

The New Age of Bullying and Violence in Health Care: Part 3

Managing the Bullying Boss and Leadership

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ABSTRACT

Purpose/Objectives:

This article:

1. Distinguishes among various types of bullying behaviors associated with leadership;
2. Discusses abusive and vicarious abusive supervision;
3. Discusses the influence of leadership styles and models on workplace bullying;
4. Explores industry evidence surrounding workplace bullying and the abusive boss; and
5. Provides strategic guidance on managing the bullying boss and leadership in health care.

Primary Practice Setting(s): Applicable to all health care sections where case management is practiced.

Findings/Conclusions: This article is the third of a 4-part series on the topic of bullying in the health care workplace. Part 3 addresses the dimensions of the bullying boss and leadership, posing major implications for patient safety plus the mental health of staff members. The complex constructs and dynamics broached by the bullying boss and department leadership are explored. These include the underlying forces at play such as power, gender, leadership styles, plus weaves in assessment models. Strategic and proactive management of bullying by leadership is vital to workforce retention and well-being.

Implications for Case Management Practice: The increasing incidence and impact of bullying across all sectors have made it a major workforce performance management challenge. Health care settings are especially tense environments, often making it difficult for individuals to distinguish between bullying behavior and high expectations for staff. Bullying impacts both direct targets and bystanders who witness the assaultive behaviors, with ethical implications as well.

Case management is poised to promote a safe health care workplace for patients and practitioners alike amid these intricate circumstances. Understanding types of bullying bosses and leadership styles is integral to a case manager's success in the workplace.

Key words: *abusive supervision, authentic leadership, bullying boss, case management, congruent leadership, incivility, nursing, servant leadership, social work, toxic boss, vicarious abusive supervision, workplace bullying*

The relationship between a manager and staff members is complex. On one hand, a positive relationship between the two can be motivational and inspiring. However, a negative relationship will impact a staff member's job performance, workplace attendance, and ultimately retention (Balle, 2017; Blackburn, 2017). Add the presence of bullying behavior to this dyad and effectively maneuvering the relationship becomes an insurmountable task. Not only can it take an emotional toll but it can also traumatize the employee in the long term.

With the high incidence of bullying in health care well cited in the literature (Ariza-Montes, Muniz, Montero-Simo, & Araque-Padilla, 2013; Berry, Gillespie, Fisher, Gormley, & Haynes, 2016), it is

unsurprising that managing a bullying boss and/or department leadership has become a workforce priority. Although the culture of any organization may be conducive to bullying, it is a culture that needs no further fostering. Enabling a disabled system never bodes well for any industry, particularly one tasked to render safe, accountable, and efficient care (Fink-Samnack, 2017).

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Health care settings are especially tense environments, often making it difficult for individuals to distinguish between bullying behavior and high expectations for staff.

This Part 3 article of the series, “The New Age of Bullying and Violence in Health Care” (Fink-Samnack, 2015, 2016), addresses the complex dynamics invoked by the bullying boss and department leadership, including definitions and associated constructs, plus the contributing underlying forces. Approaches are also presented to empower a case manager’s ability to handle those challenging situations where the bullying boss and/or leadership culture live.

Who Is the Bullying Boss?

The bullying boss is not necessarily a person who has a different perspective from his or her employees or is perhaps a micromanager (McCord, 2017a, 2017b). The construct refers to a person in a leadership position who engages in a wide range of behaviors marked by various forms of nonphysical aggression toward employees. These behaviors include, but not limited to:

1. Ridiculing;
2. Devaluing in front of other staff members or personnel;
3. Accusing of incompetence;
4. Blaming;
5. Lying; or
6. Failing to give credit for their work. (Moss, 2016)

Each of these behaviors leads to negative consequences for employees that range from job dissatisfaction to emotional exhaustion, as well as longer term and more profound psychological distress.

Despite efforts to thoroughly address the dynamic of the bullying boss in the literature, confusion can easily remain. It is vital to know what behaviors are and are not considered bullying (Fink-Samnack, 2017; Moss, 2016; Thompson, 2016). There may be times when a case management director does not agree with a staff member’s plan, resulting in a course of action that ends in a poor outcome. Instead of taking the appropriate education moment with the staff member to learn for the future, the boss reacts and comes across more as a disciplinarian than a mentoring leader. The interchange is brief and perceived to be hostile by the staff member. The boss may have been direct in approach but not rude. Although the

staff members may perceive the interaction as bullying, it is not. However, if this behavior is part of a repeated pattern of calling the staff member incompetent, it crosses the bullying line, whether the interaction occurs in private or in front of the entire team.

Another situation that can feel like bullying involves when a boss uses his or her authority to his or her advantage. Consider the case manager who meets with the department director to brainstorm about strategies to manage the team. They collaboratively develop a strong process and tool to address the situation. However, the director then takes credit for the plan development and implementation. The boss may be a “credit hog” (McCord, 2017b) but that does not make that individual a bully. Table 1 provides further clarification on what behaviors are and are not considered bullying.

There are several types of bullying bosses. On one end of the spectrum are those individuals who throw tirades and intimidate staff. They may use their authority to abuse the employee and/or attempt sexual harassment. The behavior may potentially be serious enough to warrant termination from an employer, if not also have legal consequences. On the other end of the spectrum are more covert bullies: those individuals whose behaviors may occur on a more episodic basis or even present with greater frequency (Smith, 2013). These bosses are manipulative and unpredictable, presenting as approachable one day but reactive and abusive the next. Although these individuals push staff to the edge, they may joke about their behaviors in an effort to mask the bullying intent. Ultimately, bullies destroy camaraderie and rob the workplace of normal functioning, solid performers, and satisfaction. They grossly impact an employee’s ability to bring his or her best performance to the job (Kreamer, 2013; Smith, 2013).

