Commissioning external consultants to review bullying and harassment in NHS organisations

November 2020

NHS England and NHS Improvement

Contents

Introduction

This guidance was commissioned by NHS England and NHS Improvement and was produced by Professor Duncan Lewis, Emeritus Professor of Management, Plymouth University and Director of Longbow Associates Ltd. We have adopted the guidance as an example of good practice as part of a wider toolkit of resources to support organisations to reduce bullying and harassment and promote cultures of civility and respect. The focus of this briefing paper is to provide information for organisations that choose to commission an external review into the culture of their organisation.

Bullying and harassment is a significant issue in the NHS with implications for staff wellbeing, engagement and patient care. The NHS Long Term Plan recognises that a culture of bullying, disrespect and incivility is not acceptable and has committed to creating a culture where staff feel supported, valued and respected for what they do and where the values that NHS staff seek to show to our patients; kindness, compassion and professionalism are the same values colleagues show to each other. The NHS Social Partnership Forum has been working in partnership with NHS organisations through its collective call to action to create a culture of civility, compassion and respect and to tackle negative behaviours, bullying and harassment.

Recent data from the English 2019 NHS Staff Survey showed 12.3% of staff reported bullying from managers and 19% from other colleagues. Other data from the 2019 NHS Staff Survey showed a small decline in the percentage of staff reporting their most recent experience of bullying and harassment, which suggests that bullying is higher than reported, although this varies by NHS organisation type.

People who experience bullying describe how it destroys their confidence and has a detrimental impact on their health and wellbeing, personal life and career. Bullying also has significant costs for organisations as it results in higher turnover, increased sickness absence and reduced productivity and engagement. Conservative financial costings estimates for bullying and harassment in the NHS in England have been put at £2.28 billion annually (Kline and Lewis 2018) and with data showing all aspects of the NHS system are affected by bullying (Iling et al., 2013), bodies such as the Care Quality Commission and NHS England and NHS Improvement are looking carefully at individual NHS organisations to make sure

they are well-led and surpass the ['fit and proper persons test'](#) when it comes to tackling bullying and harassment.

Against this backdrop, and with sustained media coverage of bullying in the NHS, some organisations have undertaken cultural reviews and sought external help and support. External reviews should only be used where significant cultural issues have been identified and when the options for using internal resources have been fully exhausted. There are a wide range of consultants and experts offering their services: this briefing paper aims to help organisations with commissioning external consultants/experts to ensure high quality advice and reports and a good return on investment.

The terms 'consultant' and 'expert' are used to refer to an individual who is external to the organisation, offering insight into bullying, harassment and creating workplace cultures of civility and respect. A 'consultant' generally refers to an individual from a consultancy firm who has the analytical skills required to diagnose and understand a wide range of issues and summarise them concisely in a report. They may not be an expert in the field of bullying and harassment. A 'bullying and harassment' expert will have expertise in the field and be able to offer insight and solutions from research but may not be familiar with the full range of consultancy techniques and the consultancy report style. You will need to consider if a 'consultant' or an 'expert' is more appropriate depending on the outcome and style of report that you want.

This briefing is set out as follows:

1. Drawing up a checklist

2. Producing an evaluation specification

3. Consideration of budgets, timescales and resources

4. What type of consultant/expert do you need?

5. Procurement issues

6. Engaging with the consultant/expert

7. Report format and management

8.   Media and stakeholder engagement

The checklist

You will need to establish what you want your engagement with consultants/experts to achieve before you begin commissioning them.

Each organisation will need to be sure they have mapped all internal skills used to reduce bullying, harassment and negative behaviours and promote a culture of civility and respect. These might include, but are not limited to:

- human resources and organisational development input
- staff-side and other trade union representatives
- occupational health and other wellbeing services
- chaplaincy
- equality and diversity leads
- Freedom to Speak Up Guardians/champions
- staff counselling
- open sessions with the board.

