ANALYSIS AND APPROACH TO CONFLICTS IN MEDICAL PRACTICE

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RESEARCH ARTICLE

Abstract

Conflicts occur frequently in all areas of life, from interpersonal relationships to the professional environment. They are an inevitable part of human interactions, but they can be managed and, in some cases, prevented by applying appropriate strategies. The main purpose of this study is to analyze and address conflicts in medical practice, in order to identify existing particularities and the solutions that are required to prevent and resolve them. In order to conduct this study, a questionnaire with 20 items structured in 6 sections was designed, which was distributed to the medical staff of the Bihor County Emergency Clinical Hospital. A total of 319 questionnaires were validated. Whether officially recognized or not, conflicts at work are felt by almost all medical staff. Approximately 65% of employees state that they face a conflict at work at least once a month. The most common conflicts are between colleagues, followed by those with patients' family members, with the patients themselves and, less frequently, with the management staff of the unit. Although medical staff have benefited from information and training on the prevention and management of conflicts, opinions are divided: almost half believe that there are adequate protocols for this purpose, while the other half believe that these protocols partially cover the needs. The main causes identified for the occurrence of conflicts are poor communication, followed by stress and high workload.

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INTRODUCTION

Conflicts are an inherent part of human interactions, and in the medical field, they frequently arise due to the complex and sensitive nature of the activities performed (Chaudry, 2015; Rogers, 2011). Medical practice involves critical decisions, the management of emotions. and interdisciplinary strong collaboration, which can lead to tensions (Sportsman, 2007; Hendel, 2007). Understanding and managing conflicts are essential factors in maintaining a safe and effective environment for both patients and medical staff (Roter, 2002; Saltman, 2006).

Conflicts in medical practice have a profound effect on all aspects of medical care, from direct relationships with patients to collaboration in teams and overall treatment outcomes (Levinson, 1997; Wright 2011). Understanding and managing them is crucial for maintaining an effective and safe medical environment (Rosenbaum, 2004; Winstanley, 2002).

The impact of conflicts in medical practice is multidimensional, affecting not only interpersonal relationships, but also the quality of care and patient safety (Picker, 2003). To maintain a high standard of medical practice, it

is essential that institutions invest in training medical staff in the field of communication and conflict management (Friedman, 1992). Strong leadership, clear protocols and a positive organizational culture are key elements for preventing and resolving conflicts (Cowie, 2012).

The main purpose of this study, the analysis and approach of conflicts in medical practice, in order to identify the existing peculiarities and the solutions that are required for their prevention and resolution.

MATERIAL AND METHOD

A prospective study was conducted in the Bihor County Emergency Clinical Hospital, between October 1 and December 31, 2024. A questionnaire with 20 items structured in 6 sections was designed: demographic information, perception of conflicts, causes of impact of conflicts, conflicts, conflict management and prospective recommendations. The questionnaires were addressed to doctors and nurses from 15 departments. A total of 319 questionnaires were validated.

RESULTS AND DISCUSSIONS

The structure of the group was as follows: one third of the respondents were doctors, two thirds, and over half had more than 20 years of experience in the workplace as women.

Whether acknowledged or not, the existence of conflicts in the workplace is identified by almost all medical personnel. The frequency of the conflict occurrence is varied, with 66% of respondents declaring that they face a conflict at work monthly (figure 1).

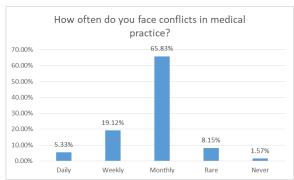


Figure 1. Frequency of conflicts in medical practice

The most common types of conflicts identified are those between colleagues, the vast majority of these conflicts are spontaneous and are mediated and resolved at the department level, without involving other people (figure 2).

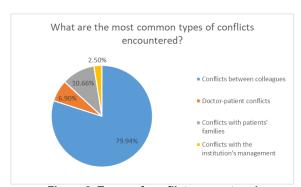


Figure 2. Types of conflict encountered

When designing the questionnaire, we checked whether there are protocols for conflict management at the institution level, so we found protocols or regulations that contain aspects regarding conflict management. The responses received confirm that medical staff has been informed and trained on conflict prevention and management. A small number of employees are not satisfied with the existing protocols and do not know the existence and content of these protocols (figure 3).

