Managing Conflict in the Dialysis Clinic

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Learning Objectives

- Outline situations/personalities that contribute to conflict in the workplace
- Discuss conflict management skills
- Outline and present a plan for conflict resolution through case study reviews
Conflict

Oxford Dictionary defines conflict as an incompatibility between two or more opinions, principles, or interests.

Regardless of our position in the dialysis clinic, we can spend a lot of time dealing with conflict.
Conflict

Conflict can occur between a variety of individuals:
- Providers and staff members
- Between coworkers
- Providers and patients
- Patients and staff members
- Between patients
Situations That Can Contribute to Conflict

- Fundamental disagreement about policy
  - Someone doesn’t want to follow the corporate policy/procedure
    - Staff refusing to wear all their PPE
    - Patients not wanting to wash access arms before treatment
  - Disagreement about HR policies (sick time, vacation)
    - Not wanting to make up a missed Saturday

Situations That Can Contribute to Conflict

- Rivalry
  - Experienced patient care tech having to take directions from a new graduate nurse
  - A nurse senior to the charge nurse having to take orders from the less experienced nurse

Situations That Can Contribute to Conflict

- People having different values or ideas of how things should be done
  - Generational gap differences
    - Young employee taking care of an older patient
  - Disagreement about how to care for a patient
  - One person thinking there’s a better way to do something
- Cultural differences

Situations That Can Contribute to Conflict

- A real or imagined slight from you or a colleague
  - Walked by and didn’t say good morning to an employee or a patient
  - Someone feels their suggestions are being ignored
  - Patient thinks an employee is ignoring them

Situations That Can Contribute to Conflict

- Behavior that is arrogant or perceived to be arrogant
- Someone thinking they do “no” wrong
  - Skipped a step in the water room procedure and they’re sure they couldn’t have made the error

Situations That Can Contribute to Conflict

- When individuals feel they are not valued or that their contributions are not appreciated
  - Lack of recognition
  - Wanting a simple thank you
  - Lack of compliments
  - Wanting appreciation for their hard work
    - Voluntary overtime
    - Helping out teammates

Situations That Can Contribute to Conflict

- Employees or patients not getting the attention they believe they deserve
  - Wanting more one on one time with someone
  - Feeling as if someone else gets all the attention
  - Patient upset because the physician or nurse practitioner spends more time with another patient

Situations That Can Contribute to Conflict

- Someone not getting their own way
  - Patient wanting only a certain technician to take care of them
- Making them do it the corporate way
  - Patient not able to eat while on the machine
- Employee coming from a different company
  - “Where I came from, we did it this way…”

Situations That Can Contribute to Conflict

- Lack of trust
  - Not having trust in one another
    - Things disappear or are stolen
    - Employees telling everyone something you said in confidence
  - Not trusting an employee’s skills
    - Employee skipping steps, breaks in technique
    - Health issues
    - Patient not trusting a new employee’s skills

Situations That Can Contribute to Conflict

- Insecurity of individuals
  - Patients worried about their health
  - Employees being scared of losing their job
    - Clinic being bought out by another company
  - Changes make people feel insecure

Situations That Can Contribute to Conflict

- Concern about the impact of change
  - Change can be scary and help cause conflict
    - New systems (electronic medical record)
    - New equipment (different machines, new bloodlines, water system upgrades)
  - New manager
  - New doctor or new employees in the unit
    - Affects staff and patients

Situations That Can Contribute to Conflict

- Too much pressure (real or perceived)
- Staff shortage
- Large patient loads
- Patients with complex medical issues

We now know some of the reasons for the conflict.....

So how do we resolve it?
Five Basic Conflict-Handling Styles

- Avoidance
- Accommodation
- Competing
- Compromise
- Collaboration

Avoidance

- Ignoring the conflict
- Refusing to acknowledge the existence of the conflict
- Withdrawing from or postponing the conflict

Avoidance

- When to use this conflict management style
  - Issues are trivial
  - Emotions are running high
  - Time is needed for persons involved to calm down

Avoidance

- When **not** to use this conflict management style
  - A long-term solution is needed
  - You are responsible for resolving the conflict

Accommodation

- Placing another’s needs and concerns above your own
- Yielding to someone else’s position on an issue because it is more important to them
  - Clinical manager letting a patient move to a different station (chair) away from the air vent because it’s more important to the patient

Accommodating

When to use this conflict management style

- The issues are unimportant to you
- Your knowledge is limited
- There is a long-term give and take
- You have no power

Accommodating

- When **not** to use this conflict management style
  - Others are unethical or wrong
  - You are certain you are correct

Competing

- Attempt to satisfy your own needs at the expense of the other party
  - Making decisions that are best for the overall functioning of the clinic
  - Manager could use when there is conflict over a company policy that is nonnegotiable

Competing

When to use this conflict management style

- Time is critical
- Issues are trivial
- Solution is unpopular
- Others lack expertise
- Issues are important to you

Competing

- When **not** to use this conflict management style
  - Issues are complex and require input and information from others
  - Working with powerful, competent others
  - Long-term solutions and commitment are needed