Many organisations find creating a steering group of internal experts allows for a broader understanding of bullying, harassment and negative behaviours as they can share knowledge relating to the specific organisation. Steering groups enable information-sharing and a deeper understanding of the workplace culture issues and discussions that can lead to creative solutions. One of the biggest failings in trying to tackle bullying and harassment is assuming a one-size-fits-all approach works – it does not (Fevre et al., 2012). Bullying and harassment may have common elements, but its complexity means that seeing bullying (or harassment) as a single phenomenon is unlikely to succeed. Therefore, gaining multiple internal perspectives at the outset is a good starting point.

External knowledge cannot replace the judgement of those tasked with delivering the policy, practice and interventions on the ground. Knowing what skills are needed at the outset will help achieve the report/output that more accurately reflects each individual NHS organisation's needs and stand up more effectively to internal scrutiny. An internal steering group will enable ongoing engagement with staff and will allow the impact of any cultural interventions to be evaluated over

time. An external review will only provide insight into the culture of an organisation at a point in time, and therefore an internal steering group is critical to ensure change is sustainable moving forward. Often steering groups are set up as an outcome of a review, but it is more effective if they are involved from the outset.

Clearly defining the vision of what you want to achieve and setting out the acute areas for action before engaging external consultants are critical. For example, completely eradicating all bullying, harassment and negative behaviour is an inspirational vision, but is it achievable? Highly unlikely. So, setting out realistic targets/goals/objectives at the outset is very important. It is more realistic to focus on making targeted improvements that will help to achieve a more compassionate culture.

It is helpful to consider the indicators that can provide an insight into the culture of the organisation – see Table 1 below.

Table 1: Indicators of the culture of an organisation

Indicator	Notes
Number of formal grievances	
% of staff in NHS Staff Survey reporting they feel pressure to come to work	
% of staff in NHS Staff Survey reporting they look forward to coming to work	
% staff in NHS Staff Survey reporting relationships at work feel strained	
% of staff in NHS Staff Survey reporting they have experienced discrimination	
% of staff in NHS Staff Survey reporting they are trusted to do their job	
Retention and sickness absence figures – high attrition and sickness absence rates, especially if concentrated in specific wards/departments, can indicate a negative culture.	
Friends and Family Survey	
Workforce Race Equality Standard data	
Workforce Disability Equality Standard data	

A realistic and practical way of defining your goals is to choose key cultural indicators and consider how you would like these to change. This will also enable you to measure the impact of any interventions that you introduce to try and initiate change.

Once established, it is sensible practice to make sure these have been signed off by the organisation's executive and that any steering group agrees with them, before proceeding further.

Producing an evaluation specification

An evaluation specification should always be produced on the basis of internal evaluation. It is important you make sure you have exhausted all internal appraisals of the bullying and harassment situation before looking externally for help.

Consider the following methods for your internal evaluation:

Method	Note
A full analysis of the NHS Staff Survey questions that can be used to indicate culture: consider if there are key staff groups, eg black, Asian and minority ethnic (BAME), professions and ward areas/departments that indicate cause for concern. Discrimination is closely aligned to some perceptions of bullying and should not be overlooked. All facets of discrimination including those involving BAME, disability, sexuality, should be considered.	
A detailed analysis of WRES and WDES data	
An analysis of Friends and Family Surveys.	
An analysis of retention figures: are there ward areas/departments where attrition rates are especially high? Have you explored the reason why?	
Analyse exit interview data: if exit interview data is not available and the attrition rate is high in a particular area, consider contacting recent leavers to find out more about their reasons for leaving.	
Sickness absence data: are there key ward areas/departments where sickness absence is especially high? Is work-related stress a key factor?	
Talk to staff-side representatives to gain insight into key issues for staff and hotspot areas.	

