



SA Health

# Preventing and responding to workplace bullying, harassment and discrimination

A guide for supervisors, managers  
and trainee medical officers

# FOREWORD



Supporting trainee medical officers and prevocational trainee managers to prevent and respond to workplace bullying, harassment and discrimination will play an important role in improving our workplace culture.

It is saddening that our medical officers continue to experience bullying, harassment and discrimination. The intent of this document is to provide guidance and resources to those who are actively managing or being subjected to bullying, harassment and discrimination.

I would like to acknowledge and thank trainee medical officers and prevocational trainee managers on the work achieved thus far on the prevention and response to workplace bullying, harassment and discrimination.

It is vital to report this behaviour whenever and wherever it occurs and manage it in line with best practice standards to achieve optimal care for our medical officers and advocacy for the wellbeing of the medical workforce as a whole.

**Dr. Michael Cusack**

Chief Medical Officer  
SA Health



It is both ironic and tragic that some medical workplaces, with their emphasis on caring and support of healing and wholeness, also have a cultural undercurrent of bullying, harassment and discrimination. None of this is acceptable. None of it is right. It is up to all of us to behave with respect and courtesy at all times. Unfortunately, our junior doctors sometimes bear the brunt of bullying behaviour.

This guide contains much wisdom and outlines details on practical matters. One helpful aspect of this guide is its recognition that teaching, providing feedback and performance management can at times feel intimidating. When done well, these processes develop and support you in your professional journey.

I encourage you all to read this guide with care.

Use the resources and supports available to you to call out bullying, harassment or discrimination when it arises. Use the structures and processes available to you to both protect yourself and those who come after you.

**Professor Kevin Forsyth**

Presiding Member  
SA MET Health Advisory Council

# TABLE OF CONTENTS

Prevalence and cost of bullying, harassment and discrimination in medicine .....	2
What <b>is</b> bullying, harassment and discrimination? .....	3
What <b>is not</b> bullying, harassment and discrimination? .....	4
Work stressors .....	5
Your rights .....	6
Preventing bullying, harassment and discrimination .....	7
How to respond to bullying, harassment and discrimination? .....	9
Reporting .....	12
Additional support services .....	14
References .....	16
<b>Appendix A</b>	
Script examples: Describe, Express, Specify, Consequences (DESC) - to assist addressing someone who is bullying. ....	17
<b>Appendix B</b>	
Template for documenting incidents of workplace bullying, harassment and/or discrimination.....	18
<b>Appendix C</b>	
Template for documenting discussions of workplace bullying, harassment and/or discrimination and associated actions .....	22

# PREVALENCE AND COST OF BULLYING, HARASSMENT AND DISCRIMINATION IN MEDICINE

The 2021 Medical Training Survey (MTS) identified that one in five doctors in training in Australia have experienced or witnessed bullying, harassment or discrimination in the past 12 months.

In South Australia, the 2021 MTS indicated 22% of all trainees have experienced bullying, harassment and/or discrimination and 34% experienced and/or witnessed this behaviour. Of these trainees, 34% reported these incidents and 44% indicated the reports had been followed up and they knew how to access support for their stress and other psychological distress. Senior medical staff were responsible for 53% of these cases and 33% of cases were from colleagues of doctors in training.

This guide has been developed to support all medical practitioners, including junior doctors, managers and supervisors to identify what bullying, harassment and discrimination in the workplace looks like, how to prevent bullying, harassment and discrimination in the workplace and how to report and manage any instances of bullying, harassment and discrimination in the workplace.

***Within South Australian hospitals, bullying, harassment and fatigue has cost taxpayers almost \$20 million in more than 20,000 lost days of work between 2013/14 to 2017/18.<sup>1</sup>***



# WHAT IS BULLYING, HARASSMENT AND DISCRIMINATION?

## What is workplace bullying?

Workplace bullying is repeated, unreasonable and inappropriate behaviour directed towards a worker or a group of workers that creates a risk to health and safety. This includes behaviour expressed via email, text messaging, social media, and in person. However, feedback and counselling, which is constructive and appropriate is not considered bullying, as it is intended to improve behaviour and performance.

## Bullying behaviour

Repeated behaviour is persistent in nature and can involve a range of behaviours over time.

