leads to a more relaxed working environment which can be helpful to reduce stress but sometimes boundaries can be crossed which creates an issue. Staff often report that gallows humour helps them to deal with the stress of the work and to let off steam. Sometimes though, this banter can become inappropriate. Choosing to not be part of those conversations can make staff feel excluded, and taking part can open people up to other challenges. Influencing managers of people and staff who work in different locations with different cultures was seen as a key issue.

“There are a number of mechanisms in the trust for staff and managers to raise concerns both formally and informally.”

South Western Ambulance Service NHS Foundation Trust (SWASFT)

Perceptions in regard to bullying remains a complex concept for organisations to address. The group noted that some staff have expressed that they feel bullied through:

✓ the way shifts are allocated
✓ management style
✓ performance management
✓ the command and control culture where language can often be direct, particularly when people are under pressure.

Work has been taking place in areas of awareness raising and having difficult conversations. It was noted that feedback may not be reaching everyone, and people may not fully appreciate or understand the impact of their behaviour. Operational priorities can sometimes be seen as a barrier to good management practice. One to ones and appraisals are key to supporting staff but may be rushed or cancelled due to operational need.

“Employee relations casework will inform the anti-bullying training by breaking down the data at a local level to help provide solutions to unacceptable behaviours.”

East of England Ambulance Service NHS Trust (EEAST)

“Future work will focus on how managers and staff can be educated and supported to successfully resolve workplace conflict.”

North West Ambulance Service NHS Trust (NWAS)

There is recognition that the NHS has seen unprecedented increases in demand, and that these challenges are felt more sharply by ambulance trusts. When 80 per cent of staff time is spent on the road, it makes it challenging to create an organisational wide positive culture change. One size does not fit all, and trusts are wrestling with the complexity of the issue. However, there remains a strong passion and appetite for change.

Staff in ambulance trusts provide compassionate and professional care to patients. There was concern expressed that the same qualities are not always offered to colleagues, even though the experience we offer to patients should be transferable in varying situations.

Key themes identified by ambulance trusts

1. Defining bullying - there is a lack of consistent understanding of what constitutes a positive culture and what could be perceived as unacceptable and unprofessional behaviour or bullying.

2. Banter - the definition and boundaries between banter and bullying can easily be crossed and can be different in various groups.

3. The role of partnership working - all levels of managers and trade union colleagues are key in tackling unacceptable and unprofessional behaviour or bullying through their ability to have difficult conversations.

4. Location and communication - geographical remoteness and shift working can lead to isolation and multiple cultures being developed across the organisation.
“Trade union representatives and full-time leads are actively involved with policy reviews and are part of the approving committee for these policy and procedures. Trade union representatives and senior leaders work proactively together to jointly resolve issues and concerns and discuss ideas in a regular informal trade union communications meeting.”

East Midlands Ambulance Service NHS Trust (EMAS)

Questions to ask yourself:

1. How do the four themes show up in your organisation?
2. What needs your immediate attention?
3. What are the difficult to do issues in your organisation that have yet to be mentioned?

“Staff side colleagues are part of the raising concerns group and will have input into the content of anti-bullying training.”

East of England Ambulance Service NHS Trust (EEAST)
Case Study: NWAS exploring Line Managers and Bullying

Overview
North West Ambulance Service NHS Trust (NWAS) is participating in the tackling bullying national ambulance service programme. This programme aims to support colleagues from ambulance trusts nationally to:

- help understand the situation in their organisation
- help take action that will reduce the incidence of bullying
- use a checklist of evidence based actions to compare activity across organisations
- develop a good practice guide illustrating learning and success for sharing with colleagues.

As part of this programme, group members were asked to volunteer to be part of an action enquiry group. NWAS joined the action enquiry group looking at line managers and bullying and harassment.

Line managers – action inquiry at NWAS

The action enquiry group was asked to focus on three main enquiry questions. These questions and responses from NWAS are set out below.

