

# UK cardiology societies issue joint policy statement to stamp out unacceptable behaviors

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The British Junior Cardiologists' Association (BJCA) and the British Cardiovascular Society (BCS) have issued a joint position statement in a

bid to stamp out bullying, harassment, discrimination and other "unacceptable" and "unprofessional" behaviors in the specialty.

The statement, published online in the journal *Heart*, urges every cardiology team member to call out these behaviors to drive culture change.

Endorsed by 19 organizations affiliated with the BCS, the statement represents a specialty-wide response to the issue.

It comes in the wake of evidence suggesting that these behaviors are common in UK cardiology departments, and may be indicative of longstanding cultural and practice issues, fueled by previous training and unconscious biases, says the statement.

Data from the General Medical Council trainee survey suggest that bullying in cardiology is almost double the average across all medical specialties: 12.3% vs. 6.9%, highlights the statement.

Bullying is associated with poorer performance, a heightened risk of medical error, lost productivity, burn-out and absenteeism. It accounts for half of all stress-related workplace illness, the statement points out.

Inappropriate [behavior](#) in cardiology departments has a detrimental ripple effect, including on the recruitment and retention of staff, patient care, and other bystanders, says the statement.

"As such, improving the culture and professional behaviors within UK cardiology departments is of paramount importance," it insists.

The statement sets out examples of inappropriate behavior. These include bullying; sexist, racist, homophobic or belittling language; discrimination; harassment; providing or depriving individuals of

opportunities based purely on personal characteristics; outbursts of uncontrolled anger; and unconstructive criticism of performance.

And it highlights the common misconception in the specialty that intimidation helps to 'build character' and is how cardiologists were trained in the past.

"This is an anachronistic and flawed concept: intimidating language or actions do not build character and have substantial negative impacts on those affected. Furthermore, role modeling and learnt behaviors lead to perpetuating the cycle of bullying," it emphasizes.

"While mistakes happen in medicine and may require frank feedback to aid learning, they are not an excuse for intimidating or belittling behavior or language," it adds.

Senior team members should lead by example, and act swiftly to respond to concerns. But every member of the cardiology team has a duty to call out inappropriate behaviors to drive culture change and foster a positive working environment, says the statement.

Informal feedback for one-off episodes may be appropriate, but serious events or repeat offenses warrant escalation through formal channels, it says.

Ignoring such behavior simply helps to perpetuate it, emphasizes the statement, adding that safeguards are needed to protect those who raise concerns from being penalized.

Several strategies are required at the individual, departmental, and national level to improve the culture within UK cardiology, concludes the statement. These are:

## For departments and individuals

- Set out clear standards and expectations of behavioral norms from all members of the cardiovascular team
- Encourage the reporting of inappropriate behaviors
- Ensure clear policies, practices and procedures are in place for dealing with inappropriate behavior, iteratively reviewed, and included in induction and staff handbooks
- Designate and train a behavior lead with whom concerns can be raised
- Consider any episodes of inappropriate behavior in the selection process for promotions and [leadership roles](#)
- Make routine use of multi-source feedback where evidence of all behaviors can be raised
- Provide mandatory training for all on workplace culture; how to give and receive structured feedback; unconscious bias; and cardiology-specific human factors

## For universities and national bodies

- Develop a positive organizational culture and ensure that similar standards of behavior are expected of members (national bodies)
- Establish a transparent cardiology reporting strategy for inappropriate behavior
- Incorporate Freedom to Speak Up Guardians into the reporting and responding strategies in NHS Trusts
- Include a person tasked with promoting professional standards on committees (national bodies)
- Consider incidences of inappropriate behavior when allocating funding and advancement in cardiovascular research (universities and funders)

- Include past inappropriate behavior when considering people for roles within their organization, at meetings, or the presentation of awards (national bodies)
- Ensure that appropriate mentors and advisors outside of the direct supervisory chain are available to everyone taking part in cardiovascular research (universities)
- Develop appropriate training packages to improve accessibility to departments and individuals that are reasonably priced and included in study budgets (national bodies)

"As with clinical standards, professional societies have a role in developing a standard for appropriate behavior and a responsibility to ensure that [inappropriate behavior](#) is shown to be unacceptable," says the statement.

BCS President Professor John Greenwood comments: "No-one should be discriminated against at work, bullied, harassed or undermined. In cardiology we have had this pervasive culture for far too long. This statement and its practical recommendations represent a concerted effort to stop bullying in its tracks and put measures in place to stop it happening in the future. We will be taking the statement to our annual conference at the beginning of June to raise awareness and discuss implementation of the recommendations across the UK."

Dr. Christian Fielder Camm, BJCA President, adds, "The detrimental effect of inappropriate workplace behavior can be profound and all those involved in UK [cardiology](#) and cardiovascular medicine have a responsibility to face up to this longstanding problem."

"This document is a significant step forward in acknowledging this important issue and providing clear recommendations for individuals, departments, and national bodies to tackle this problem."

**More information:** Consensus statement: Joint British Societies' position statement on bullying, harassment and discrimination in cardiology, *Heart* (2023). [DOI: 10.1136/heartjnl-2023-322445](https://doi.org/10.1136/heartjnl-2023-322445)

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