

## **Tackling Bullying and Harassment: update paper**

### **Background**

NHS staff survey results suggest bullying and harassment has been a persistent concern over a number of years, with between 22% and 24% of staff responding as having been the subject of bullying in each of the last four years' surveys, and with significant variations across different types of staff and NHS organisations.

Responding to these high levels, Ben Gummer with the support of Lord Prior has invited SPF to develop a work programme to tackle this issue.

To date a series of meetings, workshops, a successful ministerial roundtable event and a well-attended session at this year's NHS Confederation Conference have explored the causes with the aim of finding solutions.

The evidence is clear that good engagement, strong leadership and open, supportive cultures create the conditions in which bullying is less likely, ultimately leading to both better productivity and improved patient outcomes.

There has been real enthusiasm for this work and consensus about what would need to change. There is no quick or single fix; evidence points to, for example, improvements in leadership and cultures, quality appraisal, helping staff understand what is and isn't bullying and tackling problem behaviours early.

This paper sets out how the WIG with full ministerial support is proposing to assist and influence the NHS in cultural change.

### **Agreed Goal**

For NHS organisations to provide excellent leadership and a supportive culture where staff can flourish and problem behaviours such as bullying and harassment disappear.

### **Agreed Ambition**

- For all NHS organisations to undertake preparatory actions then make a pledge for how they will:
  - Achieve the overarching leadership and cultural change to tackle bullying and harassment in partnership with staff
  - Support staff to respectfully challenge problem behaviours in the meantime
  - Publish their plans & progress so staff, patients and the public can hold them to account
- To achieve measurable change at national level by 2020.

### **Level of ambition**

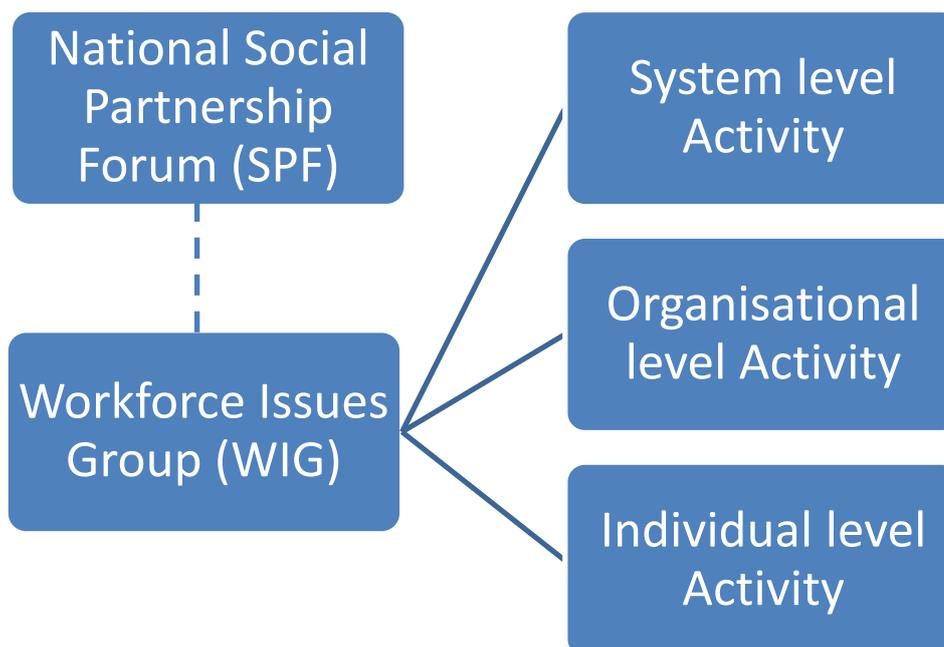
Minister challenged the SPF to define how it will measure success achieved by 2020 and even 2025, ideally to include an idea of how the NHS is doing relative to other

sectors. The WIG is keen to avoid national “targets” but sees value in a *national* level of ambition to maintain momentum and leverage. Possible approaches include:

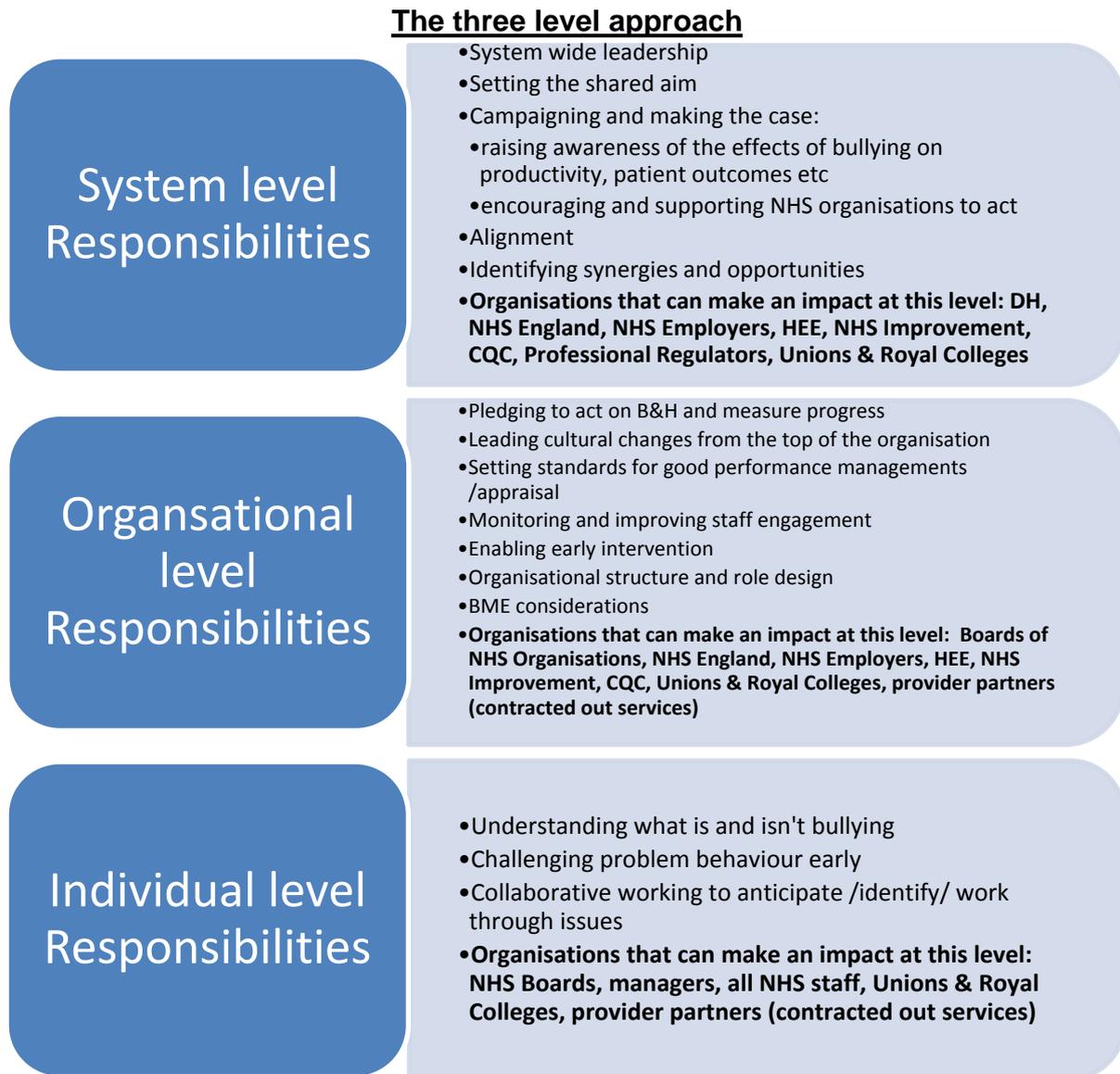
- Number of NHS organisations who commit to a pledge
  - within that, proportion who are engaging with/sharing good practice with other local employers
- Progress of those organisations against their own stated ambition (should be locally agreed but might be difficult to obtain data and/or compare progress)
- Improvements in bullying and harassment scores in staff survey:
  - An (unquantified) overall national improvement
  - Improvements in the poorest-scoring quartile of trusts.