1. Find data on bullying and harassment such as surveys, speak out safely, friends and family test, employee relations data and prepare a short summary.

NWAS implemented a revised dignity at work policy in June 2016. A review of the HR case logs covering the 12 months since the implementation of the revised policy identifies a total of 22 recorded cases raised. It should be noted that managers may not involve HR in some local resolution cases and as such these will not be recorded.

The revised policy sought to focus on informal resolution methods, as opposed to formal investigations. Under the revised policy, a complaint will now only be referred to an investigation if it is determined that the issue may breach NWAS’ disciplinary rules due to the complaint being one of bullying and harassment as opposed to workplace conflict.

A qualitative review of the revised dignity at work policy was also carried out at an agreed 12 month post-implementation point. Overall, there has been a positive response from staff, managers and trade union colleagues at NWAS in relation to the revised policy. Trade unions have articulated that they see it as a less formal way of dealing with matters at local level.

The 2016 NWAS staff survey detailed the staff responses to questions about bullying and harassment in the workplace. These results showed:

- percentage of staff experiencing physical violence from staff in last 12 months had reduced by three per cent.
- percentage of staff experiencing discrimination at work in the last 12 months was down by 21 per cent.
- percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months had reduced by 50 per cent.

Qualitative data from the staff survey in 2016 indicated some experiences of bullying and harassment in some areas. Staff listening exercises were held in 2017 to further explore the understanding of the staff survey questions. Some qualitative data from the NWAS Friends and Family Test 2017 also indicated that some staff have experienced bullying and in some cases that this hasn’t been formally reported.

2. What does the results and data say?

At NWAS, the findings may suggest that whilst the response from the 2016 staff survey shows an increase in bullying and harassment, the case statistics would suggest otherwise. Alternatively, these statistics may suggest that employees do not speak out about unacceptable behaviour.

The qualitative feedback sought from the policy group at NWAS indicated that both management and trade union colleagues were satisfied that the revised approach to managing issues under the policy has led to the resolution of issues in a more timely and appropriate manner. The trade unions confirmed that they were not aware of issues around the mechanics of the policy being raised by their members. The HR team at NWAS reported that overall the policy is working well, but there had been a period of transition and education for both staff and their managers to focus on the importance of local resolution methods as opposed to seeking to resolve...
issues via a full investigative process. Views have also been sought from staff at NWAS who have accessed the revised policy and feedback has been positive.

It is difficult to compare the employee relations data however it would appear that lengthy cases have been replaced by local management taking greater control of resolving issues raised under the policy. Both the HR case logs and anecdotal feedback indicate that rather than there being an issue of bullying and harassment at NWAS, there are workplace conflict issues among staff. Future work will therefore focus on how managers and staff can be educated and supported in how to successfully resolve workplace conflict issues.

3. Gather stories regarding the experience of line managers including the following questions.
   a. Do you know what the definition of bullying and harassment is?
   b. Have you observed bullying and harassment?
   c. What did you do about it, why and when?
   d. Do you feel you have had sufficient training?

The following short summaries were obtained from line managers at NWAS.

✔ The manager knew the definition of bullying and harassment and observed bullying in the workplace. In this case the manager was supporting the person being bullied. The manager did not feel that they have had sufficient training on bullying and harassment.

✔ The manager confirmed bullying and harassment is unacceptable behaviour, and through training was aware of the trust values and expected standards of behaviour. The manager described bullying and harassment as individuals not getting along, and can be visible through conflict in teams and how the behaviour of others may make another individual feel. At the time of interview, the manager had not observed bullying and harassment in their current role but would use the trust’s guidance, policies and procedures in dealing with situations which may arise in a step by step process.

It therefore seems that even from gathering a few stories there is potentially a mixed view in the experiences of line managers at NWAS regarding bullying and harassment.