Toxic bosses refer to a type of leader who presents as successful and accomplished, if not a genius in the field. This combination makes the toxic boss especially tough to identify on the front end. Although there is excitement about the potential of

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TABLE 1
What Bullying Is and Is Not

Bullying Is Not	Bullying Is
When a manager: Sets high work standards and/or expectations for staff	When a manager: Sets unequal work standards and/or expectations for staff in the same positions or practice level Sets unequal work standards and/or expectations for staff across different disciplines (e.g., nurses, social workers) Sets unrealistic work standards or expectations for staff
Holds staff accountable for performance	Holds staff accountable for performance outside of practice scope and/or level of experience
Maintains and/or discusses varied personal or professional views/perspectives from staff	Enforces personal views/values on staff (e.g., end of life, spirituality)
Provides staff constructive feedback	Is disrespectful to staff (whether all staff members or a certain staff member) whether during individual or group interactions
Has open discussions with staff about varied professional ethical interpretations of practice	Forces or highly encourages staff to engage in behaviors that are counter to ethical, if not legal, standards of professional practice (e.g., mandating staff practice across state lines without requisite licensure, friend, staff on Facebook)
Has a bad day	Consistently engages in behavior and/or communications with staff (whether all or singles out individuals) that are rude, disrespectful, insulting, and/or degrading

Note. Adapted from Thompson (2016).

working with characteristics that promote an aura of brilliance and appeal, a staff member's enthusiasm quickly evaporates soon after employment. A switch turns on and a more destructive, degrading personality emerges that wreaks havoc in the workplace. These leaders know how to appeal to a staff member's insecurities and need for high self-esteem and significance. They will charm, manipulate, mistreat, weaken, and devastate those who follow them (Lipman-Blumen, 2006; Weinstein, 2007). The most common behaviors of toxic bosses appear in Box 1.

Mueller (2011) went to the extent of detailing seven distinct types of bullying bosses, which are presented in Box 2. It is expected that there will be some familiar types identified by case managers in this listing. One constant exists amid the disparity of bullying boss presentations; the more an individual knows about the type of bullying boss he or she has, the more empowered that person will be to manage the ensuing situations (Weinstein, 2007).

BOX 1
Toxic Boss Behaviors

- Leaving employees worse off than they found them by undermining, demeaning, and terrorizing them.
- Consciously feeding their employees illusions that enhance the leader's power and impair the employee's capacity to act independently.
- Playing to the base fears and needs of the employees.
- Stifling constructive criticism and teaching supporters—sometimes by threats and authoritarianism—to comply with, rather than question the leader's judgment and actions.
- Failing to nurture other leaders, including their own successors.
- Maliciously setting constituents against one another.
- Identifying scapegoats and inciting others to castigate them.
- Ignoring or promoting incompetence, cronyism, and corruption.

Note. Adapted from Lipman-Blumen (2006); Weinstein (2007).

ABUSIVE AND VICARIOUS ABUSIVE SUPERVISION

Often identified as the dark side of leadership, abusive supervision is a concerning trend that has shown to be detrimental to desired workplace outcomes (Harris, Harvey, Harris, & Cast, 2013; Walton, 2013). It is particularly concerning for those workplaces that focus on patient care. The term "abusive supervision" refers to a dysfunctional type of leadership where a supervisor or boss engages in sustained hostile verbal and nonverbal behaviors, excluding physical contact. The construct causes long-lasting scars, if not trauma, for victims resulting from the continuous occurrence of negative behaviors over a lengthy period of time; longer than workplace violence and/or aggression (Harris et al., 2013; Tepper, 2000).

In vicarious abusive supervision, the employee does not directly experience the offensive behavior but hears about or experiences that behavior secondhand. Research shows that bystanders of workplace bullying are as affected as those who are the

BOX 2
The Seven Types of Bullying Bosses

1. *Subtle*: Those who torment their targets with quiet but piercing techniques.
2. *Abusive*: Those who hound a target employee without mercy.
3. *Crude*: Those who throw their weight around loudly and physically.
4. *Raging*: Those who intimidate everyone in the vicinity with their out-of-control anger.
5. *Echo*: Not normally abusive, these persons mimic bullying behavior with their subordinates.
6. *Ghost*: Those who guide, mentor, and supervise lower-level bosses in bullying techniques and tactics.
7. *Satellite*: Those persons of stature who undermine a target by contributing to someone else's bullying.

Note. Adapted from Mueller (2011); Weinstein (2007).

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direct targets (Cannizzo, 2017). For example, a case management supervisor has the reputation of being verbally abusive to newer line staff. Several case managers report hearing the supervisor talk openly how “those new grads need a tougher skin if they want to survive her, if not employment in this organization.” The case managers share with colleagues across units how disrespectfully they are treated. Department morale worsens after several case managers are verbally attacked during a staff meeting by the supervisor about their “inability to do outcomes properly.” News of the attack spreads like wildfire, evoking concern by case managers across all units. The supervisor’s behavior continues, with staff requesting transfers to other positions in the system and/or resigning from the workplace.

Vicarious abusive supervision contributes to a counterproductive practice culture: one that relies on threats and punitive action to allegedly achieve an expected standard of performance, as opposed to using educational moments to empower learning opportunities. Although it is bad enough that vicarious abusive supervision is allowed to exist, further consequences present for all involved. Employees can become traumatized by the sheer knowledge that their organization allows the negative treatment to fester, even if they do not experience that treatment directly. The impact of vicarious abusive supervision has been explored in how it contributes to overall perceptions about a particular organization and how that organization treats employees (Harris et al., 2013). The definitions of both abusive supervision and vicarious abusive supervision appear in Table 2.