Talk to BAME, Disabled, and LGBT+ and any other staff networks within the trust to gain insight into key issues for staff and hotspot areas.	
Attend key staff forums, eg junior doctors' forum, feedback from the deanery on junior doctors' experience, SAS doctors' forum and ask for feedback.	
Anonymised data from staff counselling services: eg themes, types of issues, number of staff reporting to counselling programmes and/or Employee Assistance Programmes where bullying is a presenting or underlying factor.	
Use your own survey to find out more about the types of behaviour staff are experiencing. Discuss key themes with Freedom to Speak up Guardians, guardian of safe working hours, responsible officer.	
Use qualitative interviews to find out more types of behaviour staff are experiencing. Focus groups may need to be repeated by an external consultant as a neutral party may gain further insight, but you can do some preliminary work to inform your brief and to guide the reviewer to areas you want them to explore further. Engage with individuals who have raised issues of bullying and harassment (both formally and informally) to understand their experiences.	
Consider HR casework metrics. How many dignity at work/grievance cases are there? Are there any key themes or key staff groups that are affected? Consider if there are any behavioural agreements in place and if there are key themes in the behavioural agreements?	

If an external review is agreed as the right approach and having established the right approvals for goals/objectives for consultant engagement, it is necessary to produce a clear purpose for the external evaluation. This includes:

- a clear aim
- a limited but clear number of objectives that meet SMART principles (Specific, Measurable, Achievable, Realistic, Timebound)

- a focused understanding of the stakeholders likely to receive the information from the consultant, including CQC, NHS England and NHS Improvement and ministers, as well as community health groups, commissioning bodies and other agencies of interest.

Each organisation will need to define what they want to achieve, and this may include:

1. Reviewing your own approaches to tackling bullying, harassment and negative behaviours, including policy and processes.

2. Designing specific data collection for 'hotspot' areas known to be troubled by bullying, harassment and discrimination.

3. Expert analyses of data collected and subsequent organisation of the data into themes.

4. Contextualising your organisation to other NHS organisations and to other sectors (bullying and harassment in health and social care is considered a global phenomenon (Kline and Lewis, 2018)). This will also give you the opportunity to consider good practice and learning from other organisations.

Sometimes organisations engage external consultants on bullying and harassment because they want an objective appraisal of the state of affairs. This is likely to be impossible to achieve. Subjectivity masks individual perceptions of bullying and harassment and while an external agent such as a consultant or reviewer should be less subjective, subjectivity affects everyone. Instead, consider where the external consultant/reviewer can add value to what you already understand by bullying and harassment. Think about what further information or insight you would like. For example, you may want to develop greater understanding into the types of bullying behaviour that staff experience, or you may want to target specific departments or staff groups.

With all these factors considered, draw up a clear specification that will meet your aim and objectives. Try not to prescribe the methods you want, but instead invite suggestions as to potential methods used to meet the aim/objectives and share all the material and evidence that you have gathered. Consultants from large consulting firms will have a full array of skills and competencies but may lack the specific expertise needed for tackling bullying and harassment. Conversely, an

expert in bullying and harassment may have subject knowledge but lack the spectrum of methods your organisation may be looking for. As such, it may be necessary to compromise on some objectives to achieve your overall aim and get a well-rounded insight into the specific issues in your organisation.

In summary

- Aim for a short brief that describes the work you want undertaken, including a budget limit and report/outputs completion date.

- Set out the aim/objectives and the questions that your organisation wants answers to.

- Consider the CQC 'well-led' key line of enquiry – 'Is there a clear vision and strategy to deliver high quality care and support and promote a culture that is person-centred, open, inclusive and empowering which achieves good outcomes for people?' – is a good place to start.

- Provide a brief but informative context about the perceived areas of concern regarding the culture in your organisation and the nature of the bullying (or harassment or discrimination) problem and then detail your expectations. Asking a series of questions can be useful, for example:

Table 2: Questions around workplace culture/reducing bullying and harassment

Question	Note
Are the organisation's HR policies and processes effective in tackling bullying and harassment and promoting an honest and open culture?	
Are the organisation's HR policies and processes consistently applied?	
What is the culture in management and leadership meetings?	
How do executives behave? Is this in line with CQC well-led domain/organisational values? Do they show compassion?	
What is the capability and capacity of line managers to resolve conflict?	

