

Managing Conflict

SAAAPM in Chicago, Illinois

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No disclosures

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Objectives

- Define conflict in the healthcare setting.
- Apply two self-regulation approaches
 - Owning emotions
 - Metacognition
- Describe five conflict management styles.

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Case 1: The Carotid Endarterectomy



- 01 68 year old man presents for right carotid endarterectomy.
 - History of TIA
 - Baseline BP 132/70
- 02 Preinduction arterial line
BP maintained with SBP 130, MAP 85
EEG placed with good baseline signals
- 03 Neurosurgeon enters room.
"What are you trying to do? Kill my patient?"

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Definition & Impact Managing In Managing Out

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Definition of Healthcare Conflict



Conflict: a dispute, disagreement, or difference of opinion related to the management of a patient involving more than one individual and requiring some decision or action.

Back AL, Arnold RM. Dealing with conflict in caring for the seriously ill: "It was just out of the question". JAMA. 2005; Mar 16;293(11):1374-81.

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TYPES OF CONFLICT

TASK **RELATIONSHIP**

Rogers DA, Lingard L. Surgeons managing conflict: a framework for understanding the challenge. J Am Coll Surg. 2006 Oct;203(4):568-74.

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Working Definition of Healthcare Conflict

Disagreement about management **Emotional Response**

Incivility—Microaggression—Abuse—Aggression

Lee L, Berger DH, Awaad SS, Brandt ML, Martinez G, Brunicki P. Conflict resolution: practical principles for surgeons. World J Surg. 2008 Nov;32(11):2355-6.

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Mistreatment in Organizations

Deviant Behavior *Violates norms*

Intent to harm *No intent to harm*

- Aggression
 - Incivility
 - Microaggression
 - Verbal Abuse
 - Violence
- Nonaggression
 - Incivility
 - Microaggression

Anderson, L. M., & Pearson, C. M. (1999). Tilt for tilt? The spiraling effect of incivility in the workplace. Academy of Management review, 24(3), 452-474.

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Conflict is Inevitable

Conflict is Inevitable

High pressure environment

Time sensitivity High stakes Team and Task complexity

Lee L, Berger DH, Awaad SS, Brandt ML, Martinez G, Brunicki P. Conflict resolution: practical principles for surgeons. World J Surg. 2008 Nov;32(11):2355-6.

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Operating Room Teamwork among Physicians and Nurses: Teamwork in the Eye of the Beholder

Marie A Makary, MD, MPH, J Bryan Sexton, PhD, Julie A Freischlag, MD, FACS, Christine G Holzmueller, BA, E Anne Millman, MS, Lisa Rowen, RN, DNSc, Peter J Pronovost, MD, PhD

RESULTS

60 hospitals
2135 Survey Respondents

Surgeons **Nurses**

- 85% High, 15% Avg or Poor
- 80% High, 20% Avg or Poor

Makary MA, Sexton JB, Freischlag JA et al (2006) Operating room teamwork among physicians and nurses: teamwork in the 2008 eye of the beholder. J Am Coll Surg 202:746-752

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Effects of Conflict

Effects of Conflict

Negative

- Reduced Satisfaction
- Reduced team functioning
- Suspicion and resentment
- Psychological Trauma

Constructive

- Improved understanding
- Enhanced teamwork
- Better Solutions

Opavsky J, Tang S, Boren G, Rowen B, Aziz R. The relationship between resident behavior and the Thomas-Kilmann Conflict Mode Instrument. J Grad Med Educ. 2010;2:118-125

Warkentin A. A quantitative analysis of conflict types and their association on organizational groups. Admin Sci Q. 1987; 32:580-597

Warkentin A. (2005). Structural and individual determinants of organizational conflict: The effects of organizational structure and conflict management strategies. Journal of Management Studies, 42(1), 123-133