Next Steps

1. Submit these responses to the action enquiry group as part of the tackling bullying national ambulance service programme.
2. Await outputs from the action enquiry group and the national programme and then review.
3. Use this work to shape NWAS’ overall response to bullying and harassment in the workplace.
Case Study: Tackling Bullying in South Central Ambulance Trust

South Central Ambulance Trust (SCAS) is committed to eradicating harassment and bullying from its workforce whilst ensuring that staff, patients, visitors and suppliers are treated with consideration, dignity and respect.

The Trust has a Dignity at Work Policy designed to inform staff of what constitutes bullying and harassment and how instances of bullying will be managed, however, this year the Trust has gone one step further with the roll out of its values based behaviours.

SCAS’s values of Caring, Professional, Team work and Innovation penetrate the heart of SCAS’s organisational culture. However, a review of what these values meant to staff highlighted that they meant slightly different things to different staff groups. As such, seven sets of values based behaviour sets were co-produced with staff to describe the effective and ineffective behaviours associated with different roles. The groups are as follows:

✓ The Executive Team
✓ Corporate Managers
✓ Managers
✓ Corporate Staff
✓ Team Leaders and Clinical Mentors
✓ Front Line Patient Facing Staff
✓ Front Line [Contact Centre] Staff

A effective caring behaviour for front line contact centre staff for example is:

“Speaks up if they see others being bullied or treated unfairly”

An ineffective behaviour:

“Turns a blind eye to behaviour that might be harmful, spiteful or upsetting to others”

Led by the Chief Executive and Executive team, meetings and workshops have taken place across the Trust to roll out the behaviour sets. All staff have been provided with a copy of their relevant role-related behaviour set. The Trust is implementing values based recruitment, the behavioural standards are included in induction, education, training, leadership and policy development and the Trust’s appraisal system has been redesigned to allow staff and managers to reflect upon and discuss their own behaviours in relation to the positive conduct outlined in their behavioural set.

The Trust expects every employee to understand the positive behaviours expected of them and with clear and constructive feedback on performance all staff can identify how and where they can develop. Staff are encouraged to challenge their colleagues if they witness inappropriate behaviours and the nurturing of a culture and relationships based on caring, teamwork, professionalism and innovation will support the Trust in the eradication of bullying and harassment and its ambition to become a world class Provider and Employer of Choice.
3. Taking action

*Tackling Bullying: A collective call to action* includes evidence-based actions that are taken from the academic literature and have been proven to make a difference. Ambulance trusts used a checklist adapted from the source material to simplify the process of identifying actions that have worked and where there may be gaps that require future action.

Checklist of evidence-based actions.

- Establish a culture in which staff have a heightened awareness of workplace bullying, negative behaviours are challenged and positive behaviours endorsed.
- Focus preventative interventions firstly at leaders and managers who have the power to prevent and manage bullying and to change the culture.
- Ensure leaders and managers demonstrate support of interventions when introduced.
- Promote formal policies and procedures to outline the organisation’s explicit commitment to tackling bullying.
- Provide effective training that enables people to prevent and manage bullying that focuses on developing insight into their own behaviour and its impact on others, delivered to appropriate staff, especially managers.
- Create a shared understanding of acceptable and unacceptable behaviours.
- Develop interpersonal, communication and conflict management skills.
- Identify local problems and causes of conflict and generating solutions.
- Use mediation for informal resolution of conflict, but with awareness of its limitations.
- Use counsellors who have knowledge of bullying and can draw upon a range of integrated therapeutic models.
- Proactively monitor organisational data to identify patterns and outliers to help target interventions.
- Agree a defined and explicit statement of what constitutes bullying and harassment.
- Engage and involve staff side colleagues in your tackling bullying activity.

Ambulance trusts compared their completed checklists. One of the key findings was that the approaches taken across the trusts were inconsistent and that the checklist could help to standardise activity based on evidence. A lot of activity has taken place already, and there is more to do in the areas of measurement and gaining buy-in from boards and senior leaders. There are pockets of great work taking place but in many cases these may not have been embedded or evaluated, so more work on measurement tools would be useful. Sharing information on activity across ambulance trusts was a valuable and helpful exercise.