Is there a culture of openness and transparency? Do staff feel willing to speak up? Do they speak up?	
Is there a culture of grade discrimination?	
Is there effective employee support when employees are involved in conflict?	
What are the key drivers for bullying, harassing or discriminatory behaviour?	
Are there specific areas of the organisation where bullying and harassment is especially high?	
Are there specific staff groups where bullying and harassment is an issue?	
What training is currently provided related to dignity at work/ bullying and harassment, creating a culture of dignity and respect?	

Here are some examples you could include in your brief for consultants/reviewers:

1. Review existing data/reports: specify what you would like reviewed although your consultant/reviewer may also suggest what might be useful.

2. Collect new data: specify what you would like to know – an experienced consultant/reviewer will be able to suggest data sources.

3. Attendance at meetings: specify which meetings you would like the consultant/reviewer to attend for you and them to find out more information.

4. Reporting cycle, such as weekly updates: how often will you need the consultant/reviewer to report back? What are the expectations of the board/steering group?

5. Launch of findings: how will the findings be presented back? Do you expect the consultant or reviewer to attend a board/steering group?

6. Deliverables/outputs: what format are you expecting the report in?

7. Outline your expectations for supplementary support post-report findings.

8. Detail what you would expect the consultant to do if there were any complications/challenges with this work (eg interviewing subjects sensitive to psychologically distressing situations) and signposting services such as additional counselling services.

9. Additional skills being sought: are there other skills you are looking for, such as mediation skills, coaching skills?

10. Consultant expertise, skills and knowledge: ask to see an example of a similar review they have completed in the past.

The brief must emphasise what is important. It should not just be a long list of requirements nor should it ask for an unreasonable amount of work for your budget.

Budgets, timescales and resources

The commissioning organisation will need to examine the support involved in managing a bullying and harassment review. Such projects can sometimes take months and liaising between the organisation and consultant/reviewer can be time-consuming and require access to senior people, including board members. A senior employee should therefore lead the liaising process and be afforded time to do so – this cannot simply be added to someone's existing workload. Project management skills are often critical for successful completion.

It is likely that significant background data and information will need to be shared beforehand. This might include organisation charts, policy documents, grievance data, complaint and disciplinary data, and previous commissioned reports. It makes sense to use a steering group to consider all available data that can be shared, without risk of breaching confidentiality.

The internal lead should have the expertise to assess the pros and cons of different scenarios a consultant/reviewer may propose. Again, the steering group could help with this.

Budgeting for an external engagement process on bullying and harassment must be realistic and should include an estimate of the time/costs of steering group members and the project lead. There should be some attempt to estimate the number of days required to complete the project and do it well. For example, qualitative work such as focus groups, interviews, observation studies, often costs considerably more than surveys conducted online. A single hour of interview can often mean three to four hours of transcription costs.

Be realistic about what you want and need and provide an indicative budget. If you do not provide an indicative budget it can lead to a wide range of bids from consultants, making comparison difficult. If the work is likely to run into several weeks or months, set aside a small contingency sum for any refinements of the study's scope. It is not uncommon for more people to come forward asking to have

their stories heard, meaning extra time is needed for interviews that may not have been planned.

While your brief will have clear foundations, such as timescales and budget, the nature of bullying and harassment reviews means changes are often necessary as the work advances. Several staff from a department not regarded as a hotspot may come forward for interview, for example, which may require more detailed exploration of that department including focus groups, interviews and documentation scrutiny, which can all increase costs.

Do not see the brief as fixed but something flexible. A good consultant/expert will work with you once the project is up and running and data/evidence becomes clearer, so be prepared to adapt objectives/outcomes accordingly.

What type of consultant or expert do you need?

A consultant or reviewer in bullying and harassment can possess a variety of knowledge bases, but how does your organisation know if this meets its needs? It is critical that there is a rigorous process and that due diligence is taken when engaging an expert/consultant. Staff need to feel that a fair, independent process has been followed when engaging the consultant, to have confidence in the outcome of the report.