Unreasonable behaviour is behaviour that a reasonable person, having considered the circumstances, would see as unreasonable, including behaviour that is victimising, humiliating, intimidating or threatening.

Bullying behaviour, which may be intentional or unintentional, may include:

- abusive, insulting or offensive language and comments
- unjustified criticism or complaints
- deliberately excluding someone from workplace activities
- withholding information that is vital for effective work performance
- setting unreasonable timelines or constantly changing deadlines
- setting tasks that are unreasonably below or beyond a person's skill level
- denying access to information, supervision, consultation or resources to the detriment of the worker
- spreading misinformation or malicious rumours
- changing work arrangements such as rosters and leave to deliberately inconvenience a particular worker or workers.

A single incident of unreasonable behaviour is not considered to be workplace bullying however it may have the potential to escalate and should not be ignored. If workplace bullying behaviour involves violence, it should be reported to the police.

## Discrimination

Discrimination occurs when someone is treated less favourably than others because they have a particular characteristic or belong to a particular group of people.

It includes:

- **direct discrimination**  
such as refusing to hire a suitably qualified person because of their racial background, and
- **indirect discrimination**  
such as an unreasonable rule or policy which, while it may apply to everyone, disadvantages some people because of a personal characteristic they share.

## Sexual harassment

Sexual harassment is associated with unwelcome sexual advance, unwelcome request for sexual favours or other unwelcome conduct of a sexual nature that makes a person feel offended, humiliated and/or intimidated, where a reasonable person would anticipate that reaction in the circumstances.

# WHAT IS NOT BULLYING, HARASSMENT AND DISCRIMINATION?

## What is not workplace bullying?

Feedback and counselling, which is constructive and appropriate is not considered bullying, as it is intended to improve behaviour and performance.

Legitimate management action that is carried out in a reasonable way is not bullying or harassment.

A manager can make decisions about poor performance, take disciplinary action and direct and control the way work is carried out.

Managers can give their staff honest appraisal of performance or work-related behaviour, including constructive feedback, but these conversations should be handled in a reasonable, professional and sensitive way. Sometimes people may feel unsatisfied or undervalued at work. However, having grievances with organisational or management practices does not mean they are being bullied or harassed.

## Reasonable management action

Reasonable management action carried out in a reasonable manner does not constitute bullying.

Reasonable management action may include:

- performance management processes
- disciplinary action for misconduct
- informing a worker about unsatisfactory work performance or inappropriate work behaviour
- asking a worker to perform reasonable duties in keeping with their job
- maintaining reasonable workplace goals and standards.

However, these actions must be conducted in a reasonable manner. If they are not, they could still be bullying.<sup>2</sup>

# WORK STRESSORS

There is a risk of workplace bullying wherever workers have contact with other people, including co-workers, supervisors, clients and other visitors to the workplace. There may not be obvious signs of bullying at the workplace, but this does not mean it is not occurring. Workplace bullying is best dealt with by taking steps to prevent it before it creates a risk to health and safety.

All employees, in particular medical officers are vulnerable to physical and psychological stresses. Add in long working hours in busy and sometimes unfamiliar working environments and the responsibilities of managing patients can lead to mental health and stress-related problems.

The challenge for managers and supervisors is to:

- create a positive and supportive work environment, and in medical education and training, a conducive learning environment to support the development of healthy and competent doctors
- promote doctor health and wellbeing during training years, and beyond.

Research indicates that there are a number of factors that may increase the risk of workplace bullying occurring. The following characteristics (Table 1) could help alert to potential work health and safety risks in the workplace.

**Table 1 - Guide to preventing and responding to workplace bullying 2016<sup>3</sup>**

**Presence of work stressors:**

- high job demands
- limited job control
- organisational change, such as restructuring or significant technological change
- role conflict and ambiguity
- job insecurity
- an acceptance of unreasonable workplace behaviours or lack of behavioural standards
- unreasonable expectations of employees.

**Systems of work:**

- lack of resources
- lack of training
- inappropriate work scheduling, shift work and poorly designed rostering
- unreasonable performance measures or timeframes.

**Poor workplace relationships:**

- poor communication
- isolation
- low levels of support
- work group hostility.