“We need to continue to create an environment where people are not afraid to challenge inappropriate behaviour for example not allowing inappropriate behaviour to happen because it is deemed as the way they are.”

*East Midlands Ambulance Service NHS Trust (EMAS)*

The following sections and examples of good practice will help you to form a plan based on the areas you have identified for further action.
As a result of the checklist evaluation, the project group identified four insights:

1. **Consistent approach**
   Organisations should dedicate resource to exploring their data on the incidence of bullying and outcomes, including resolution methods. A consistent approach to evaluation and measurement as well as developing consistent tools and shared policies could help.

2. **Buy in from the top**
   We need to do further work with our boards, leaders and trade union colleagues in all organisations to recognise what we have done, identify what else we need to do and to have conversations about role modelling at all levels within our organisation as well as clarifying support.

3. **Leaders**
   We need all leaders to take a proactive role, helping staff to speak up and to tackle perceived or actual bullying.

4. **Partnership working**
   We need to demonstrate partnership working with our trade union colleagues and leaders at a national and local level. Building a shared understanding of positive and professional behaviour and how we tackle bullying together, role modelling behaviours in the situations we face on a day to day basis.

Questions to ask yourself:

1. Which of the four insights needs your most urgent action?
2. How can the action checklist help your board understand where resources need to be prioritised?
3. Have you established opportunities for you to share your experiences and activity with colleagues in other organisations?

“We meet regularly with staff side colleagues to discuss cases and any emerging themes. Through this open and honest dialogue, we can work better together to resolve any issues.”

West Midlands Ambulance Service NHS Foundation Trust (WMAS)

South Western Ambulance Service NHS Foundation Trust (SWASFT)
4. Recommendations for future action

Areas for further exploration

The project group highlighted three areas that ambulance trusts experience more than other NHS organisations and which can contribute to the incidence and experience of bullying. The project group recommends further inquiry into these areas, posing the following questions.

✓ Banter – does it hurt or does it make you laugh?
✓ Communication and location – do you feel confident to speak up?
✓ Line managers – do you know what the definition of bullying and harassment is, and the behaviours that constitute bullying?

Top tips when taking action

The project group identified a number of issues that should be considered when taking action to tackle bullying. These issues can be seen as both enablers and barriers to success.

✓ Executives and senior leaders enable change when they role model positive behaviours and inhibit change when their own behaviours are inappropriate.
✓ Policies on tackling bullying can enable conversations to take place in more informal ways and can inhibit action if they are seen as being woolly or vague.
✓ Early intervention can enable a better understanding of the issues, but if the action is formalised too quickly conversation can be inhibited.
✓ Acknowledging the mental health impact of bullying can enable pro-active and targeted support to be available, but the stigma of asking for help can be a barrier.
✓ Working remotely can lead to close relationships where people give mutual support but the lack of leadership presence may create conditions for poor behaviours or bullying to surface.
✓ Working in an effective team helps to reduce isolation, but if you work regularly with someone who behaves inappropriately it can lead to feelings of loneliness.

“Managers are keen to engage in initiatives to support effective leadership such as the HR led bite size sessions on leadership skills.”

South Western Ambulance Service NHS Foundation Trust (SWASFT)
More recommendations

The project group concluded its work by highlighting four recommendations for ambulance trusts to put into action.

1. We need to consider how we can invest in capacity and resource to tackle bullying. We need specialist expertise in this difficult area which can be available to us all.

2. Senior leaders should have a SMART objective related to tackling bullying so that there is accountability and a clear lead in the organisation.

3. We need to do more analysis of the data and identify clearly the cost of potential or actual bullying to our organisations, including how much productivity is lost when this occurs. This can be used to shape a measure for improvement which forms part of our organisational action plan.