Previous experience, including work for other NHS organisations, can be a useful starting point, particularly if it comes with a recommendation. Nevertheless, it is important that your commission benefits from their knowledge and experience so that it is robust and fit for purpose.

Investigating negative behaviour, including bullying and harassment and its impact, requires a complex set of skills usually drawn from HR, trade union, academic research, policy work and organisational psychology. It is unusual, but not impossible, to find a consultant with this broad range of complementary skills. Above all, it is important for the consultant to have empathic and socially competent skills. The 2018 NHS England guide _Towards commissioning for workplace compassion: a support guide_ identified compassion as critical not only for patients and the relatives of patients, but also essential for those delivering care.

The basis for employing someone external to the organisation is to give staff confidence that it is appropriate to speak up and come forward. The consultant must therefore possess the following essential skills:

- good listening skills

- ability to piece together complex and fragmented information, some of which may be timebound, dated or based on skewed testimonies

- empathy and compassion – it is not unreasonable to liken the skill requirements of a combined detective, nurse, psychologist and best friend

- research skills, including analytical skills

- experience of the not-for-profit sector such as the NHS is important, and particularly knowledge of NHS systems, language, job roles, etc

- adaptability

- thoroughness and attention to detail

- timeliness

- ability to sensitively offer constructive criticism and feedback (if the consultant simply agrees with everything you say, they may not be adding value; it is important that you/your organisation is challenged and probed in a constructive way)

- ability to produce a report in succinct and plain English.

It is always recommended to apply a competitive selection process, take up references and ask for evidence of previous work in the bullying and harassment field. It is good practice to seek a minimum of three responses, if possible, to allow for a comparison of skills, experience and record of working on similar projects.

Care needs to be taken if using a team of evaluators/consultants. While the lead consultant may have the requisite skills, what about the rest of the team? It is therefore important to establish who will lead the external evaluation and what roles they and others will play within the programme of work. You might also wish to consider the levels of qualifications, professional memberships, etc, of the consulting team.

Competitive selection allows for cost comparisons, but exercise caution here as decisions should never be taken solely on a cost basis. Lower fees could mean inferior outcomes and a lack of expertise. Quality outcomes and value for money must be balanced, and a scoring matrix should take this into consideration. Skills matching to project aims should be the primary factor in choosing a consultant, and bodies such as NHS England and NHS Improvement may be able to offer advice on this.

The steps are therefore:

1. Engage with your procurement team and agree project brief criteria.

2. Either generally advertise or pre-select consultants to respond to the project brief.

3. Receive responses to the brief.

4. Interview as part of the selection process.

5. Assess submission from consultants against your project brief criteria.

6. Select the consultant based on your selection criteria.

Finally, a good general rule is once you are clear on your aims, objectives and project brief, appoint your consultant/reviewer as soon as you are able to, ensuring that you follow due process regarding your organisation's procurement processes.

Procurement

Engage with your organisation's procurement team from the outset as they will be able to advise on the process. A well-written specification will enable you to evaluate consultants effectively, and the procurement team will be able to advise on the tendering process and number of bids you will need.

Allow at least three weeks for the tender process but do build in a degree of flexibility. Once tenders have been received you will need a scoring matrix to evaluate them, much as you would with a staff appointment. Your procurement team will be able to provide advice and guidance on producing a scoring matrix.

When you have your shortlist, make sure you interview, to allow you the time and space to probe skills and expertise. A good tip is to ask evaluators to forward previous reports so that you can explore their writing style and analytic techniques and ensure their general approach meets your needs. The interview process will also give you the opportunity to flex the brief/aim/objectives based on the expertise and advice offered. This is the opportunity to find out if you will be able to build a good relationship with the consultant to make the brief workable and productive.

Request CVs of key team members, including a short summary of skills and experience. Ensure there are no conflicts of interest by formally asking consultants bidding for the project to state there are no conflicts of interest. If any do exist, these must be declared so they can be evaluated. Ensure appropriate levels of professional indemnity insurance and public liability insurance are present and cover any relevant GDPR requirements.

