

CONFERENCE ABSTRACT

Conflict mitigation and management: Understanding the processes utilised by effective healthcare teams

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Introduction: Multidisciplinary approaches to patient care have become increasingly important. The delivery of safe care requires individuals from various professional backgrounds to work collaboratively. Previous research reports that poor collegiate relationships and unresolved conflict impact negatively on the safety culture. Yet, there is little guidance as to the processes that may be utilised by teams to manage conflict.

Theory/Methods: Semi-structured interviews (n=25) were conducted with members of four healthcare teams identified to be working effectively through impartation of expert opinion. The transcripts were analysed using thematic analysis. The primary aim of the research was to understand the processes and characteristics of effective teams. This component of the research explored their conflict management processes.

Results: The potential for negative conflict, arising from professional cultural differences, was mitigated by consciously placing the patient at the core of decision-making and by having knowledge of and mutual respect for each other's roles.

Open communication was regarded as key to the successful conflict management. Each team had a culture of shared leadership and strong interpersonal relationships that had been fostered by colocation and informal meetings and communication. These contributed to a culture of mutual support, collegiality and trust that facilitated open communication and mitigated the escalation of conflict. There was evidence of environment of psychological safety where members could challenge one another without the risk of causing offence.

Decision-making was shared and facilitated through the use of dedicated, structured meetings where all members could contribute to decisions on patient care and team operations.

Tensions arose from the personal traits of individuals (who were generally new to the team) who adopted inflexible attitudes, lacked understanding of the team's processes and did not fit into the team's culture. A formal induction onto the team was found to be effective in some instances.

Discussion: The findings enable a better understanding of the characteristics and processes utilised by effective teams in conflict management. These can inform the development of conflict management interventions.

Conclusion/Key Findings: Interpersonal conflict impacts adversely on a team's ability to collaborate and deliver safe care. Effective teams anticipate the underlying antecedents of interpersonal conflict and adopt processes that serve to mitigate and manage potential issues. A culture that is supportive of open communication and the building of close personal relationships

is crucial to a team's ability to manage conflict. This culture flourishes where there is shared leadership.

Lessons Learned: Teams may adopt processes that could reduce the propensity for negative conflict, such as defining a common goal around patient care, educating each other about their professional practices and introducing structures enabling all members to participate in shared decision-making.

Limitations: The findings were drawn from semi-structured interviews with a cross section of four teams. In one of the teams only two members participated in the research.

Suggestions for future research: Ethnographic research across the teams would reveal how effective these characteristics and processes are in managing conflict. The findings may also inform the design of interventions to reduce conflict in teams.

Keywords: management; conflict; processes; multidisciplinary; collaboration; safety