4. We need to recognise that despite the complexity and ambiguity around poor behaviours and bullying, bold moves need to be taken. Staff should demonstrate compassion for each other in the way that they do for patients.

Ambulance trusts should continue the good work that is already in progress and strengthen connections across the service to share successes and good practice.

“We have an external service provided by the trust known as the listening centre all are trained counsellors and the trust pays for up to six sessions to support staff mental health.”

West Midlands Ambulance Service NHS Foundation Trust (WMAS)

5. Useful resources

Tackling Bullying in the NHS: A collective call to action

NHS Employers tackling bullying

CQC: Working together to develop positive cultures

Tackling bullying in the NHS customisable infographic

Partnership working case studies

“"We have an external service provided by the trust known as the listening centre all are trained counsellors and the trust pays for up to six sessions to support staff mental health.”

West Midlands Ambulance Service NHS Foundation Trust (WMAS)
Appendix 1: Good practice examples

Cultures and values

— South Western Ambulance Service NHS Foundation Trust (SWASFT) have enabled a positive culture through the implementation of their dignity and respect at work policy and the code of conduct that sets expectations for staff behaviours. The trust’s annual career conversations are opportunities for staff to give examples of how they have demonstrated the values and behaviours.

— Staff at SWASFT also have annual career conversation where they are asked to provide examples of how they have demonstrated the trust’s values and behaviours set out in the dignity and respect at work policy and trust code of conduct.

— South East Coast Ambulance Service NHS Foundation Trust (SECAmb) established a culture change programme focusing on expected behaviours and performance against them. The behaviours were agreed following trust wide focus groups where staff contributed their suggestions on the behaviours they expect. Staff are held to account against the behaviours, with both positive and negative consequences. This was rolled out with executive, non-executive and senior management levels of staff.

— East Midlands Ambulance Service NHS Trust (EMAS) will be launching a zero tolerance to bullying and harassment campaign led by the chief executive officer in 2018 and is signing up to the SPF Tackling Bullying in the NHS: A collective call to action.

— The CEO of West Midlands Ambulance Service NHS Foundation Trust (WMAS) published a position statement on bullying and harassment which has been promoted throughout the organisation, reminding staff that this is not acceptable behaviour.

— East of England Ambulance Service NHS Trust (EEAST) undertook a cultural audit in 2016 which was triangulated with staff survey results. The six transformation plans that underpin the trust’s people and culture strategy have captured the resulting actions, recommendations for implementing which are made by the cultural audit steering group. This group is made up of staff, UNISON and line managers.

Training

— At WMAS staff were provided with dignity and respect awareness training and were asked to sign a pledge to respect their colleagues and treat each other with dignity. Managers and supervisors at bands 4 to 6 are required to complete the Engaging Leaders course accredited by Coventry University. Communication and listening skills are assessed throughout the course through both written and verbal interaction.

— SWASFT recently launched a leadership programme covering topics such as emotional intelligence, team engagement and coaching skills. The programme has received extremely positive feedback from participants.

— SWASFT also have a number of trained mediators across the trust in addition to using external mediators when issues need resolution. Line managers can offer these solutions which have been effective in supporting the rebuild of relationships between staff members.

— EMAS has delivered a number of training forums for managers, staff and new recruits with a focus on expected professional behaviours and trust values ‘my resilience matters, the art of conversation and leadership skills’.

— North West Ambulance Service NHS Trust (NWAS) holds dignity at work policy training sessions for managers throughout the year. This is followed with a focus on supporting managers with the skills to manage facilitated conversations.