Compromise

- Each party gives up something of value to settle the problem

- Clinical Manager changes a patient’s scheduled treatment time if the patient agrees to dialyze their entire treatment without signing off early

Compromising

- When to use this conflict management style
  - Goals are clearly incompatible
  - Parties have equal power
  - A quick solution is needed

Compromising

- When not to use this conflict management style
  - An imbalance in power is present
  - Problem is complex
  - Long-term solutions are needed
  - Conflict is rooted in different value systems

Collaboration

- All parties to the conflict seek to satisfy their interests
- Work together to find an agreeable solution to the problem
  - Open and honest discussion
  - Active listening of all parties
  - Deliberation over solution alternatives
  - Ultimate win-win solution

Collaborating

- When to use this conflict management style
  - Issues are complex and require input and information from others
  - Commitment is needed
  - Dealing with strategic issues
  - Long-term solutions are needed

Collaborating

- When not to use this conflict management style
  - Time is critical
  - Others are not interested or do not have the skills
  - Conflict occurs because of different value systems

Scenario #1

Billy, a hemodialysis patient, spends 15 minutes before each treatment walking around in the treatment area. Billy gets his weight and then proceeds to walk around saying hello to all of the other patients. Alice, the charge nurse, wants Billy to go straight to his assigned seat so that his treatment can begin. Alice attempts to direct Billy to his seat each treatment with no luck. Alice becomes more and more agitated over time. Alice and Billy are in conflict over this situation.
Which one of our conflict-handling styles could be used?

- Avoidance
- Accommodation
- Competing
- Compromise
- Collaboration
Anna, a dialysis technician, walks into the clinic lobby. She hears two patients arguing about who has the best football team. The emotions seem high and the argument is heated.
Which one of our conflict-handling styles could be used?

- Avoidance
- Accommodation
- Competing
- Compromise
- Collaboration
Scenario #3

You notice that two of the dialysis nurses are ignoring each other and not speaking. When asked about the situation, dialysis nurse Cindy states that she and nurse Susan had a disagreement about the care of a patient. Cindy states that she wants a different ultrafiltration plan for Mrs. Brown’s treatment but Susan has decided the plan and will not discuss it with Cindy.
Which one of our conflict-handling styles could be used?

- Avoidance
- Accommodation
- Competing
- Compromise
- Collaboration
Skills Needed to Deal With Conflict in the Dialysis Clinic

- Confront difficult issues early on
  - If we let it go on too long, it builds bad feelings and resentment
  - Deal with the issue as soon as possible
Skills Needed to Deal With Conflict in the Dialysis Clinic

- Don’t promote conflict by causing defensiveness or counter attacks
  - Avoid judging, condescending
  - Avoid name calling
    - Know it all, trouble-maker
  - Don’t use a tone of voice that communicates intense dissatisfaction
Skills Needed to Deal With Conflict in the Dialysis Clinic

- Observe the non-verbal signals of people who are overwhelmed or upset
  - Can tell a lot by watching people
    - Deep sighs
    - Tense shoulders
    - Lack of eye contact
    - Sarcasm
Skills Needed to Deal With Conflict in the Dialysis Clinic

- Avoid using hot-button phrases or words
  - Such as always, constantly, never...
    - You are always late for your treatment.
    - You never follow proper technique.
  - Instead use: often, usually, sometimes...
    - You are frequently late for your treatment.
    - You sometimes break technique.
Skills Needed to Deal With Conflict in the Dialysis Clinic

- Treat people with respect
  - Give them the benefit of the doubt
    - Example: “I know that’s how it used to be done, but we have to change to the new way.”
  - Allow them to save face
    - Don’t need to embarrass them
    - We all make mistakes
Skills Needed to Deal With Conflict in the Dialysis Clinic

- Avoid arguments
  - Don’t argue or take their comments personally
  - Briefly acknowledge their comments/needs, then direct the discussion toward productive action or agreement
Skills Needed to Deal With Conflict in the Dialysis Clinic

- Actively listen to people who express strong concerns or complaints
  - Avoid the temptation to fix or take on their problem
  - Listening may be enough to defuse strong emotions and help resolve a minor problem before it escalates
Skills Needed to Deal With Conflict in the Dialysis Clinic

- Assert your needs, and explain the impact of others’ actions

- Use “I” statements to prevent tensions from building up (instead of “you” statements)
  - “I feel frustrated when you speak to me that way.”
  - Instead of “You frustrate me when you speak to me that way.”
Skills Needed to Deal With Conflict in the Dialysis Clinic

- Release your own tension regularly
- Our own stress can add to conflicts
  - Exercise
  - Vent to friends
  - Spend time relaxing
DPC Project

“Decreasing Dialysis Patient Provider Conflict” (DPC) project

Model for responding to various phases of a conflict

The National Forum of ESRD networks website (www.esrdnetworks.org)

- Provider manual for staff training
- Pathway
- Brochure
- Cultural awareness tips
- Quality improvement tools

“CONFLICT” Resolution Model

- C- Create a calm environment
- O- Open yourself to understanding
- N- Need a nonjudgmental approach
- F- Focus on the issue
- L- Look for solutions
- I- Implement agreement
- C- Continue to communicate
- T- Take another look

Questions