Take up references as appropriate and issue the contract for services agreed. See this as a starting point for building the relationship which will be an ongoing process. Issuing a lengthy contract document is not a substitute for ongoing dialogue and engagement.

Make the appointment by letter, setting out the terms of the appointment (based on the project brief). Make sure the amount to be paid is clear along with the payment terms, including if there are staged payments and how expenses are to be managed. Control is best handled by retaining final payment until handover of project works.

Engaging with the consultant/expert

You can, as appropriate, begin the engagement process with the initial meeting to clarify and agree exactly the stages, timings and reporting mechanisms of the consulting scope of work. You should also provide all available evidence since you first captured the data from your internal experts/steering group. If new data has emerged since, make as much of it available as is practicable.

Ensure the consultant knows who the key constituents in the organisation are and take the time to introduce them to the key stakeholders of the project. This is an ongoing task: as data becomes clearer, you can potentially zone in on the key individuals the consultant/expert is most likely to be working with. These are most likely be the HR director/workforce/organisational development director and staff-side chair.

Use a steering group made up of other key interest groups, eg Freedom to Speak Up Guardian, junior doctor representatives, operational managers, staff champions, staff-side representatives and occupational health, which can then be used to manage other expectations and offer guidance. The steering group should be engaged from the beginning of the process and can be used to strengthen partnership working. The group can be used to provide valuable input into scoping the work that will be commissioned, choosing the provider, and agreeing objectives and outcomes. Effective use of this group will help staff to feel confident about engaging with the consultant/expert and strengthen the integrity of the final report. It is important to make clear who the key contact points for the group will be.

It is essential that there is good control and oversight of information flows, and this is best managed through a weekly check. This need not be face-to-face – it could be undertaken by telephone or Skype, for example. Allowing both sides to raise issues prevents matters escalating or simmering unresolved. The management of expectations is a responsibility on both sides. Openness and transparency will make for a better outcome and demonstrating a learning approach at the outset is more productive than adopting a contractual one.

Report format and management

Is a report what you need? What alternatives might work best for you? What thought have you given to dissemination, engagement and stakeholders?

Bullying and harassment are emotive concepts, and there will be a number of parties interested in the outcome of the work (see also the following section). Most staff will not be interested in reading lengthy reports, but you must also ensure transparency and engagement with the wider workforce. You might want two reports – one detailed and available to anyone who wishes to read it, and a second, more concise summary built around key bullet points. The former is written for the executive and the latter for the wider workforce. A copy of the report should be provided to the executive team, Freedom to Speak Up Guardian and staff-side representation.

Briefing papers that focus on specific aspects of bullying and harassment are also appropriate. For example, a paper reporting on policy and process would be different from a paper reporting on grievance and disciplinary data or a paper analysing new data and trends. Decide what format would best meet the needs of your audience(s) at the very outset.

Do you want recommendations or simply conclusions? Findings may suffice, and you can discuss privately with the consultant what needs to be done. You may want to develop your own recommendations based on the findings, or you may want the consultant to suggest an action plan. If recommendations are actions to be taken, you are then compelled to respond to them. It is good practice to develop measures of success based on the implementation of the recommendations, ie revisit Table 1: Indicators of the culture of an organisation.

Although some consultants will allow a degree of flexibility in the report's content, bullying and harassment consultant/experts should always be true to the data. Experienced consultants/experts may be willing to tweak words or sentences, but it is unreasonable to expect them to alter findings simply because you do not like the message.

Honesty and the integrity of the data are at risk from too much interference and participants in the study will soon realise if the findings have been diluted. That said, consultants should be willing to listen to objections and to offer robust defence for their reporting – if they cannot, it is not unreasonable to request changes. The editing and approval process must be agreed upfront.

Acting on the recommendations of reports and briefing papers is also key. Setting deadlines or action planning with key responsibilities is imperative, as is the backing of senior leadership in ensuring actions is taken.