INDUSTRY EVIDENCE

Workplace bullying takes an emotional toll on all involved, especially staff targets. Health care is among the highest prevalence of bullying, with 37%

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TABLE 2

Definitions of Abusive and Vicarious Abusive Supervision

Abusive supervision	<ul style="list-style-type: none"> • Subordinates’ perceptions of the extent to which supervisors engage in the sustained display of hostile verbal and nonverbal behaviors, excluding physical contact. • This psychological bullying can be of a longer duration than physical abuse. It may be less obvious but more insidious, leaving long-lasting scars. • It is often directed at the entire office, and not one single person.
Vicarious abusive supervision	<ul style="list-style-type: none"> • Often referred to as “second hand bullying.” • The observation or awareness of abusive supervision that is not experienced directly (i.e., first-hand). • One employee experiencing abusive supervision indirectly through the direct abusive supervision experienced by another employee.

Note. From Harris et al. (2013); Tepper (2000).

of American workers affected; roughly 54 million people. If coworker bystanders of those bullied are included, numbers total to nearly one-half of all employees in the United States (Morgan, 2014).

Outcomes reflect as high as 28% of line staff experiencing bullying from their direct manager (Lattimer, 2012). The overall impact of this disruptive behavior on organizational performance has been discussed across the literature (Ariza-Montes et al., 2013; Aryee, Chen, Sun, & Debrah, 2007; Berry et al., 2016; Fink-Samnack, 2015, 2016, 2017; Gates, Gillespie, & Succop, 2011; Morgan, 2014; Moss, 2016; Workplace Bullying Institute, 2017a).

Incivility and abusive supervision by a bullying boss contribute greatly to turnover in organizations (Collini, Guidroz, & Perez, 2013; Laschinger, Fida, & Leiter, 2017; Tepper, 2000). Studies have shown a positive correlation between workplace bullying or harassment and turnover intention, with as high as 60% of nurses driven to consider leaving the organization. Other studies yield that 20% of persons will resign because of the ongoing disruptive behaviors conducted by a workplace bully (Morgan, 2014). Behaviors associated with abusive supervision have been identified, namely mistreatment, incivility, and emotional abuse (Hogh, Hoel, & Carneiro, 2011).

The data further demonstrates how this issue manifests on a global scale, with studies conducted in a number of countries across Australia, Britain, Finland, Ireland, Norway, and the United States (Hogh et al., 2011). The causal relationship between bullying by organizational leadership and/or management toward staff has been consistently noted as

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a major theme for resolution (Bally, 2007; Lutgen-Sandvik & Tracy, 2012; Marriner Tomey, 2009; Mikaelian & Stanley, 2016; Spence Laschinger, Wong, & Grau, 2012).

Bullying by leadership has been associated with a number of physical and behavioral health issues for targets, inclusive of:

- Cardiac problems (>60%),
 - Posttraumatic stress disorder (>30%), and
 - Suicidal ideation (>30%).
- (Falzoi, 2016)

Prior articles (Fink-Samnack, 2015, 2016, 2017) have addressed the high incidence of mental health issues manifesting from exposure to bullying in the health care workplace. Vulnerability to suicide has emerged as a gross concern for those victims of bullying. Studies reveal that 10%–15% of those bullied take their lives and are twice as likely to contemplate suicide (Nierlsen, Nielsen, Notelaers, & Einarsen, 2015; Wallace, 2008). More than 62% of bullying targets reported a distrust of institutions, and another 74% experienced a sense of betrayal by colleagues (Falzoi, 2016). The loss of support by peers and colleagues contributes to profound feelings of isolation and helplessness for the bullied target, especially for those concerned about immediate termination from their job (Wallace, 2008).

Although older research on the topic found that poor performers are most likely to experience bullying from their supervisors, the dynamic has shifted. Current data show how bullying is most often against employees who excel in the workplace. As a result, the employee's high level of competence poses a threat to the lower performing, unethical boss (Falzoi, 2016; Moss, 2016).

A large study of close to 1,600 employees conducted by the Workplace Bullying Institute yielded vital details about those who were bullied and what actions they took to stop the behaviors. Roughly 38% of bullied employees did nothing to address the abuse, ultimately hoping the situation would improve, which it did not in almost 95% of the

situations. Seventy percent directly confronted the perpetrator, with 3.57% effectiveness. Of the 71% who requested intervention from the boss of the bully, 3.26% of these instances obtained the assistance expected. Seventy-four percent anticipated support from senior management, with 3.69% receiving the action they envisioned. Forty-three percent of employees filed formal complaints with human resources, alleging a policy violation. Nineteen percent filed a complaint with an external state or federal agency (e.g., Equal Employment Opportunity Commission), of which 11.9% had a positive outcome. Thirty-four percent sought guidance from an independent attorney, with 9% filing a lawsuit. Ultimately, 16.4% of those lawsuits filed were effective (Smith, 2013).

Data focused on the impact of both abusive supervision and vicariously abusive supervision yield similar impact of the two on job frustration by line staff, as well as less confidence in the organization as a whole (Walton, 2013). Studies suggest that those victims of vicarious abusive supervision and abusive supervision are likely to exhibit similar negative effects of job frustration, coworker abuse, and perceived lack of organizational support (Harris et al., 2013).

THE GENDER PARADOX

Research on the gender incidence of bullying and other workplace power dynamics yields interesting implications for consideration of this complex paradox. The data is inconclusive about whether a higher frequency of bullying exists among men or woman (Ariza-Montes, Muniz, Leal-Rodriguez, & Leal-Millan, 2014). Yet, women who report to female supervisors detail more frequent symptoms of physical and psychological stress than those who work for male supervisors. Ninety-five percent of women believed they were undermined by another woman in

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the workplace at some point in their career (Drexler, 2013).