# YOUR RIGHTS

You have the right to be in a safe workplace free from bullying, harassment and/or discrimination and we all have a responsibility to help create a positive, safe workplace. If you see someone in your workplace experiencing bullying, harassment and/or discrimination, you can support them by advising them about the steps they can take to solve it.

In medicine, there can be a culture of passivity or inaction on bullying. It is important that we all work together to address bullying and not accept bullying happening to other people.

We need to support colleagues who are experiencing bullying and work together to change a culture that allows bullying to continue.

Respectful behaviour describes behaviours, communications and actions that demonstrate courtesy and collegiality. It is consistent, fair treatment in a non-discriminatory manner.

***‘The standard you walk past is the standard you accept. If you become aware of an individual degrading another, then show moral courage and take a stand against it.’***

**Lieutenant General David Morrison<sup>4</sup>**



# PREVENTING BULLYING, HARASSMENT AND DISCRIMINATION

Supervisors, managers or employers may worry that giving feedback or managing performance could be deemed as bullying. However, feedback, performance management or teaching in an appropriate manner is not bullying. Occasional differences of opinion or isolated problems are not workplace bullying, provided everyone involved has behaved in a professional and respectful manner.

Remember to remain professional and behave in a respectful manner.

## What is respectful behaviour?

Respectful behaviour describes behaviours, communications and actions that demonstrate courtesy and collegiality. It is consistent, fair treatment in a non-discriminatory manner. Table 2 outlines the key themes to behaving respectfully.

**Table 2 - Three key themes to behaving respectfully**

<b>1. Respecting differences</b>	Acknowledging and valuing differences in colleagues, whether this is their culture, beliefs, sexuality, values, ideas or characteristics like gender or age.
<b>2. Valuing others</b>	Creating a supportive and collaborative team environment where colleagues feel valued and their professional skills and attributes are acknowledged.
<b>3. Positive communication</b>	Engaging in open, clear and honest communication, which is two-way and therefore involves listening as well as talking.

# PREVENTING BULLYING, HARASSMENT AND DISCRIMINATION

## What is disrespectful behaviour?

Disrespectful behaviour will not be tolerated. Disrespectful behaviour may include, but is not limited to, shouting, personal insults, intimidation, isolating or ostracising, undermining or humiliating others.

SA Health has a [Respectful Behaviour \(including management of bullying and harassment\) Policy](#)<sup>5</sup> and compliance is mandatory.

The respectful behaviour policy requires staff to:

- act respectfully
- actively encourage respectful behaviour
- hold each other accountable for behaviour at work
- not tolerate disrespectful behaviour and actively challenge any disrespectful behaviour that is witnessed
- use the [Addressing Disrespectful Behaviour \(including bullying and harassment\) Guideline](#)<sup>6</sup> to respond promptly and constructively to incidents of disrespectful behaviour
- define and reinforce acceptable behaviours in the workplace and for local managers to address behaviours that are not respectful in a prompt and constructive manner.

All parties identified within the scope of this policy will be responsible for:

- promoting respectful behaviour
- demonstrating respectful behaviours in the workplace
- being accountable for their own behaviour
- promoting a culture of respect, integrity and accountability
- speaking out and not accepting disrespectful behaviour.

All managers and supervisors should:

- hold staff accountable for their behaviour and act promptly and decisively
- deal constructively with behaviours that are not respectful using the *Addressing Disrespectful Behaviour (including bullying and harassment) Guideline*
- ensure respectful behaviours are integrated into performance review and development processes and plans
- discuss respectful behaviour with their staff and help define respectful behaviour in the workplace context
- make staff aware of the *Addressing Disrespectful Behaviour (including bullying and harassment) Guideline* and the avenues to resolve instances of disrespectful behaviour in the workplace, and
- ensure new staff are provided with a copy of the [Respectful Behaviour \(including management of bullying and harassment\) Policy](#) and the *Addressing Disrespectful Behaviour (including bullying and harassment) Guideline* during induction.

# HOW TO RESPOND TO BULLYING, HARASSMENT AND DISCRIMINATION

## Taking control

### What can I do if I am being bullied?

Bullying can take place within a number of relationships; manager/supervisor and employee, between staff members and can be either downwards directed from managers to employees or upwards directed from employees to managers.