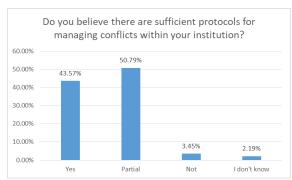


Figure 3. Existence of protocols for conflict management

The causes of conflict were mentioned in the questionnaire as a response option, but the employee was given the opportunity to identify other causes of conflict. The question allowed for multiple response options. A large part of the respondents identified ineffective communication as the main cause of conflicts, and another cause identified by employees was stress and high workload (figure 4).

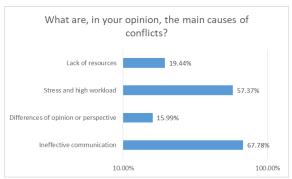


Figure 4. Main causes of conflicts

Other causes of conflict identified by medical staff were: time pressure, lack of mutual respect, lack of clear demarcation of responsibilities, bureaucratic procedures that slow down the medical act and personality differences.

In the medical staff-patient relationship, the majority of medical staff said that conflicts rarely arise due to misunderstandings regarding patients' rights or obligations. Medical staff said that the effects of conflicts with patients can lead to: lack of trust in the system, delays in treatment administration, lack of adequate treatment, increased risk of medical errors and decreased quality of medical care (figure 5).

We considered that the existence of conflict in the hospital can lead to a decrease in the performance of medical staff. Respondents

stated that their performance is greatly influenced by the existence of conflict (figure 6).

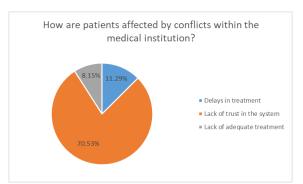


Figure 5. The influence of organizational conflicts on patients

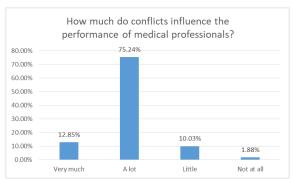


Figure 6. The influence of conflicts on professional performance

The existence of workplace stress and burnout in healthcare professionals is frequently described in the literature, with a causal relationship with workplace conflict. This aspect was analyzed in the following question, where most respondents answered the statement (figure 7).

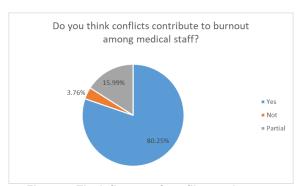


Figure 7. The influence of conflicts on burnout

The vast majority of respondents said that medical staff have a satisfactory level of training in conflict management (figure 8).

While medical staff stated that they had participated in communication courses, the level of training or courses on conflict

management is much lower. Only 25% of people have received training, many of whom are young and the training took place within the framework of undergraduate or master's degree studies (figure 9).



Figure 8. Training of medical personnel in conflict management



Figure 9. Participation in conflict management courses

Given that almost all employees have experienced a conflict at work, a large proportion of them believe that mediation is the best way to resolve the conflict. When asked who mediates, the answers are limited to identifying two categories of people: the hierarchical superior and/or a colleague (figure 10).

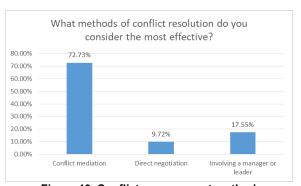


Figure 10. Conflict management methods

Even though the causes and methods of resolving medical personal conflicts are known, methods of creating conflict management are: conflict management courses, effective communication, establishing well-defined protocols.

The vast majority of medical personnel consider the essential role of management in preventing and resolving conflicts, with staff being supported in managing conflicts.

The main solutions in analyzing and resolving conflicts identified by employees are: organizing meetings on this topic and participating in decision-making (figure 11).



Figure 11. Solutions in conflict analysis and management

CONCLUSIONS

Recognized or not, the existence of conflicts in the workplace is identified by almost all medical personnel. The frequency of conflict occurrence is varied, with 65.83% of employees declaring that they face a conflict at work monthly. The most frequent types of conflicts identified are those between colleagues, followed by conflicts with patients' family members, conflicts with patients and conflicts with staff from the unit's management.

Medical personnel have been informed and trained on the prevention and management of conflicts, almost half of which believe that there are sufficient protocols for managing conflicts within the hospital, and the other half claim that these protocols only partially cover how to manage conflicts.

A large part of the respondents identified ineffective communication as the main cause of conflicts, and another cause identified by employees was stress and high workload.

Conflicts in medical practice are inevitable, but can be managed effectively through communication, training and implementation of clear protocols. Investing in professional training and leadership development in the step areas is essential for creating a harmonious medical environment.

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