To say that health care settings are ripe for the emergence of the “queen bee syndrome” is an understatement. In this instance, women who rise to success in male-dominated environments are prone to oppose the rise of other women. Many of these women may have originally fought to attain their leadership role, if not complained of unequal treatment. Yet, independent of the factors surrounding their advancement up the career ladder, these women share a common bond; they perpetuate a pattern of inequity by turning on their fellow gender (Drexler, 2013).

Queen bees are unable to nurture the next generation of female professionals. In the interest of maintaining power and authority, the queen bee seeks to devalue the confidence of anyone who is perceived as a potential competitor by undermining his or her professional standing. Given that women comprise a majority of the case management workforce (95.2%; Tahan, Watson, & Sminkey, 2015), concern exists for the impact of the queen bee syndrome on succession planning for any case management department, if not the profession overall.

Another interesting dimension associated with gender involves how women who hold managerial positions are more prone to being bullied overall (Veale & Gold, 1998); essentially, the bullying boss becomes the target. One explanation for this occurrence in the literature relates to ongoing traditional, if not sexist, attitudes toward women in the workplace and career advancement as opposed to male colleagues (Ariza-Montes et al., 2014; Veale & Gold, 1998). Other experts identify how bullies feel extreme stress from their own bosses. At times, the bully can experience conflict with coworkers and colleagues that ultimately impacts their relationship with the staff who report to them. This dynamic may contribute to why female bosses in middle management positions experience a high incidence of bullying (Ariza-Montes et al., 2014; Moss, 2016; Veale & Gold, 1998).

POWER AS A BULLYING CONSTRUCT

Power involves the possession of control, authority, or influence over others. It is also known as a legal or official authority, capacity, or right (Merriam-Webster, 2017). A director or coordinator for a unit of case managers uses power to advocate for positions. Licensure boards and credentialing entities have the power to discipline and/or sanction those who they license and certify. Designated leaders of the interprofessional team may use power to sway a treatment plan recommendation and/or decision. When the dynamic of bullying occurs between those individuals in leadership positions and the people who report to them, there is an inherent power differential between roles. As a result, any manifesting situations between bosses and their subordinates present as more intense, with the stakes even higher.

The literature provides various renderings on the different types of power identified across the workplace (Forsyth, 2010; Giang, 2013; Johnson, 2017). Each type is used with distinct intent and purpose. French and Raven’s (1959) original five bases of power set the tone for other models:

1. Legitimate,
2. Reward,
3. Expert,
4. Reference, and
5. Coercive.

Raven added an additional power base in 1965, that of informational power. Figure 1 provides a rendering of the types of power, with Table 3 offering the definitions and concrete examples of each power type.

THE INFLUENCE OF LEADERSHIP STYLES AND MODELS

Those persons who are responsible for hiring employees can easily mistake the qualities of aggression for strength and bullying for leadership. The ability to

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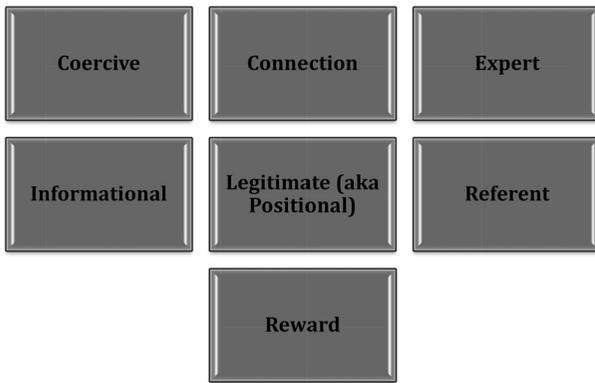


FIGURE 1
Different types of power. Adapted from Forsyth (2010);
Giang (2013).

understand and distinguish bullying from more appropriate and positive leadership styles is vital to promote an empowering culture for employees. Bullies may be viewed as good at gaining power and influence; however, they do not make strong and effective leaders (Myers, 2016). Several workplace leadership styles have been highlighted that set a foundational tone of promoting accountability for performance while counteracting bullying in the workplace.

Authentic Leadership

Use of authentic leadership is known to have a direct and positive impact on job satisfaction, plus lower staff turnover intention (Spence Laschinger et al., 2012). This approach emphasizes building the leader’s legitimacy through the development of honest relationships with staff, which are built on an ethical foundation. Trust is a main construct of this model and is actively engaged among all involved parties (Gardner, Cogliser, Davis, & Dickens, 2011). Considering that nurturing is a prominent character trait across the health and human service disciplines, it is surprising how challenging a skill it can be for many bosses to engage in with staff. The qualities associated with authentic leadership are shown in Box 3.

Congruent Leadership

Congruent leadership is an approach based on the theory of the same name. The concept recognizes clinical nurse leaders who possess values and beliefs that are congruent with their actions (Stanley, 2008, 2017). These practitioners are approachable and clinically skilled; they walk the walk and talk the talk, consistently reflecting professional standards and ethical mores through their daily practice.

Congruent leaders are known to be strong and effective communicators who serve as solid role

TABLE 3
Powers Types: Defined and Demonstrated

Power Type	Definition and Demonstration
Coercive	The manager has the ability/power to control punishments for the staff. <i>Example:</i> A CM disagrees with the supervisor and becomes concerned about receiving a poor performance appraisal, less desirable work assignment, or having vacation time denied.
Connection	A person attains influence by gaining favor or acquaintance with a powerful person. This power type is about networking <i>Example:</i> A CM looking to be more engaged in the local Case Management Society of America chapter brings coffee to a colleague daily. That colleague is incoming president of the local chapter.
Expert	Power/authority is derived from special knowledge and skills the manager has available and which the staff needs. <i>Example:</i> A CM with experience working with clients who have comorbid physical and behavioral health issues is hired as the new case management director for an integrated behavioral health program.
Informational	A person possesses needed or wanted information. This is short-term power that does not influence or build credibility for the person. <i>Example:</i> A program consultant is hired by an organization to evaluate and reorganize department operations.
Legitimate (aka positional)	A person in a higher position has control over those in lower positions in the organization. <i>Example:</i> Power is inherent in the title of the person in authority (manager, director, C-suite).
Reward	The manager has the power to control tangible rewards for the staff. <i>Example:</i> A CM who exceeds the department threshold for outcomes can attend a case management conference with all expenses covered by his or her employer (e.g., registration, travel, paid time off)

Note. CM = case manager. Adapted from Forsyth (2010); Giang (2013).

BOX 3
Qualities Associated With Authentic Leadership

1. *Self-awareness:* An ongoing process of reflection and reexamination by the leader of his or her own strength, weaknesses, and values
2. *Relational transparency:* Open sharing by the leader of his or her own thoughts and beliefs, balanced by a minimization of inappropriate emotions
3. *Balanced processing:* Solicitation by the leader of opposing viewpoints and fair-minded consideration of those viewpoints
4. *Internalized moral perspective:* A positive ethical foundation adhered to by the leader in his or her relationships and decisions that is resistant to outside pressures

Note. Adapted from Walumbwa, Avolio, Gardner, Wernsing, and Peterson (2008).

models for others (Mikaelian & Stanley, 2016). This style of leadership supports the essence of mentoring and succession planning for any organization. In addition, congruent leadership promotes both formal and grassroots leaders, empowering and leveraging those with sincere skill and character. It is an approach that counteracts bullying by design.

Consider the case management leader who sets an atmosphere to reflect mutual trust and respect across roles and department hierarchy. A rule is defined early on across the department, “disagreement is welcome, but disrespect is not.” Staff members are encouraged to openly dialogue with each other to address points of confusion, need for clarification, and/or conflicting viewpoints. The director sets the tone by engaging openly in dialogues with interprofessional colleagues, staff, and clients alike, whether one-on-one conversations, with team members, and those in larger groups. The director seizes every opportunity to model the case management principles of acting with integrity and fidelity with clients and other stakeholders. Honoring the integrity of certification and adhering to the requirements of its use are viewed as paramount for all staff members (Commission for Case Manager Certification, 2015). The underlying values of autonomy, beneficence, nonmaleficence, justice, and fidelity (Case Management Society of America, 2016; Commission for Case Manager Certification, 2015) are applied to direct experiences of staff when discussed during meetings and unit huddles.

Servant Leadership

Servant leadership is a model that has gained increasing popularity over the past decade. The typical hierarchy of employees serving their bosses is reversed so that leaders serve their people (Economy, 2015). Although the term was first coined in the 1970s by Greenleaf (1998), experts identify the concept’s principles originated in the Bible (Coetzer, Bussin, & Geldenhuys, 2017). Through this innovative leadership model, a person’s dedication fosters the ability of others to be their best selves at home, at work, and in their community. The philanthropic characteristics of leadership intent and focus, plus the multidimensional leadership attributes, appeal across many sectors, particularly health care.

Servant leadership’s unique perspective promotes the ability of anyone to serve and lead from any position or role in a family, workplace, or community (Edmonds, 2014). Research about application of the approach identifies four clear competencies in operation:

1. Empowerment,
2. Stewardship,

3. Building relationship, and
4. Compelling vision.
(Coetzer et al., 2017)

Although there have been a number of renderings of servant leadership developed on of the original premise, a series of common fundamental principles and beliefs have been identified and appear in Box 4.

The Social Dominance Orientation Scale

Some individuals have a tendency toward social domination orientation (SDO). This concept is based on the psychology theory of the same name, which refers to those persons who are more likely to have a view of the world as a highly competitive environment of winners and losers. These individuals are attracted to institutions and professions that enhance, if not also reinforce, social hierarchies and tend to discriminate against individuals from lower status groups (Moss, 2016). Health care organizations are notorious for their social hierarchies, with direct relevance in the literature to how their structure impacts bullying. Experts view the bullying dynamic as a reflection of the hierarchal stratification that exists across health care settings. Through these situations and circumstances, C-suite leadership and physicians bully

BOX 4

Servant Leadership Fundamental Practices and Beliefs

Fundamental practices:

1. Every person has value and deserves civility, trust, and respect
2. People can accomplish much when inspired by a purpose beyond themselves

Fundamental beliefs:

3. Clarify and reinforce the need for service to others
Servant leaders educate members of their team through words and actions and encourage their people to set aside self-serving behaviors in favor of serving others.
4. Listen intently and observe closely
Servant leaders really listen to their people and actively solicit their participation, ideas, and feedback. In time, they get to know the worldview of each one of their employees, and they tailor their leadership approach accordingly.
5. Act as selfless mentors
Servant leaders know that by helping guide the people who work for them, they will help their employees learn vital skills to both improve their performance and improve them as people.
6. Demonstrate persistence
Servant leaders realize that one or two conversations may not have the desired change in an employee’s assumptions or mindset. As a result, they are tenacious and invest whatever time it takes to educate and inspire servant leadership practices in their team members.
7. Lovingly hold themselves and others accountable for their commitments
Servant leaders know that no one is perfect and everyone makes mistakes—including themselves. With that in mind, they push for high standards of performance, service quality, and alignment of values throughout the team and hold themselves and their people accountable for performance.

Note. Adapted from Economy (2015); Edmonds (2014).

other clinicians (e.g., nursing, social workers, case managers, pharmacists), nurses bully certified nursing assistances, who, in turn, bully housekeeping and other paraprofessional staff members (Fink-Samnack, 2015; Neckar in Nesbitt, 2012).

Individuals with a high SDO seek to reinforce inequality between groups to sustain their access to resources, primarily power, status, and wealth. In comparison, those individuals who possess a low SDO align importance to cooperation, egalitarianism, and humanitarianism (Moss, 2016). High SDOs evoke an autocratic, top-down leadership style, whereas low SDOs subscribe to a more interprofessional team approach.

Several versions of the questionnaire used with the SDO scale appear across the literature (Ho et al., 2015; Moss, 2016) in both long and short versions. The average is eight questions, with Box 5 presenting one example. Merits exist for organizations to utilize the SDO scale as a screening tool. It can assess those persons who are applying for leadership positions and potentially screen out those with too high an SDO: a dynamic that contributes to a culture of bullying for the hiring organization.

ETHICAL IMPLICATIONS FOR CASE MANAGEMENT

Ethical, if not also legal, concerns can accompany situations that involve bullying in the workplace or the perception of it, whether by a boss or another member of organizational leadership. Case managers can feel pressured by their management to complete job functions that present as outside of their scope of practice, putting them in an untenable situation. These circumstances have become common occurrences, especially

amid emerging new client populations that warrant intervention. Take for example the case manager with no education, training, or experience in behavioral health who is suddenly assigned a population of clients with behavioral health diagnoses. The case manager may have extensive case management experience but only in working with physical illnesses. Clients can easily be put at risk by a case manager who does not possess a clinical understanding of mental illness, psychopathology, and appropriate treatment interventions. In the context of professional case management's ethical tenets (Case Management Society of America, 2016), beneficence (to do good) and non-maleficence (to do no harm) are potentially at risk.

Consider the case manager who is told to engage in practice across state lines without the requisite licensure in that state or jurisdiction. The boss informs the case manager that not completing the requested job function is grounds for insubordination and subsequent termination. Although the practice may be blatantly unethical, if not illegal, the case manager engages in the activity. Fear of unemployment often supersedes fears about practicing against licensure regulations and/or certification requirements.

As challenging as these incidences can be, established guidance exists amid the professional standards and codes that support professional practice. Most, if not all, state licensure boards speak firmly across their laws about the need to practice within the scope of an individual's licensure and/or certification. Nurses have the authority, accountability, and responsibility for nursing practice, to makes decisions and take actions consistent with their obligation to promote health, and to provide optimal care (American Nurses Association, 2015a). Social

BOX 5

Social Dominance Orientation Scale

Instructions:

Show how much you favor or oppose each idea below by selecting a number from 1 to 7 on the scale below. You should work quickly as your first instinct is generally best.

1	2	3	4	5	6	7
Strongly Oppose	Somewhat Oppose	Slightly Oppose	Neutral	Slightly Favor	Somewhat Favor	Strongly Favor

Protrait dominance:

1. An ideal society requires some groups to be on top and others to be on the bottom.
2. Some groups of people are simply inferior to other groups.

Contrait dominance:

3. No one group should dominate in society.
4. Groups at the bottom are just as deserving as groups at the top.

Protrait antiegalitarianism:

5. Group equality should not be our primary goal.
6. It is unjust to try to make groups equal.

Contrait antiegalitarianism:

7. We should do what we can to equalize conditions for different groups.
8. We should work to give all groups an equal chance to succeed.

Note. From Ho et al. (2015); Moss (2016).

workers are directed to adhere to competence as a seminal value, only practicing within their areas of competence (National Association of Social Workers, 2008).

Professional case managers should heed the responsibility to work within the scope of their licensure and/or underlying profession (Case Management Society of America, 2016). Board-certified case managers will practice only within the boundaries of their role or competence, based on their education, skills, and professional experience. Of profound significance is the language including how those who are board-certified “will not misrepresent their competence to their clients” (Commission for Case Manager Certification, 2015, p. 7).

MANAGING THE BULLYING BOSS

Moving forward, what strategies are recommended to effectively deal with bosses and leadership who negate professional integrity by empowering bullying in their organizations? Although the established resources of professional accountability (e.g., regulations, standards, and ethical codes) set guidance in how to practice, the reality of that practice becomes easily muddled in the workplace. Ethical codes are known to guide, rather than prescribe, practice (Unwin & Hogg, 2012). An adult bully who is in a position of power at the workplace, such as in a leadership role, is indiscriminate in who he or she targets. Whether the target is among the strongest or most vulnerable employees, some managers bully subordinates for the sheer pleasure of exercising their power (Carey, 2004).

Legislation

Workplace bullying impacts the quality and safety of health care, plus it is traumatic to targets. However, all readers are reminded of one important fact; bullying in the workplace is not yet illegal. Despite the diligence of professional associations and entities in crafting new standards and guidelines to address bullying and incivility (American Nurses Association, 2015b; American Organization of Nurse Executives & Emergency Nurses Association, 2015; Case Management Society of America, 2016; Commission for Case Manager Certification, 2015), no national legislation is in place to prevent bullying in the workplace. Efforts move forward to advance the model legislation of the Healthy Workplace Bill, which has been discussed in prior articles of this series (Fink-Samnack, 2016). An interactive map providing the current status of state and territories that have taken action to advance the bill appears on the Healthy Workplace Bill website (Healthy Workplace Bill, 2017).

Strategic Guidance

Strategies to manage the bullying boss span a range of recommendations, from seeking support of colleagues and mentors to partnering with human resources (Mueller, 2011; Ryan, 2015; Weinstein, 2007). Other experts come from a stance for targets to engage self-advocacy, beginning with not losing their self-confidence. This is particularly tough to remember amid efforts by the bully to undermine a target’s self-esteem (De Valk, 2015). Another important theme for targets involves working to avoid isolation, which can be a bullying boss’s goal (Falzoi, 2016; Mueller, 2011; Weinstein, 2007). Evidence speaks to the high tendency for targets to ultimately become isolated in the workplace. Colleagues, friends, and family can easily begin to view the target’s bullying claims as exaggerated or outrageous and will pull back any support provided. Over time, targets become lonely and increasingly vulnerable to depression and suicide (Falzoi, 2016).

Mueller (2011) emphasizes the empowerment of targets as “workplace warriors” who take charge of their situation. How each target chooses to deal with his or her unique events is dependent on a variety of factors that transverse the social, emotional, functional, and financial domains. Approaching bullying as a project helps transition targets from the victim role to one of methodical professional. Bullying bosses strive to project their own feelings of incompetence and powerlessness on to the target, something that the target should not allow to occur. Table 4 provides the 10 key steps to Mueller’s model.

Another key strategy involves maintaining documentation on every instance of the bullying experience, both abusive and vicarious abusive in nature (De Valk, 2015; Mueller, 2011; Ryan, 2015; Weinstein, 2007). This documentation becomes especially valuable when dealing with human resources, unemployment compensation, as well as other involved professionals such as mental health professionals and attorneys. In addition, those who witnessed and/or experienced the bullying boss should be asked to document their experiences as well (Ryan, 2015).

Amid the diverse approaches across employers is one common thread; how they embrace the impact of a situation to the organization’s financial bottom line. As a result, the ability to estimate the costs of bullying for the employer can be a powerful strategy to take. The Workplace Bullying Institute (2017b) provides tactical guidance on how to estimate the cost of bullying and what areas should be considered, which is shown in Box 6. Of paramount significance involves calculating the total tab for workplace bullying, which is represented as:

TABLE 4
Workplace Warrior Strategies

Workplace Warrior Strategies	Examples
1. Approach bullying like a work project.	<ul style="list-style-type: none"> • Be methodical in how you behave, perform, document, and strategize. • Take notes after an incident. • Try to stay unemotional.
2. Be a workplace warrior.	<ul style="list-style-type: none"> • Even if you plan to put out feelers for other jobs, dedicate yourself to vanquishing your abuser, not being a victim.
3. Sweat the small stuff.	<ul style="list-style-type: none"> • Document even the smallest incidents, which often become the most important. • Illustrate a pattern of bullying that might not otherwise be apparent.
4. Don't let yourself get isolated.	<ul style="list-style-type: none"> • Pick out someone daily you haven't talked to for a brief, but focused, conversation. • Bullies work hard to alienate targets from their coworkers. Don't let that happen to you.
5. Display self-esteem to broadcast a positive attitude.	<ul style="list-style-type: none"> • Pay attention to how your appearance—such as hair and clothes—is perceived by others. • Make your personal space an oasis of calm and taste.
6. Try to stay in safe spots.	<ul style="list-style-type: none"> • Your abuser is less likely to attack when you are around other supervisors, known allies. • Make a list of those people and places.
7. During a bullying situation, excuse yourself.	<ul style="list-style-type: none"> • Don't make a hasty retreat and/or leave the building. • Instead, tell your abuser that you're late for an appointment with HR or casually excuse yourself to use the restroom.
8. During an attack, try distracting your abuser.	<ul style="list-style-type: none"> • Pick up something physical—as long as it's not a threatening item—such as a critical file that needs the bully's attention or a note. A simple distraction is enough to get him or her to stop.
9. Protect your personal information.	<ul style="list-style-type: none"> • Tell bullies as little as possible about your personal life. Information about you gives them power.
10. Hold your cards close to the vest.	<ul style="list-style-type: none"> • As you're building a case against a bully boss, the less you talk about your story to others at work, the better. Controlling what you say, when you say it, and to whom needs to be part of your overall, well-organized strategy.

Note. Adapted from Mueller (2011).

Turnover + Opportunity Lost + Absenteeism + Presenteeism + Legal Defense Cost + Dispute Resolution + Trial Costs + Settlement Costs + Workers Compensation/Disability Fraud Investigation = The Routine Cost of Allowing Bullies to Harm Others With Impunity. (Workplace Bullying Institute, 2017b)

There is tremendous diversity surrounding the value of engaging human resources (HR) in addressing bullying, if not the bullying boss. However, a positive and proactive role can be served by HR's involvement. Human resources can engage in proactive

BOX 6
Estimating the Costs of Bullying

- *Employee turnover*: Estimate the cost by multiplying the combined salaries of departed workers by 1.5. (e.g., for a person who earned a \$50,000 salary, the recruit and replace expenses are \$75,000).
- *Absenteeism and presenteeism*: Estimate the number and hours per day targets miss work to avoid confrontation with the bully.
 - For *absenteeism*, multiply hours away from the employer by the hourly rate. For salaried exempt workers, divide the annual salary by 2,020 to find the hourly pay rate.
 - *Presenteeism* refers to employees coming to work sick, which can be tough to know. Their presence threatens everyone with contagion from viruses and other bugs. Presenteeism is the best rationale for employers paying sick people to stay home and get healthy.
 - It can also be considered the trend of bullied workers not being able to find another job elsewhere with equivalent pay. As a result, they stay, show up on a daily basis, but they are present only in body, not spirit. They are disgruntled, disgusted, and desperate (the "3-D's") to be somewhere else.
 - The *presenteeism* cost estimate method counts the number of "3-D" employees, their hourly wage, and the number of hours worked during the entire bullying episode and then halve that value. That number represents the paid wages lost to the employer by paying workers rendered unproductive by the bullying.
- *Litigation and settlements*: A safe estimate for an organization is approximately \$30,000 per lawsuit. If the case is filed in court, the number should be increased to \$60,000.
- *Workers compensation and disability insurance claims*: Although tough to know what this number would be, a call to a firm that manages disability claims can provide a more accurate number.

Note. From Workplace Bullying Institute (2017b).

hiring practices that involve tools, such as the SDO scale, to better assess leadership candidates for bullying traits. Supervisors should be rewarded by their employer for developing high performers as opposed to undermining these members of the staff (e.g., fiscal incentives, personal time off). Those supervisors and leaders who score higher on the SDO scale can be incentivized to protect, support, and promote their high-quality performers as opposed to being threatened by them. Supervisor performance appraisals should acknowledge the value of developing and elevating top talent for the organization (Moss, 2016). Figure 2 provides a generic summary of strategies for case managers to engage in when dealing with a bullying boss.

ONE MORE LAYER OF THE BULLYING ONION TO PEEL

The multifaceted dynamics of workplace bullying and violence in health care have been addressed through the first three articles of this series. Although another dynamic is yet to be examined: When bullying is an extension of a more pervasive organizational culture that seeks to enable the disruptive bullying behaviors more than negate them. The intense challenge of managing an organizational culture of bullying in health care is just emerging as a key theme in

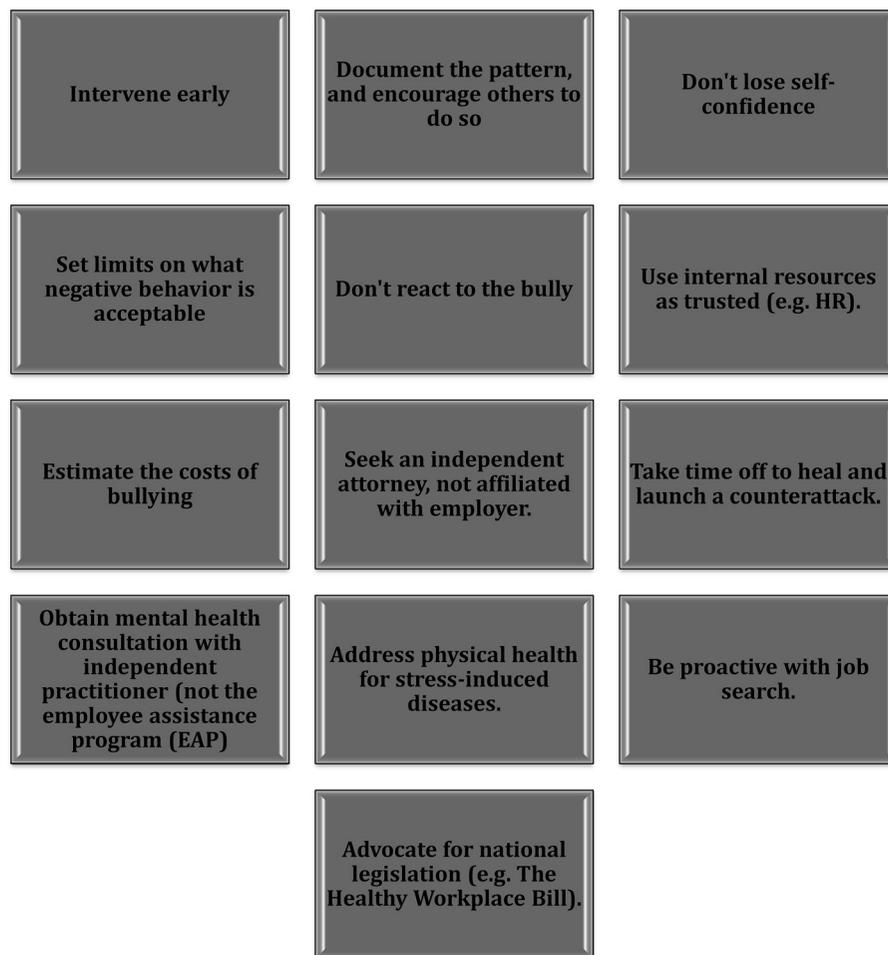


FIGURE 2

How to deal with a bully boss. Adapted from De Valk (2015); Ryan (2015); Smith (2013); Workplace Bullying Institute (2017a).

the literature. Efforts to advance organizational policies that will address the dynamic of bullying in the workplace are a necessity. More than 60% of organizations have no policy in place (Morgan, 2014) to manage these situations, with further work yet to be done. The topic, and its impact for professional case management, warrants more intense scrutiny from this author's interprofessional lens.

Organizations must first acknowledge that bullying exists in their space. Only then can they commit to creating antibullying policies plus offering preventive measures to employees against future occurrences (Morgan, 2014). However, this is far easier said than done. This topic will be thoroughly scrutinized and addressed in Part 4 of the "New Age of Bullying and Violence in Health Care: Managing the Culture of Organizational Bullying."

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The ANCC's accreditation status of Lippincott Professional Development refers only to its continuing nursing educational activities and does not imply Commission on Accreditation approval or endorsement of any commercial product.

Registration Deadline for Nurses: December 31, 2019

Disclosure Statement:

The authors and planners have disclosed that they have no financial relationship related to this article.

Payment and Discounts:

- The registration fee for this test is \$17.95
- CMSA members can save 25% on all CE activities from *Professional Case Management!* Contact your CMSA representative to obtain the discount code to use when payment for the CE is requested.

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