### **Governance Structure for delivery of the work programme**

The WIG will oversee the work programme, drawing inputs from other SPF groups and organisations as appropriate. The work will be delivered at three different levels. The WIG will report to the SPF, seek challenge from the SPF strategy group and provide timely updates on progress. WIG will liaise with NHS Improvement to explore the scope for NHSI taking a more formal role at a later date.



The WIG has agreed that activity at the different levels will be led by bodies able to impact at that level, with the WIG remaining accountable, via the national SPF for delivery and inputs from others as required.



The diagram above sets out the suggested responsibilities at each level and lists the organisations considered to be best placed to have the greatest impact at that level.

### **The work programme**

The WIG has agreed that it will:

- Champion and catalyse this change, celebrating success
- Support organisations to:
  - develop good leadership/cultures, leading by example and embedding throughout the organisation
  - train and support managers to manage well
  - look actively for trigger factors or problem behaviours and tackle them early
  - measure their progress
- Support staff to:

- understand what good behaviours and problem behaviours look like
- respectfully challenge problem behaviours
- work together to anticipate and reduce triggers for problem behaviours
- Include a focus on areas needing extra support eg staff with disabilities and from BME backgrounds, ambulance Trusts
- Measure progress at a national level and consider how system leadership can support positive workplaces.

The WIG has also agreed that the work programme will have a phased approach and that delivery will be implemented in line with the three level approach above outlined above:

- **Phase 1** – Setting our ambition and seeking commitment (between now and October 2016)
- **Phase 2** – Organisations making a pledge for change (July 2016 – January 2017)
- **Phase 3** – Maintaining momentum and measuring change (October 2016 onwards)

### **Phase 1 – Setting our ambition and seeking commitment (between now and October 2016)**

Building on the work to understand the prevalence, impact, predictors and drivers for change, this phase is about setting ambition, raising awareness, encouraging NHS organisations to commit and assembling support.

#### **System level Activity**

- Agree core messages for use in campaigns & support tools – WIG
- Campaigning and awareness-raising – Unions and Royal Colleges
- Identify national-level ambition/success measures and metrics for this programme – WIG, DH/NHS Employers, NHS Improvement
- Check for alignment and system-wide opportunities/synergies – WIG, DH with ALBs
- Mapping/Horizon-scanning exercise to identify work being undertaken and approaches that could promote positive behaviours and/or tackle bullying and harassment; identify gaps and draw in expertise from other sectors - NHS Employers, DH
- Planning and preparation for an engagement event in e.g. autumn 2016 (subject to Ministerial agreement) – NHS Employers, DH

#### **Organisational level Activity**

- Engage NHS organisations with a view to getting them to set out their own pledges/ambitions, at CEO level and ideally jointly with their staff side partners. We could then use these as exemplars at an engagement event to encourage others – NHS organisations, NHS Employers, Unions/Royal Colleges

- Identify and assemble a menu of organisational level support (eg diagnostics, actions, trackers), for tackling bullying and harassment (*Carter recommendation: a reduction in the high rates of bullying and harassment with a sustained campaign led personally by each trust Chief Executive*) – NHS Boards, NHS Employers & Unions.
- Campaigning and awareness-raising activities at organisation level – Unions/Royal Colleges

### **Individual level Activity**

- Participating in campaigning/awareness-raising activities
- Enabling individual staff to understand what good behaviours look like and what is and isn't bullying and harassment – drawing on guidance and awareness raising from NHS Employers, Unions and Royal Colleges.

### **Phase 2 – NHS Organisations making a pledge for change (July 2016 – January 2017)**

This phase is about every NHS Organisation making a pledge at Board level to tackle bullying and harassment with an action plan and measures which are published and through which they can be held to account.

Phase 2 includes the WIG continuing with encouraging/campaigning to get more NHS Organisations to commit to making a pledge.