If you think you are being bullied, it is important to differentiate between whether the person is providing feedback or the person is demonstrating disrespectful or other unacceptable behaviour. Feedback and counselling, which is constructive and appropriate is not considered bullying, as it is intended to improve behaviour and performance. However, if the feedback is delivered in an inappropriate manner, then this may constitute bullying.

If you are being bullied, there are a number of actions you can choose to take:

- If there is threat of physical violence, remove yourself from the situation and seek assistance from management or a Human Resources (HR) representative.
- Speak with a colleague. It is always a good idea to seek support and viewpoints from trusted colleagues, who may be within your work area or outside of it.
- Seek advice from your Medical Education Officer or Director of Clinical Training.
- You have a choice on how you manage the situation, however you are encouraged to report all instances or complaints related to workplace bullying, harassment, sexual harassment or victimisation promptly so that appropriate action can be taken. Within SA Health all complaints received are treated in a confidential, sensitive and fair manner, bearing in mind that in some circumstances, SA Health may have an obligation to report the matter to external agencies, such as SAPOL.<sup>6</sup>

***“If I do nothing, what might be the worst thing that happens?  
If I do speak up, what might be the worst thing that will happen?  
Will they stop their behaviour? I’m moving to another area in  
a week, so I will just put up with this for now.”***

# HOW TO RESPOND TO BULLYING, HARASSMENT AND DISCRIMINATION

## Key points

- Understand that what is happening is not acceptable.
- Seek support from colleagues, family and friends. Being bullied or harassed is a very stressful time and you need support from others to manage.
- Check that the behaviours you are experiencing are actually bullying (repeated and unreasonable), sexual harassment or discrimination.
- Make diary notes of your experiences. Use a paper-based diary and record details of what is happening, when it is happening (dates and times) and names of any witnesses.
- If you are confident and feel you able to speak assertively with the perpetrator, do so by naming the behaviour and ask that they stop the behaviour. Utilise the DESC script, found in Appendix A.
- Take your diary notes with you to help you clearly and confidently explain exactly what has occurred. If you speak with the perpetrator, ensure you speak assertively and be confident in your own judgement and ability.
- Take appropriate action. This may include reporting the incident to a manager (their managers or yours), approaching the union, or any other person who may be able to assist you with the complaint (e.g. Director of Clinical Training or Medical Education Officer, Head of Unit, Divisional Director, Director of Medical Services).
- Speak to other staff members who may have left the area but have worked with the person, to see if they have experienced similar issues. They may be able to provide you ideas on how they managed the situation or support you through yours.
- If you feel uncomfortable working alone with the person, where possible avoid being alone with them. This may be difficult in some circumstances, however, with the support of management you can avoid working alone with them.
- Contact the organisational psychologist or the Employee Assistance Program (EAP) provider to discuss different options. When you contact them, have an idea of what you would like to talk about and what you hope to achieve. The EAP can emotionally support you through this difficult time by listening, providing advice, and even helping you to practice talking with the person by role playing conversations.
- If appropriate, raise the incident in SA Health Safety Learning System (SLS).

# HOW TO RESPOND TO BULLYING, HARASSMENT AND DISCRIMINATION

## What if I am accused of bullying?

For a person accused of bullying it can be a stressful time. It is important to understand that workplace bullying is, that is, repeated behaviour that could be direct, such as verbal abuse or threats of physical violence, or indirect, such as inappropriate comments, continuous criticism that is not accurate, exclusion or isolation, or making embarrassing, unrealistic or degrading demands.

Where bullying involves assault or threats of assault, it may become a police matter.

When reflecting about bullying, it is important to understand the difference between providing feedback and managing performance, compared with staff being bullied or harassed. Feedback or counselling, provided appropriately and constructively by a supervisor, are not considered bullying. However, feedback or counselling delivered in an inappropriate manner are considered bullying. Feedback and counselling are intended to improve performance and work standards.

