Short read: workplace conflict

In healthcare and other industries, workplace conflict remains a ubiquitous concern. It is found that, among healthcare professionals, avoidance is a common style for handling conflict. Instead of attempting to reach a viable solution, medical imaging staff often chose to ignore the situation altogether, according to a new study published in HealthManagement.org.

In the USA, conflict is growing increasingly dangerous in the workplace, including the healthcare workplace. A 2013 survey revealed that one-half of the study's respondents were treated rudely at work at least once per week, up from only one-fourth in a similar 1998 study.

The current study sought to answer the question of how to effectively manage workplace conflict before it reaches levels of incivility. The purpose of the research was to describe and interpret the staff-related, workplace conflict lived experiences of medical imaging technologists working in U.S. tertiary care centres, focusing on the management of such conflict. Semi-structured interviews were conducted via telephone, video, or email dependent on participant preference. All geographic regions of the U.S. were represented in the study.

Study participants included four medical imaging leaders and nine staff-level medical imaging technologists: the leaders described and interpreted conflict among followers; the staff-level technologists explained their personal experiences of workplace conflict. Both groups elucidated how the conflicts were managed.

Avoidance was the primary conflict management style used by staff-level participants. Reasons varied as to why this approach was taken. Some merely disliked conflict and any confrontation that it involved. Others avoided confronting their conflicts for other reasons (e.g., fear of physical harm). Of these avoiders, only one eventually resolved the conflict by confronting her colleague who treated her poorly. She disclosed, "I just put my foot down and I said, 'Listen buddy, let's go talk.' And we went and we talked, and we ended up hashing it out. We've been good since, actually."

Leaders who avoided conflict also found less success when avoiding their subordinates' conflicts. An operations manager of a large medical imaging department avoided getting involved upon first hearing complaints of bullying from a male technologist against a female coworker. The manager advised them to work it out among themselves. This advice failed to correct the situation. The conflict escalated as department members took sides with one or the other conflicting party, resulting in a physical altercation that took place in front of patients.

In contrast, proactive and immediate conflict management on the part of the leaders was much more effective. One medical imaging leader anticipated the conflicts that a change in schedule would cause. He proactively managed the conflicts by transparently sharing the reasons for the changes and repeatedly rounding the department, keeping communication open during the transition.

"In this current study, not only did conflict avoidance delay resolution of conflict, it also led to lack of collaboration, as avoidance of the coworker typically accompanied the attempt to avoid the conflict. Furthermore, patient care was put at risk since avoiding the other led to lack of important information transfer. Leader avoidance of conflict resulted in costly consequences to the entire organisation," says Dr. Cheryl M. Patton, PhD, MHSA, RT, who teaches various healthcare management courses at Grand Canyon University, Lock Haven University, and Northcentral University.

Once a conflict becomes recognised as creating problems in the workplace, it must be addressed expediently, according to Dr. Patton. At the staff level, she explains, this entails approaching the other party and attempting resolution. If this fails to improve the situation, then the staff member should alert a supervisor. The supervisor should meet with both parties separately and as a group to mitigate the conflict so it does not escalate or adversely impact the team or patient quality of care. If the conflict ensues despite leader intervention, a mediator should be contacted.

"A collective effort of organisational members at all levels of the organisation is needed in order to mitigate or completely resolve conflicts that have the potential of negatively impacting patient care quality," Dr. Patton points out.

Source: HealthManagement.org

Published on : Wed, 3 Oct 2018