
CASE STUDY JUST AN INNOCENT POST



The Facebook post from Adra's mom read, "Good morning, hope you had a good shift, get some sleep, chat later".

Adra arrives home from her chaotic night shift on a busy pediatric ICU unit. Before she heads to bed, she checks Facebook and notices the post from her mom. Adra replies: "Thanks mom, it was a horrible shift, that same nurse called in sick again, so we worked short staffed. It was really busy, and we all had to pick up an extra patient. I will give you a call when I get up; I'm exhausted and have another night shift tonight." Mandy, a friend and co-worker, reads the post and replies, "Just to give you a heads up, she called in "sick" again so brace yourself for another wild one 🙄 I don't know why the manager doesn't do something about her".

Beth, the RN they're talking about, called in sick the past two-night shifts.

Beth is still feeling ill and has called in sick again for her shift tonight. She just hasn't been able to shake the virus that is going around and doesn't want to bring it into the unit. She feels bad that she's leaving the unit short staffed creating additional work for her colleagues.

At first, Beth got along with all of her colleagues, but she's overheard Mandy belittling her in front of patients and visitors and her colleagues have told her that Mandy has made negative comments about her to them.

Another friend and colleague, Sue, isn't really surprised when she sees Mandy's comments on Facebook since she is aware that Mandy has made negative verbal comments about Beth to her before. The eye rolling emoji and the connotation of the word "sick" indicates to Sue that perhaps Mandy doesn't believe that Beth is really sick, and this makes her feel sorry for Beth. Sue and Beth started on the unit at the same time and get along well. Sue isn't too sure what she should do next, but she feels that she should do something to support Beth.

IS THIS BULLYING?

Bullying is an act of psychological or social aggression that is perpetrated by one individual against another either overtly or covertly.

In the [*Code of Ethics for Registered Nurses*](#), workplace bullying is defined as follows: "includes behaviours such as verbal abuse or threats of harm, continual criticism, demeaning remarks, intimidation and undermining, as well as more subtle behaviours such as refusing to cooperate, being unavailable to give assistance, hampering another's performance and making their work difficult. Workplace bullying is the term now used for what was previously described as horizontal or lateral violence, which placed responsibility only on individuals and excluded the responsibility of organizations.

Bullying is often not identified early. It is often identified retrospectively, typically after a severe incident or if a co-worker identifies it.

IF BETH READS THE COMMENTS AS THE TARGET, WHAT CAN SHE DO TO ADDRESS THIS SITUATION AND PREVENT FURTHER INSTANCES OF BULLYING?

- Inform the person who is behaving disrespectfully, in a safe environment, that their behaviour is inappropriate. Focus on the behaviour and its effect on her. Be specific and avoid judgements. As a target of bullying, she needs to make it clear that the behaviour is unwelcome and ask that it stop.
- Enlist the support of a friend or colleague – a witness can be important.
- Document the incident. This can help to clarify and understand the situation and relieve stress. It will also be useful to support a formal review and intervention process if it becomes necessary. She should keep a personal record documenting the facts of each episode - date, time, location, any witnesses, and how she felt; avoid opinion, speculation or gossip.
- Approach management or human resources for acknowledgement and assistance with resolving the problem. If her concerns have not been addressed, she may need to bring them forward in a different manner.
- Engage in education related to communication and conflict management. Learn to use one of the many strategies and tools that are available.
- Seek confidential advice from a safe source: supervisor, human resource department, union representative, employee assistance program or NANB.
- Report disrespectful behavior, if applicable, according to agency policy.

- Consult with a NANB Nurse Consultant and/or a Canadian Nurses Protective Society (CNPS) Legal Advisor.
 - Take legal action. If the situation remains unresolved, this option may be considered a last resort.
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WHAT CAN SUE AND THE OTHER COLLEAGUES ON THE UNIT DO TO SUPPORT BETH AND PREVENT BULLYING FROM OCCURRING IN THE FUTURE?

- Reflect on their practice and evaluate their personal belief system.
 - Educate themselves to recognize the signs and symptoms of bullying. Abide by a zero-tolerance philosophy.
 - Be mindful of their complaints and non-verbal communication.
 - Embrace, protect and nourish new staff. New nurses are more likely to be targeted for violence.
 - Give positive feedback to colleagues – often!
 - Work as a team player and accept a fair share of the workload and work cooperatively despite feelings of dislike.
 - Include all members of the team in socialization at work.
 - Offer support to colleagues who are targets and show interest and empathy. Targets of bullying need to stay connected with friends and colleagues in the workplace so that they don't become isolated.
 - Engage in education related to conflict management and communication.
 - Halt gossip or negative talk.
 - Advocate for a co-worker that is being targeted. Stand up for an “absent member” in conversations.
 - Speak up! Do not be a silent witness. Inform the person who is behaving disrespectfully that their behaviour is inappropriate. Focus on the behaviour and its effect on the target, not on the person who is behaving poorly.
 - Consider involving the manager in the situation where a vulnerable colleague does not have the confidence to take the matter to the manager on their own for fear of retaliation. This should not be done without the target's knowledge and consent.
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IS THIS JUST AN INNOCENT POST?

NANB's [*Practice Guideline for Responsible and Ethical Use of Social Media and Information Sharing Technologies*](#) reminds us: do not make disparaging remarks about employer or co-workers (e.g., threatening, harassing, profane, obscene, sexually explicit, racially derogatory, homophobic, or other offensive comments). Canadian Nurses Protective Society (CNPS) reminds us in their *infoLAW* on social media to:

- Avoid using social media to vent or discuss work-related events or to comment on similar postings by others.
- Avoid posting negative comments about your colleagues, supervisors and other health-care professionals; disclosing information obtained at work could be considered unprofessional and, if erroneous, could lead to a defamation claim.

It is important to remember when using social media that a breach in professional standards may result in an investigation into allegations of unprofessional conduct and when required action to bring the practice of the registered nurse up to the practice standards expected by NANB.

Thank you to the [College & Association of Registered Nurses of Alberta](#) for granting permission to adapt their case study.

RESOURCES

[Fact Sheet- Social Media](#)