## Is it possible that your behaviour could be considered to be bullying?

- If another person was to witness my behaviour, would they consider it offensive, humiliating, intimidating or threatening?
- Is it possible that my tone or volume of my voice or my body language is perceived to be offensive, humiliating, intimidating or threatening?
- Could my communication or management style ever be perceived as offensive, humiliating, intimidating or threatening by someone else?
- When I feel angry, stressed or anxious, could my feelings be exhibited in a way that others may find offensive, humiliating, intimidating or threatening?
- Could the way I provide feedback on people's work, or the way I monitor their performance be perceived as being overly critical or excessive by someone else?
- Could targets or deadlines I have set be perceived as unreasonable?
- Have I excluded a particular worker from essential information or meetings?
- Is it possible that my behaviour towards the complainant has been repeated?
- Do I have any records of previous interactions I have had with the complainant?
- Was the behaviour perceived as bullying part of the normal disciplinary or performance feedback procedure?
- Have I ever been accused of bullying in the past?
- Can I resolve the situation by speaking to the person directly?

# REPORTING

An SA Health worker, who believes they have been subjected to unacceptable behaviour, that is covered by the policy directive, may choose to deal with it externally and/or internally, informally (Table 3) and/or formally (Table 4).

**Table 3 - Informal Processes**

**Option 1: Local Resolution / De-escalation between parties involved**

If you feel comfortable and safe, approach the person and ask them to stop the bullying behaviour.

Access support from the Employee Assistance Program (EAP), which is a confidential, external counselling service, to help coach you through having the conversation with your colleague.

Doctors' Health SA can also provide support during this time.

Use the DESC script (Appendix 1) to help prompt you when speaking with your colleague.

**Option 2: Informal Resolution (early intervention) involving management or HR**

If you prefer not to address the matter directly with your colleague, or your attempt to do so was not successful, you have the option of raising the matter with their manager. You may approach their manager directly or via your manager or HR consultant.

The supervisor, DCT or EDMS may have an informal discussion with the employee concerned to raise awareness about their behaviour.

**Option 3: Facilitated discussion involving all parties**

Managers may make an assessment to bring all parties together to help resolve the issue.. In this discussion, the focus should be on the manager, to make clear the impacts of the alleged bullying behaviour and expectations of staff regarding respectful behaviours and communication, rather than blaming individuals.

**Option 4: External mediation**

In some situations, it may be more appropriate to engage an accredited independent mediator to facilitate the conversation between all parties.

## Reporting on the Safety Learning System (SLS)

Report the incident/s on the [Safety Learning System \(SLS\) reporting system](#).

SLS is used to record and monitor work health and safety incidents from a health and safety perspective. SLS is not a channel for formal investigation or recording of disciplinary action.

## Record keeping and documenting

No matter what you choose to do, it is important for you to document the incident/s. Do this in a paper-based diary (an electronic diary can be changed or deleted) where you detail the dates, times and actions or language used during the incident. Also include the names of others who may have witnessed the incident/s.

Refer to Appendix B and C for a template for documenting incidents of bullying.

**Table 4 - Formal Complaint Processes**

### **Option 5: Formal complaint**

A formal complaint may be made and is usually for one of the following reasons:

- the behaviour continues despite an agreed resolution.
- the complainant thinks the allegations are of such a nature that the complaint should be handled formally.

To proceed with a formal investigation, refer to Section 4-1-7 of the SA Health (Health Care Act) Human Resources Manual (Managing unsatisfactory performance, discipline and termination).

A formal complaint must be made in writing addressed to the relevant Executive / Director and include the following:

- the name/s of the alleged perpetrator/s.
- a description of the alleged bullying behaviour and the reasons why the complainant considers the behaviour to be disrespectful.
- an explanation as to why the complainant believes the informal process was not or would not be effective.
- the names of possible witnesses and what event and/or behaviours they may have observed.

Formal processes and investigation status must be recorded i.e. must have meeting notes taken.

Whilst this document and the processes outlined refer to SA Health employees, those working or attending SA Health sites for educational purposes from external organisations / agencies i.e. medical students from universities or contractors linked to registered training organisations, can still follow these processes.

Please ensure you also refer to the external organisations' / agencies' policies and processes for preventing and responding to disrespectful behaviours (including bullying and harassment).

# ADDITIONAL SUPPORT SERVICES

## After the report of bullying, harassment or discrimination

As part of the [Addressing Disrespectful Behaviour \(including bullying and harassment\) Guideline \(2022\)](#), when a manager or supervisor becomes aware of disrespectful or other unacceptable interactions in the workplace that may impact the health and wellbeing of others, they have an obligation to promptly address these interactions and / or report the matter to a person more appropriate to effectively deal with the concerns.<sup>6</sup>

This may include an informal discussion with the person concerned or may involve formal action. In each instance discussions should be documented via meeting minutes with agreed actions and follow-up timeframes.