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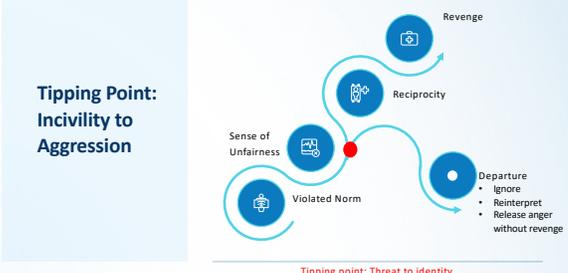
Constructive Conflict: Deliberate Hypotension



- Discern commitment to interests
- Find compromise
- Discover a third way
- Maintain credibility

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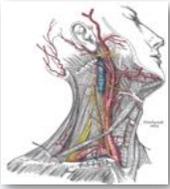
Tipping Point: Incivility to Aggression



Tipping point: Threat to identity

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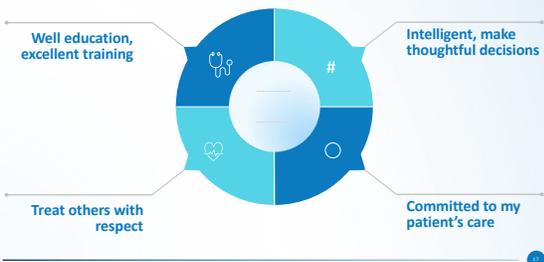
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Beliefs about Self



- Well education, excellent training
- Intelligent, make thoughtful decisions
- Committed to my patient's care
- Treat others with respect

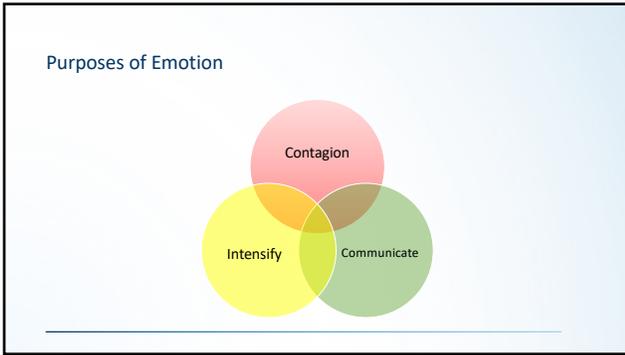
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Threats to Identity

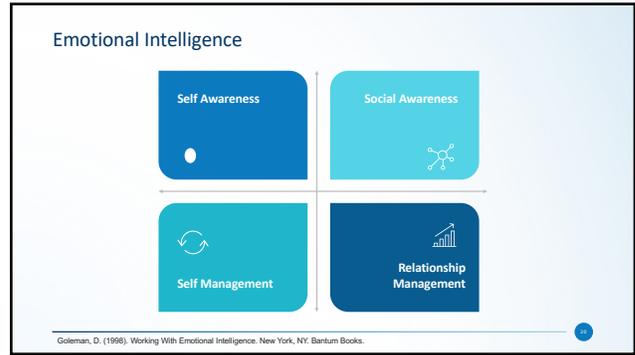


<h4>Professional Identity</h4> <ul style="list-style-type: none"> • Ability • Authority • Authenticity 	<h4>Personhood</h4> <ul style="list-style-type: none"> • Gender • Ethnicity • Age • Sexual Orientation
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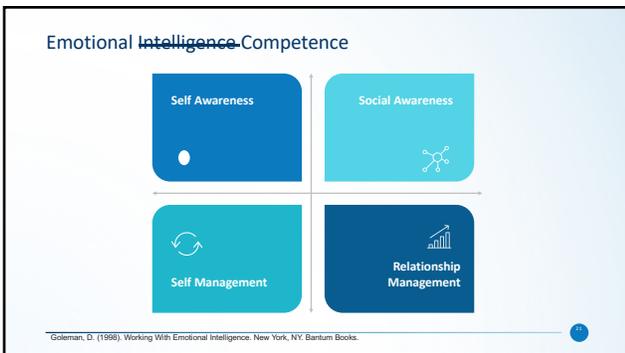
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Thinking Error: Owning Emotions