Media and stakeholder engagement

Once the organisation has received the outputs from the consultant/reviewer, the information needs to be considered in terms of media and stakeholders.

Internal stakeholder engagement is likely to be more effective if it comes with clear leadership support, including the chief executive and chair. Visible senior leadership support has long been recognised as key to demonstrating to the workforce that the organisation's leaders are serious about tackling bullying and harassment (Einarsen et al., 2011).

The steering group should also play an active role in communicating findings and working with various groups, including trade union partners, to gauge reactions to the review outcomes. These should be fed back to the identified lead within the organisation and communicated accordingly with the executive and board.

External stakeholders should also be actively engaged. These can be considered in two distinct categories:

- The first is NHS agencies such as NHS England and NHS Improvement, other health/social care regulators such as CQC, and commissioning bodies such as clinical commissioning groups. Having commissioned an external evaluation, the organisation should liaise with these stakeholders about courses of action and lead responsibilities for those actions.

- The second external stakeholder group is patient groups, local service users, councillors, voluntary groups and other stakeholders. Their interest in bullying and harassment is likely to be less intensive than more formal NHS and regulatory bodies, but nonetheless they should not be overlooked in the engagement process.

Engagement with the media (broadcast and written) requires careful planning when it comes to bullying and harassment. The media generally have shown a healthy interest in stories of bullying and harassment.

Our experience suggests a proactive engagement strategy is likely to be the most effective, so your organisation's communications team will need to be closely involved in the management of engagement strategies. Engage with them before commissioning the report and keep them informed throughout the review process so that they are sighted on the initial findings. The communications team should involve the consultant directly as there are risks that in producing media-savvy stories, the data gets skewed and the consultant, who may be asked to give interviews, is unable to defend the claims.

Some consultants will be experienced at media engagement – for example, as academic researchers – but others will not. Whether the consultant engages directly with the media will therefore be an important point of discussion at the outset of the commission.

Conclusions

Bullying, harassment, abuse and discrimination are all areas with much in common. They are riven with sensitivities that can have historical and deep-seated roots. Some of these will manifest in individuals as psychological distress, while others will present as anger, rage or other forms of stress.

Appointing an external consultant to help the organisation tackle such issues requires a complex skillset. Understanding bullying or other forms of workplace ill-treatment cannot be understood by reading a textbook or someone else's report, nor can it be understood from a single perspective.

The complexity of bullying and harassment is a challenge, even more so with the inclusion of perceived discrimination, and appointing someone to help you get to grips with it is no simple task. This briefing paper helps prepare you for that, but this will be the start of your journey. Leadership, compassion and appreciative conversations are simply a starting point to a longer path to culture change.

References

Einarsen S, Hoel H, Zapf D, Cooper CL (2011) The concept of bullying and harassment at work: the European tradition. In Einarsen S, Hoel H, Zapf D, Cooper CL (eds) *Bullying and harassment in the workplace: developments in theory, research and practice* (3-39). London: CRC Press.

Fevre R, Lewis D, Robinson, A, Jones T (2012) *Trouble at work*. London: Bloomsbury Academic Press.

Iling JC, Carter M, Thompson NJ, Crampton PES, Morrow GM, Howse JH, Cooke A, Burford BC (2013) *Evidence synthesis on the occurrence, causes, consequences, prevention and management of bullying and harassing behaviours to inform decision making in the NHS.* Southampton: National Institute for Health Research.

Kline R, Lewis D (2018) The price of fear: estimating the financial cost of bullying to the NHS. In *England. Public Money and Management*.
http://dx.doi.org/10.1080/09540962.2018.1535044

Lewis D, Megicks P, Jones P (2017) Bullying and harassment and work-related stressors: evidence from British small and medium enterprises. In *International Small Business Journal* 35 (1), 116-137.