Appendix C provides an example of a template that could be used by managers, supervisors and complainants to record discussions, document actions and agreed follow-up timeframes.

### SA Health Stoptline

SA Health has a whistle-blower program that empowers staff to play an active role in the elimination of improper conduct in the workplace. This is an independent and confidential service to receive information relating to improper conduct or unethical behaviour. This service is available to all SA Health staff. For more information, visit <https://sahealth.stoplinereport.com>

### SA Health Employee Assistance Program

The Employee Assistance Program is designed to assist all employees address work related or personal issues that may affect their personal wellbeing, work performance, their health or safety. For more information, visit the [SA Health intranet Employee Assistance Program page](#)

### SA Health Respectful Behaviour

All staff have a responsibility to demonstrate, promote and model respectful behaviour. The [Respectful Behaviour Policy](#) describes behaviours, communications and actions that demonstrate courtesy and collegiality. For more information, visit the [SA Health Intranet Respectful Behaviour page](#)

### Safe Work Australia

Safe Work Australia is an Australian government statutory body established in 2008 to develop national policy relating to work health and safety and workers' compensation. They work with organisations and people who influence good work health and safety practice which includes industry groups and representatives, unions, work health and safety professionals, the academic and research community, business leaders, employers, managers and supervisors and governments. For more information, visit [safeworkaustralia.gov.au/safety-topic/hazards/bullying](https://safeworkaustralia.gov.au/safety-topic/hazards/bullying)

### Fair Work Commission

The Commission is Australia's national workplace relations tribunal. The Commission's powers and functions include dealing with anti-bullying claims. For more information, visit [fwc.gov.au/issues-we-help/bullying](https://fwc.gov.au/issues-we-help/bullying)

## Doctors Health SA

Doctors Health SA is a not-for-profit, independent and profession-controlled organisation dedicated to improving the health of doctors and medical students. For more information, visit [doctorshealthsa.com.au](https://doctorshealthsa.com.au)

## Beyond Blue

Beyond Blue provides information and support to help everyone in Australia achieve their best possible mental health. For more information, visit [beyondblue.org.au](https://beyondblue.org.au)

## AMACDT x AMSA Mental Health Support Traffic Light Guide

The Australian Medical Association Council of Doctors in Training (AMACDT) in partnership with the Australian Medical Students' Association (AMSA) have developed a Traffic Light Guide for students and junior doctors. The guide provides a list of support services available and recommendations around which service to access depending on the level of stress, mental illness or acute need faced by the individual. For more information, visit the [AMA website](#).

## SA Health Policies

For more information, visit the [SA Health Intranet Policies and Guidelines page](#)

## Code of Ethics for the South Australian Public Sector

For more information, visit [publicsector.sa.gov.au/hr-and-policy-support/ethical-codes/code-of-ethics](https://publicsector.sa.gov.au/hr-and-policy-support/ethical-codes/code-of-ethics)

## Cultural evolution pathway

For more information, visit [here](#) for more details.

## SA MET Responding to Concerns Guideline

The SA MET Unit Process for Responding to Concerns Guideline describes how to manage a concern raised about the education and training of Trainee Medical Officers (TMOs) in South Australia outside of the scheduled accreditation process. Click [here](#) for more details.

## Relevant Legislation

### Anti-discrimination legislation

e.g. *Age Discrimination Act 2004 (Cth)*; *Disability Discrimination Act 1992 (Cth)*; *Equal Opportunity Act 1984 (SA)*; *Fair Work Act 1994 (SA)*; *Human Rights and Equal Opportunity Commission Act 1986 (Cth)*; and *Sex Discrimination Act 1984 (Cth)*.

*Health Practitioner Regulation National Law (South Australia) Act 2010*

### Work health and safety legislation

e.g. *Return to Work Act 2014 (SA)* and *Return to Work Regulations 2015 (SA)* and the *Work Health and Safety Act 2012 (SA)* and *Work Health and Safety Regulations 2012 (SA)*.

### Legislation with specific application to the Public Sector:

*Public Interest Disclosure Act 2018 (SA)*; *Public Sector Act 2009 (SA)* and *Public Sector Regulations 2010*; *Public Sector (Honesty and Accountability) Act 1995* and the *Volunteers Protection Act (2001) (SA)*.

