If you’ve been a target of a nurse bully, I don’t have to tell you how destructive bullying can be. I’ve known nurses who have called off work, suffered from headaches and diarrhea, and even quit—all because of nurse bullies. Healthcare loses productivity, risks medical errors, and loses excellent nurses each year to this one problem. It’s time for the bullying to stop!

Here’s how:

STEP 1: MENTALLY SEPARATE YOURSELF FROM THE BULLY
Think back at times when you were yelled at, criticized, or secretly sabotaged by your co-workers. Now, pretend you are simply an observer watching the events you’ve recalled unfold. Can you see how the problem is with the bully and not you? Even if you make a mistake, it’s unprofessional and inappropriate for another person to yell, openly criticize, or “zing” you when you’re not looking. You don’t deserve to be berated or publically humiliated for a mistake. No one does.

STEP 2: NAME THE BULLY BEHAVIOR
The single most powerful response you can make in the face of either blatant (overt) or subtle (covert) bully behavior is to name it. Bullies who feel a sense of power during their overt tirades gain momentum as they scream and yell. Interrupting a bully midstream and labeling the behavior can short-circuit the verbal assault. Likewise, when a colleague secretly tries to sabotage you, rolling his or her eyes behind your back or under-mining your ability, acknowledging that you are aware of the behavior brings the bully out of the closet. Typically, once the covert bully’s cover is gone, the behavior stops. To be effective, naming the behavior must describe specific, observable actions. For example, if you say to a bully, “You always give me the worst assignments,” the bully can deny the charge. If you say, “For three shifts in a row, I’ve been assigned four patients while the other nurses on my shift have been assigned only three,” it’s hard for the bully to deny this fact. Here are additional examples of naming both covert and overt behavior.

“Are you yelling and screaming at me in front of patients and their families.”

“This morning during the staff meeting, when our manager acknowledged my recent BSN achievement, I heard you snicker and saw you roll your eyes.”

“I’ll be willing to talk about my mistake when you are ready to speak privately rather than calling me a baby in the middle of the unit.”

STEP 3: WALK AWAY FROM OVERT BULLYING
When you walk away from a bully attack, you take the audience away with you. Seldom will a bully continue screaming, yelling, or criticizing without an audience. Here are sample situations and possible responses that involve walking away:

Yelling and screaming: Interrupt and say, “I’ll be willing to continue the conversation when you are not yelling.” If the yelling continues, walk away.

Openly criticizing: Interrupt and say, “I’ll be receptive to your feedback when you deliver it calmly and respectfully” If the bully continues to criticize, walk away.

Openly minimizing accomplishments: “I respect your decisions regarding education and I expect you to respect mine.” If the bully continues, walk away.

STEP 4: SUPPORT YOUR CONVERSATION WITH FACTS AND DOCUMENTATION
Keep a notebook and write down behavior, dates, times, and witnesses. Objectively sharing the information with a bully lets that bully know you aren’t going to be an easy target from that moment on. Since bullies prefer easy targets, this alone might take care of the problem. If not, present the same information to your manager or human resources representative. If these individuals don’t address the problem appropriately, lodge a formal complaint. By law, an organization must investigate and take action on formal complaints about bullying in the workplace.

It takes moral courage to address bully behavior at work, but it’s an important step to protect yourself, your profession, and your patients. While your efforts might feel bumbling at first, they will get better with practice.

You’ve worked hard to earn your nursing degree. Don’t allow anyone to take away your right to practice nursing in a safe and professional atmosphere.

Dr. Renee Thompson, Author of “Do No Harm” Applies to Nurses Too,” invites you to visit www.rtconnections for resources, free articles and to purchase her new book. Renee is a sought-after speaker, consultant, and career coach in healthcare. Renee guides academic institutions, healthcare organizations and individual nurses to decrease nurse-to-nurse bullying, improve clinical and professional competence, effectively communicate, and create nurturing and supportive work environments.

To purchase Renee’s book or schedule Renee for your next event, contact her at www.rtconnections.com or call 412.445.2653.