- He *is* intimidating

versus

I *feel* intimidated

ESSENTIAL COMMUNICATIONS

The Look & Sound of Leadership

Henschel, Tom, narrator. "Thinking Errors." *The Look and Sound of Leadership*, Essential Communications, Oct 14, 2014. <https://essentialcomm.com/podcast/thinking-errors/>

Image credit: <http://www.dailynews.lv/2017/11/30/features/136023/david-and-goliath%E2%80%99s-dynamics-success>

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Metacognition: Acknowledge & Label Feelings

- Create separation
- Reframe
 - "He is so wrong, it's making me mad"
 - "I'm having the thought he is wrong, and I'm feeling anger."
- Thoughts and emotions are transient sources of data that may or may not be helpful.

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"Between stimulus and response there is a space. In that space is our power to choose our response. In our response lies our growth and our freedom."

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Case 2: The Disappearing ICU Bed

- 68-year-old-Latina woman in CCU, treated for decompensated heart failure
- Brought to operating room for portacath placement
- Anesthesia team called CCU to give report at end of the procedure.
"No bed. A wealthy hospital donor admitted, this was the most private bed."
- Anesthesia attending investigates in CCU.
"If this patient's last name weren't Rodriguez, you wouldn't have taken her bed!"

* Name changed

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Conflict Management Styles

Concern for Own Interests

Concern for Others' Interests

Dominating Integrating
Avoiding Obliging
Compromising

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Conflict Management Styles in Anesthesiology Residents

Highest

- Accommodating (69th percentile)
- Compromising (67th percentile)

Lowest

- Competing (Dominating) (20th percentile)

TKI Percentile Scores

Accommodating Avoiding Collaborating Competing Compromising

Figure 2. Box plots for each conflict style of anesthesiology residents (n = 22) on TKI. TKI indicates Thomas-Kilmann Conflict Mode Instrument.

Vasilopoulos T, Giordano CR, Hagen JD, Fahy BG. Understanding Conflict Management Styles in Anesthesiology Residents. Anesth Analg. 2018 May 17.

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Illustration: Interrupted by Surgeon during Interview

Concern for Own Interests

Concern for Others' Interests

Dominating: "You need to hold off until I'm finished here."
Integrating: "I need just a few more minutes. How much time do you need?"
Avoiding: "..."
Obliging: "Go ahead, Doctor."

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Nontechnical Skills for Anesthesiologists

- TASK MANAGEMENT**
 - Planning & Prioritizing
 - Maintaining Standards
 - Identifying & Using Resources
- TEAMWORK**
 - Coordinating
 - Exchanging information
 - Considering others
 - Supporting others
- SITUATION AWARENESS**
 - Gathering information
 - Recognizing & Understanding
 - Anticipating
- DECISION-MAKING**
 - Identifying Options
 - Balancing Risks
 - Selecting options
 - Evaluating

Adapted from Fletcher G, et al. Br J Anaesth. 2003 May;90(5):580-8.

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Nontechnical Skills for Pilots

- **LEADERSHIP**
 - Maintaining standards
 - Authority & Assertiveness
 - Planning & Coordination
- **SITUATION AWARENESS**
 - Awareness of systems
 - Awareness of external environ.
 - Awareness of time
- **TEAMWORK (Cooperation)**
 - Team-building
 - Considering others
 - Supporting others
 - Conflict solving
- **DECISION-MAKING**
 - Problem definition
 - Considering options
 - Selecting & communicating option
 - Implementing & reviewing

<https://www.rcsed.ac.uk/media/415471/notss-handbook-2012.pdf> accessed July 29, 2018

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Nontechnical Skills for Pilots: Conflict Solving

Element	Good practice	Poor Practice
Conflict solving	Keeps calm during conflict	Overreacts
	Suggests solutions	Sticks with own position, no compromise
	Focuses on what is right rather than who is wrong	Accuses others of making errors

Focus on the problem, not the person.
Be the calmest person in the room.

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Rapid-Response Toolkit



1. Remove (Emotional Competence)
2. Respond (Focus on problem, priorities)
3. Restore (Strategic Relationship, Priorities)

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Definition & Impact

Managing In

Managing Out

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