NHS Staff Survey results 2019
www.nhsstaffsurveyresults.com/

NHS England (2018) *Towards commissioning for workplace compassion: a support guide*. NHS England 2018.
www.england.nhs.uk/publication/towards-commissioning-for-workplace-compassion-a-support-guide/

Appendix 1: Example terms of reference

Example 1: Specific department

Terms of reference for the investigation

To find out:

1.   If there is a culture of bullying in the xxx department of the organisation as defined by the organisation policy.

2.   Whether there are behaviours displayed by individuals that are below the expected standards set out in the policy and or inconsistent with the organisation's core values and, if so, this behaviour contributes to the culture in the organisation.

The investigation process

1.   Provide an opportunity for staff and workers to speak confidentially to an independent person about behaviours in the department.

2.   Encourage staff/workers to meet voluntarily with the investigator at a convenient time and be released from their duties to do so.

3.   Focus on behaviours that are inconsistent with the organisation's core values and behaviours that have become acceptable and unchallenged rather than into specific incidents/individuals.

Process

All in the department to be invited to voluntary meetings via email and notice in mailbox:

1.   Administrator to liaise directly with investigator.

2.   All information treated as strictly confidential and not attributed to individuals.

3. If investigator receives information during investigation that requires immediate attention, they would refer to HR.

Timescales and outcome

1. Initial report to commissioning manager within eight weeks containing following sections: summary, terms of reference, background, findings, conclusion, recommendations, appendices.

2. Weekly update to commissioning manager.

Methodology

1. When conducting your investigation as part of your methodology for diagnoses, please consider the following sources of data:

   - analysis of staff survey data related to xxx department
   - employee relations data
   - dignity at work policy
   - qualitative meetings with individual staff.

Example 2: Organisation-wide

Terms of reference for the investigation

1. Carry out a neutral assessment of the handling of issues of bullying and harassment in the organisation over the last three years.

2. Find out if there is a culture of bullying and incivility in the organisation.

3. Understand if bullying and harassment are more prevalent in particular staff groups/professions/departments.

4. Find out what disrespect and incivility look like in the organisation – what are staff experiencing? What are the behaviours?

5. Provide guidance and expertise on the approach the organisation can take to improve the culture and reduce the number of staff reporting bullying and harassment in the NHS Staff Survey.

Methodology

The consultant will be provided with documents, including but not restricted to:

- policies on dignity at work, disciplinary, grievance, mediation
- staff survey results and analysis for past three years
- Medical Engagement Scale reports for three years
- CQC reports
- employee relations data for last three years
- exit interview summaries for last three years
- Friends and Family Test results for last three years
- outline of leadership training relating to bullying and harassment.

They will:

1. Undertake a survey based on British workplace behaviours survey and give respondents the opportunity to follow up with an interview.

2. Conduct interviews with respondents to survey who request an interview. All information treated as strictly confidential and not attributed to individuals. If they receive information during investigation that requires immediate attention, they would refer to HR.

1. Interview with staff-side representatives.

2. Observe divisional board meetings.

3. Conduct interviews with Freedom to Speak Up Guardian.

Scope

The purpose of the enquiry is not to reopen past cases of bullying and harassment but to gain a deeper understanding of the culture in the organisation to take steps to create a positive, open culture where staff do not feel they experience bullying behaviour.

Timescale and outcomes

1. Report to board within eight weeks.

2. Weekly update to commissioning manager.

3. Report to consider key themes of: governance, policy and process, training and education, leadership and management, culture.

4. Report to contain summary, terms of reference, background, findings, conclusion, recommendations, appendices.

5. Consultant to present to board and internal steering group

Duncan Lewis is Emeritus Professor of Management at Plymouth University. He is a former Advisory, Conciliation and Arbitration Service (ACAS) professor and founding member of the International Association on Workplace Bullying and Harassment (IAWBH). He was a co-researcher on Britain's biggest ever study on workplace ill-treatment. Longbow Associates Ltd is a specialist consultancy focusing on bullying, harassment and discrimination support to organisations.

Contact us:

NHS England
This publication can be made available in a number of other formats on request.

Please call 0300 311 22 33 or email england.contactus@nhs.net.

 @NHSEngland

NHS England and NHS Improvement publication code: