

Early intervention and support for people experiencing bullying in the workplace

Mary is a 46 year old emergency department Nurse Unit Manager (NUM), reporting to her immediate supervisor Alice (Nurse Co-ordinator/Supervisor). Having held this role for 10 years, she has always loved nursing, been confident in her skills, particularly enjoying the highly complex mental challenges of being the Nurse Unit Manager.

Mary is married with four children aged between 5 and 12. Her husband is an accountant and works for a large company in the city of Sydney about half an hour from their suburb. She is involved in a netball team and plays every weekend as well as coaching one of her daughter's teams once and week.

Mary has worked hard to earn the respect of her colleagues. Her nursing team have often commented that they appreciate her supportive management style and the ward doctors have commended her on the high standard of patient care she delivers. In addition to managing staff and patients Mary oversees the budget for the nurses and equipment in the department and reports monthly to her supervisor Alice, who was appointed to the position three months ago.

Mary had enjoyed an excellent working relationship with Alice's predecessor. However, since Alice started things have changed, and not for the better. Mary feels Alice constantly challenges her decisions concerning her staff management, nurse education and the standard of patient care. Often she will question her in front of staff and patients. She recently interrupted her when she was giving a staff member instructions, directly contradicting her. Budgets are tight and at meetings she will single her out for criticism about her spending, insinuating that she is indecisive and making poor decisions. This constant pressure has started to make Mary second guess her ability to manage her staff and she is beginning to question her decisions and her competence to care for patients.

Never having been a big drinker, she has started drinking a couple of glasses of wine each night to destress. While her husband has noticed the change and asked if there is anything wrong, she is embarrassed and doesn't want to confide in him. She used to love going to work but now dreads the alarm going off in the morning on a work day. Mary has also missed quite a few netball games and has not been to some recent functions with her friends.

Her recent performance appraisal meeting with Alice has confirmed her worst fears. She gave her a poor rating and implied that she needed to 'lift her game' or she could no longer hold her position in her department.

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She left the meeting feeling powerless and angry, knowing the old Mary would have argued that her performance did not deserve such a rating but her confidence is so low she is now unsure of her ability to do the job to the standard she expects of herself.

Mary is fearful of going to work and is drinking more to help her switch off. She is becoming short tempered with her husband and children. Her husband keeps asking what's wrong, but Mary fobs him off with, "it's just work stuff".

The poor performance appraisal feels like the final straw. She has been actively avoiding Alice, but when she does approach her, she is fearful and anxious, to a point of feeling nauseous.

Mary is feeling low in mood and so stressed she is not sleeping. At her husband's insistence she makes an appointment with her family General Practitioner to ask for sleeping tablets.

At the appointment the GP asks if there's anything in particular on her mind which might be impacting her sleep. Her bottom lip starts to quiver and she opens up and tells the GP what's been happening at work.

This webinar has been made possible through funding provided by Safe Work Australia. Learn more about Safe Work Australia by visiting www.swa.gov.au