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# Appendix A

## Describe, Express, Specify, Consequences (DESC) script examples

The DESC (Describe, Express, Specify, Consequences) scripts below have been created to assist those who would like to address someone who is bullying them.

*\*When describing the consequences of action, ensure that you do not suggest something that you are either not willing to do or are unable to do e.g. quit your job or threaten them with action that is also unprofessional or bullying.*

Example 1	
<b>Describe</b>	When you swear and threaten me in front of the patient, like you have just done while we were examining Mr Smith.
<b>Express</b>	It made me feel uncomfortable and upset. I find it difficult to continue examining the patient and I believe that the things you are saying affect the patient's confidence in my abilities. This behaviour is bullying.
<b>Specify (the desired outcome)</b>	I am asking you to stop this behaviour and always treat me with respect.
<b>Consequences</b>	If you choose to continue with this behaviour, I will make a formal complaint.

Example 2	
<b>Describe</b>	The continuous belittling of me and prevention of me accessing learning opportunities.
<b>Express</b>	This makes me feel uncomfortable working with you. It upsets me and is stopping me from improving my professional skills. This is bullying and is unprofessional behaviour.
<b>Specify (the desired outcome)</b>	I am asking you to stop this behaviour and always treat me with respect, and stop preventing me from accessing learning opportunities.
<b>Consequences</b>	By stopping your behaviour, we will be able to work together and achieve better outcomes for our patients.

Example 3	
<b>Describe</b>	I feel very uncomfortable when you stand so close to me, try to touch me and bring me gifts. I believe this is sexual harassment.
<b>Express</b>	I do not like this behaviour and as a result I feel very uneasy working here with you.
<b>Specify (the desired outcome)</b>	I am asking that you stop this behaviour and treat me as a professional colleague.
<b>Consequences</b>	If this behaviour does not stop, I will be reporting it to the director.

Example 4	
<b>Describe</b>	When you say all Aboriginal people go on 'walk about' and 'can't be trusted', I find that very offensive and to be racial discrimination.
<b>Express</b>	I will not accept any form of racial discrimination.
<b>Specify (the desired outcome)</b>	You will stop being racist, treat everyone fairly and act in a professional manner.
<b>Consequences</b>	By treating everyone equally, we will achieve better outcomes within our workplace and for our patients.

# Appendix B

## Template for documenting incidents of workplace bullying, harassment and/or discrimination

Please refer to the [SA Health Policies on Respectful Behaviour and Prevention and Management of Workplace Bullying and Harassment Policy Directives](#).

The template below is an example of how an employee could document workplace bullying, harassment and/or discrimination. It is not intended to be used in the formal complaints process, rather a document to assist employees to record the facts of any incidents.

Your name:
Date, time and location of incident/s:
Names of alleged perpetrator/s:
Name/s and contact details of witness/es <b>Seek permission from witness prior to recording name/s and contact details.</b>

## Personal Statement

**Describe the bullying and harassment incident in detail. Include details about:**

- **behaviour/s**
- **word/s used**
- **tone**
- **actions of the alleged perpetrator.**

Actions taken by me:

**Describe what actions you took at the time of the incident.**

Impact on me:

**Describe how this incident has impacted on you e.g. humiliated, intimidated, affected mental health.**

Evidence attached:

**Attach any supporting documents such as emails, social media posts or handwritten notes and list them in the space below.**

Signature: .....

Date: .....

# Appendix C

## Template for documenting discussions of workplace bullying, harassment and/or discrimination and associated actions

Please refer to the [SA Health Policies on Respectful Behaviour and Prevention and Management of Workplace Bullying and Harassment Policy Directives](#).

The template below is an example of how a manager / supervisor and employee could document reports of workplace bullying, harassment and/or discrimination. It is intended to be used in the formal complaints process, to document discussions and associated actions.

### Record of Meeting

Complainant's name:
Meeting convened by:
Notes taken by:
Purpose of meeting:
Details about the incident/s:

Actions agreed to:

Follow-up (include expected timeframe):

Involvement of HR     ☐ Yes     ☐ No

**Signed:**

Employee .....

Date .....

Manager / Supervisor .....

Date .....

For more information

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