— EEAST has launched a leadership strategy and charter, supported by accredited training being rolled out across the trust. The training is a blend of e-learning and workshops and includes a focus on preventative interventions with organisation leaders who have the power to prevent and manage bullying. They have commissioned anti-bullying training to be targeted at all levels of management in the trust. Senior leadership participation in the training and evaluation of feedback has demonstrated commitment from the top of the organisation.
Policy

— NWAS revised their dignity at work policy to focus on informal resolution methods as opposed to formal investigations. Staff are encouraged to speak to each other and raise complaints locally, and so educating managers and staff on resolution methods was a priority in this work. There has been a positive response from staff, managers and trade union colleagues who particularly welcomed the partnership approach taken by the trust in revising the policy. Trade union colleagues have noted that the revised approach to tackling bullying more informally lead to a more timely and appropriate resolution of issues.

— EMAS has recently undertaken a comprehensive review of the trust’s bullying and harassment policy. The policy was renamed dignity and respect at work and definitions of bullying and harassment were reviewed to encompass cyber bullying, militaristic and controlling leadership styles.

Know your data

— NWAS uses organisational data such as the annual staff survey, feedback from listening exercises and HR case logs to inform interventions and development opportunities.

— SWASFT presented a deep dive of organisational data to the trust board to highlight issues and describe initiatives available. Regular reports are made to relevant committees to demonstrate how learning from initiatives has been used to develop the trust values and behaviours across the organisation.

Prevention

— EEAST have a health and wellbeing hub for staff to access a range of internal and external resources including an employee assistance programme (EAP) and occupational health support.

— As part of their health and wellbeing strategy NWAS introduced a peer support network to the patient transport service. Staff are encouraged to act as a listening ear and encourage each other to access support when issues of conflict or bullying are raised.
Appendix 2: Definitions of bullying

North West Ambulance Service NHS Trust

The dignity at work policy defines bullying and harassment as follows:

**Bullying:** The Agenda for Change NHS Terms and Conditions of Service Handbook defines bullying as: ‘the unwanted behaviour, one to another, which is based upon the unwarranted use of authority or power.’

**Harassment:** Section 32 of the AfC Terms and Conditions of Service Handbook covers dignity at work and provides a definition for harassment as: ‘any conduct based on age, gender, pregnancy or maternity, marriage or civil partnership, sexual orientation, gender reassignment, disability, HIV status, race, religion, or political belief, trade union or other opinion, national or social origin, association with a minority, domestic circumstances, property, birth or other status which is unreciprocated or unwanted and which affects the dignity of men and women at work.’

South Western Ambulance Service
NHS Foundation Trust

The ACAS definition is used and is covered in the trusts dignity and respect policy:

**Bullying:** This may be characterised as offensive, intimidating, malicious or insulting behaviour, an abuse or misuse of power through means that undermine, humiliate, denigrate or injure the recipient.

**Harassment:** In general terms this is unwanted conduct related to a protected characteristic (age, race, sex, disability, sexual orientation and religion or belief), which has the purpose or effect of violating an individual’s dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for that individual in the workplace.

East of England Ambulance Service NHS Trust

A bullying and harassing manager is defined as:

— Aggressive, inconsistent and unfair.

— Unreasonable and inflexible.

— Believes that they are always right, has fixed opinions, believes they know best and are not prepared to value other people’s opinions.

— Insists on high standards of service and behaviour, but blames others if things go wrong. Loses temper regularly, degrades people in front of others, threatens official warnings without listening to any explanation.

— Tells people what will be happening, does not listen to the view of others.
South East Coast Ambulance Service NHS Foundation Trust

**Bullying**: may be characterised as offensive, intimidating, malicious or insulting behaviour, an abuse or misuse of power through means that undermine, humiliate, denigrate or injure the recipient.

**Cyber bullying**: is recognised as any form of bullying which uses information and communications technology to support deliberate and hostile attempts to hurt, upset or embarrass another person.

**Harassment**: is defined in the Equality Act 2010 as unwanted conduct related to a relevant protected characteristic (for example age, sex, race, disability, religion, sexual orientation, nationality or any personal characteristic of the individual) which has the purpose or effect of violating an individual’s dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for that individual. Harassment extends to any form of persistent conduct which causes alarm or distress. ACAS points out that bullying and harassment may be persistent or an isolated incident.

