

# Preparing BScNursing Students to Respond to Bullying Behaviours in the Clinical Setting



(Griffen, 2004, modified by Fleming & Sutherland, 2011. Used with permission)



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# Learning objectives

By the end of this session the participant will:

- ▶ Learn about the strategy of CRT used with nursing students
  - ▶ Understand the implications of bullying behaviours in clinical practice
  - ▶ Understand how CRT may be an effective way to address bullying behaviours with nursing students in the clinical setting
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# Background/Context

- ▶ Not a new phenomenon; often beginning with nursing students
  - ▶ Negatively effects students: self-esteem, self-confidence, mental and physical health
  - ▶ Students who are bullied may reconsider their decision to enter the nursing profession
  - ▶ Strategies needed for students to recognize and confidently respond to bullying
  - ▶ Cognitive Rehearsal Training (CRT) helps people reduce impulsive actions through education
  - ▶ Educating and supporting nursing students to respond to bullying will help to break the cycle of bullying
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# Purpose

To provide CRT to second year nursing students to improve their confidence to effectively respond to bullying behaviour in the clinical setting



# What is Bullying?

- ▶ Definition
  - ▶ Who are the perpetrators?
  - ▶ Are nurses a target of bullying?
  - ▶ How do nursing students fit in?
  - ▶ What interventions are there for workplace anti-bullying strategies?
  - ▶ How can students be prepared for bullying behaviours?
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# Bullying in Nursing

## ▶ Victim risk factors

- Young
- Female
- Inexperienced

## ▶ Interventions





# Definition of Bullying:

**“ acts or verbal comments that could ‘mentally’ hurt or isolate a person in the workplace. Sometimes, bullying can involve negative physical contact as well. Bullying usually involves repeated incidents or a pattern of behaviour that is intended to intimidate, offend, degrade or humiliate a particular person or group of people. It has been described as the assertion of power through aggression.” (CCOHS, 2016)**

***80% of practicing nurses report being the target of bullying behaviours in the past year***








Developed by M. Griffin (2004), Modified by N. Fleming & L. Sutherland (2011).



# What is Cognitive Rehearsal?

- ▶ ***STOP!*** and recognize what is happening and how you are reacting to it
  - ▶ ***REFLECT!*** on how you can address the situation proactively and respectfully
  - ▶ ***RESPOND!*** in a purposeful manner
- 



# **Definition of Cognitive Rehearsal Training (CRT)**

“An effective strategy that assists people reduce impulsive actions through training/education”  
(Griffin & Clark, 2014)



# Methods

- ▶ CRT workshop for second year nursing students (N=90) during clinical orientation
- ▶ Content: definition of bullying and impact it has on nurses and quality of care delivered
- ▶ Role-played scenarios of bullying interactions
  - Faculty to student
  - RN to student
  - Student to student
- ▶ Students asked to intervene when they recognized bullying behaviours and then offer how they would respond




# Cognitive Rehearsal Role Play





# Methods Continued

- ▶ In clinical groups of 8, students answered six questions regarding bullying within nursing profession
  - ▶ Lanyard cards outlining how to respond to bullying
  - ▶ Completion of clinical experience
  - ▶ Participation in focus groups (N=23) asking students about experiences implementing CRT strategies
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# STOP, REFLECT and RESPOND

## What to Say?

- ▶ Verbal affront (covert or overt snide remarks)  
*What do you mean by that comment?*
- ▶ Non-verbal innuendo (raising of eyebrows, making faces)  
*I see from your facial expression that you might be confused. What else do you need to know?*
- ▶ With-holding information (related to one's practice or a patient)  
*I feel that you aren't telling me everything I need to know.*
- ▶ Sabotage (any underhand interference in production, work)  
*I feel this should not have happened. We need to talk about this privately.*
- ▶ Undermining activities (to weaken, injure, destroy by secret or insidious means)  
*I feel that you don't trust me. Will you tell me why?*
- ▶ Infighting (bickering with peers)  
*We need to stop this behavior and learn to work together.*
- ▶ Backstabbing (betraying a friend or an associate)  
*I don't feel comfortable talking about (person's name) when they are not present.*
- ▶ Broken confidences  
*This is information that should remain confidential.*
- ▶ Scapegoating (assigning the blame to one person for the shortcomings of others)  
*We can't blame one person for everything that goes wrong.*
- ▶ Gossiping (idle talk, groundless rumor)  
*This is inappropriate conversation that should not be taking place.*




# Focus Group #1 Questions

1. What does bullying look like to you? Is that the same for you as a nursing student and a private individual?
  2. What do you know about the impacts of bullying? How has bullying affected you personally?
  3. How would you rate your confidence in addressing bullying behavior? (Not at all, somewhat, very confident?)
  4. What have your personal experiences been related to bullying while in nursing school?
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# Focus Groups #2

- ▶ Students were asked if they were better able to identify bully behaviours
  - ▶ Students were asked to share if they felt better prepared to respond to bullying behaviour
  - ▶ Students were asked if they had experienced or witnessed any bullying behaviours during their consolidated experience and how they responded
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# Findings



- Students voiced CRT helped with recognizing bullying situations
- They did not feel prepared to respond when bullying actually happened:

*“It helped me to stop and rethink; not sure how to respond”*

*“I didn’t have the confidence to address the bullying, but recognized the inappropriate behaviour”*

- Students felt the power differential between nurses and students kept them from speaking up

*“It’s difficult to confront others, especially senior staff”*

- Students suggested a need for more education to realistically and confidently respond to bullying behaviours

*“We need more demonstration about how to speak up to a nurse”*

*“There was not a lot of teaching about CRT. I need to learn more about what to do”*




- ▶ *Effects of bullying on nursing students poses a threat to the future of nursing practice and quality of care*





# Implications for Education AND Future Directions

- ▶ Improve quality of care provided
  - ▶ Strengthen healthy work environments
  - ▶ CRT workshop is an effective strategy for increasing students' ability to recognize bullying behaviours
  - ▶ An extended CRT workshop offered throughout the school year may better prepare students to address bullying behaviours
  - ▶ Provide CRT education for both students and instructors
  - ▶ Continued education required
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*First and Foremost...*

*A  
Personal  
Inventory  
is a must for all of us!*





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Thank-you!!  
Questions??