### **System level Activity**

- Campaigning to raise awareness, boost commitment and maintain momentum - Unions and Royal Colleges
- A ministerial engagement event in autumn 2016 (subject to ministerial agreement) to inspire commitment, demonstrate support available and showcase best practice, including from other sectors. The event would encourage boards to make a pledge to take active steps to reduce bullying and harassment in their own organisations – DH & NHS Employers, Unions and Royal Colleges.
- Start rolling out support for NHS Organisations - NHS Employers

### **Organisational level Activity**

- Boards to make a pledge to take active steps to reduce bullying and harassment in own organisation, diagnosing where and whether problem behaviours exist, developing an action plan with staff and committing to measure progress– NHS Organisations
- Develop ambassadors/champions/exemplars including leaders who can bring along other leaders – NHS Organisations, NHS Employers

### **Individual level Activity**

- Engage in training and awareness raising campaigns to develop own understanding
- Work collaboratively to lead by example, promote good behaviours and a culture where bullying and harassment are not tolerated.

### **Phase 3 – Maintaining momentum and measuring change (October 2016 onwards)**

This phase is about keeping the momentum, developing networks, tracking and measuring change.

#### **System level Activity**

- Campaigning to raise awareness, boost commitment and maintain momentum - Unions and Royal Colleges
- Track change and assess progress – WIG
- A review event in eg early/mid-2017 (subject to ministerial agreement) to assess progress and reset ambition if appropriate - DH & NHS Employers, Unions and Royal Colleges.
- Identification of synergies and interdependencies impacting on delivery – DH, NHS England, NHS Employers, HEE, NHS Improvement, CQC, Professional Regulators, Unions & Royal colleges
- Dissemination of good practice via networks – NHS Employers, Unions and Royal Colleges.

#### **Organisational level Activity**

- Implement own action plans and measure progress – NHS Organisations
- Continue to raise awareness and understanding of bullying and harassment – NHS organisations, Unions & Royal colleges

#### **Individual level Activity**

- Engage with training and awareness raising campaigns to develop own understanding.
- Work collaboratively to lead by example, promote good behaviours and a culture where bullying and harassment are not tolerated.

### **A pledge for change**

Last year, Lord Carter in his review of NHS Productivity and Efficiency Performance (<https://www.gov.uk/government/publications/productivity-in-nhs-hospitals>) recommended that organisations have a plan in place to tackle bullying and harassment and that this should be led personally by Chief Executives.

The WIG therefore proposes to invite senior leaders from a wide range of organisations in the health system (acute trusts, ambulance trust, CCGs, ALBs etc) to pledge to their staff that they and their boards with staff side colleagues are committed to change and declare ambitions against which staff and patients can hold them to account. It will be important for organisations to undertake some work beforehand in discussion with staff as to where issues lie and how they might be best tackled.

An example pledge, building on an initial idea tested with a range of organisations at the recent NHS Confederation conference, is below:

EXAMPLE PLEDGE A

- We, the Board and Staff side representatives of [insert name of NHS organisation], will enable a learning culture across the organisation where, by [insert date], we commit to continuously work towards building a workplace where:
  - all staff are trusted and supported
  - positive behaviours are encouraged and endorsed,
  - bullying and harassment is tackled, not tolerated
  - and where staff are supported to respectfully challenge negative behaviours.
- Our level of ambition is to
  - Increase our NHS Staff Survey scores on staff engagement or indicators of positive culture by XX by 2020
  - reduce our NHS Staff Survey bullying and harassment score by YY
  - improve our local survey scores on issue ZZ
- We will achieve this by ...kept under review by...
- The Board will review progress at least every 6 months starting from [insert date]
  - we will keep all staff up to date with what we are doing through newsletters, other engagement etc
  - the Board commits to including progress updates in our annual report.

EXAMPLE PLEDGE B

We aspire to a ...

(healthy environment / common culture of quality care / civil society / collaborative culture etc)

Where **individuals** feel valued and fulfilled. Expectations are clear and communication is honest. People are able to challenge and be challenged.

Feeling confident and on top of things inspires people to do work that is out of the ordinary. There's an emotional commitment to diversity and a recognition of why we joined the NHS. We are all healthier as a result.

Our **organisations** are calm, positive and vibrant. A new sense of agility and transparency means we are great places to work. We are proud of our staff and proud of the communities we serve.

The **NHS** is more resilient and more able to cope with change. The system listens and responds, modelling the right behaviours. We create trust by holding ourselves to account. We are more diverse, productive and financially viable. Outcomes are better for patients because our staff feel satisfied.