**Victimisation**: is the unfair treatment of an employee as a direct consequence of raising or supporting a complaint of bullying and harassment. It includes for example the employee being isolated or given a more difficult workload because of this.

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East Midlands Ambulance Service NHS Trust

Bullying is defined as ‘the unwanted behaviour, mentally and/or physically, one to another, which is based upon the unwarranted use of authority or power’ associated with all work relationships. Bullying is unlikely to be a single or isolated instance. It is usually, but not exclusively repeated and persistent behaviour which is offensive, abusive, intimidating, malicious or insulting. Bullying includes but is not limited to:

- conduct which is intimidating, physically abusive or threatening
- conduct that denigrates, ridicules or humiliates an individual, especially in front of colleagues
- humiliating an individual in front of colleagues
- picking on one person when there is a common problem
- shouting at an individual to get things done
- consistently undermining someone and their ability to do the job
- setting unrealistic targets or excessive workloads
- cyber bullying and bullying via e-mail. (This should be borne in mind where employees are working remotely and are managed by email. Care and sensitivity should be practised with regard to the choice of context and language)
- setting an individual up to fail for example by giving inadequate instructions or unreasonable deadlines
- militaristic or controlling leadership style
- exposure to unreasonable management behaviours on an occasional and regular basis.
Harassment is defined as any conduct based on age, gender, pregnancy or maternity, marriage or civil partnership, sexual orientation, gender reassignment, disability, HIV status, race, religion, or beliefs political, trades union or other opinion, national or social origin, association with a minority, domestic circumstances, property, birth or other status which is unreciprocated or unwanted and which has the purpose or the effect of violating a person’s dignity or creates an intimidating, hostile, degrading, humiliating or offensive environment.

Harassment may be an isolated occurrence or repetitive and may occur against one or more individuals. Harassment may be, but is not limited to:

- physical contact – ranging from touching to serious assault, gestures, intimidation, aggressive behaviour
- verbal – unwelcome remarks, suggestions and propositions, malicious gossip, jokes and banter, offensive language
- non-verbal – offensive literature or pictures, graffiti and computer imagery, isolation or non-co-operation and exclusion or isolation from social activities.

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Bullying

Bullying, or intimidation, is defined as ‘the unwanted behaviour, mentally and physically, one to another, which is based upon the unwarranted use of authority or power’ associated with all work relationships. Examples of bullying includes but is not limited to:

- uncalled for, or unjustifiable criticism, particularly in front of others
- repeated humiliation or ridicule
- refusing to speak to someone, or using a third party to communicate
- undermining an individual’s decision
- removing responsibility and constantly giving individuals trivial or menial tasks
- repeatedly taking the credit for other peoples work
- knowingly withholding information which an individual requires to do his / her job effectively
- setting individuals up to fail with impossible deadlines
- repeatedly refusing reasonable requests for time off
- deliberate exclusion from social events
- singling an individual out to become the object of distasteful jokes
- subjecting individuals to personal insults
- threatening an individual(s)
- knowingly invade an individual’s space to intimidate them.
Harassment

Harassment is defined as ‘un-reciprocated or unwanted conduct that is offensive to the recipient, and which affects the dignity of individuals at work.’ It is the recipient’s definition of the conduct or behaviour that is unwanted or unacceptable and can include:

— the use of threatening, abusive or insulting words
— displaying any writing, sign or other visible representation which may include e-mail, photographs or graffiti, which is threatening, abusive or insulting
— physical threats or assault, unwanted gifts and practical jokes at another’s expense
— unwanted conduct of a sexual nature, such as, unwelcome physical, verbal or non-verbal conduct
— open hostility in the workplace
— unfair allocation of work and responsibilities
— exclusion from normal workplace conversation or social events.
Contact

For more information on how to become involved in our work:

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