

Confronting conflict with higher-ups

Find out how to address vertical conflict in the workplace.

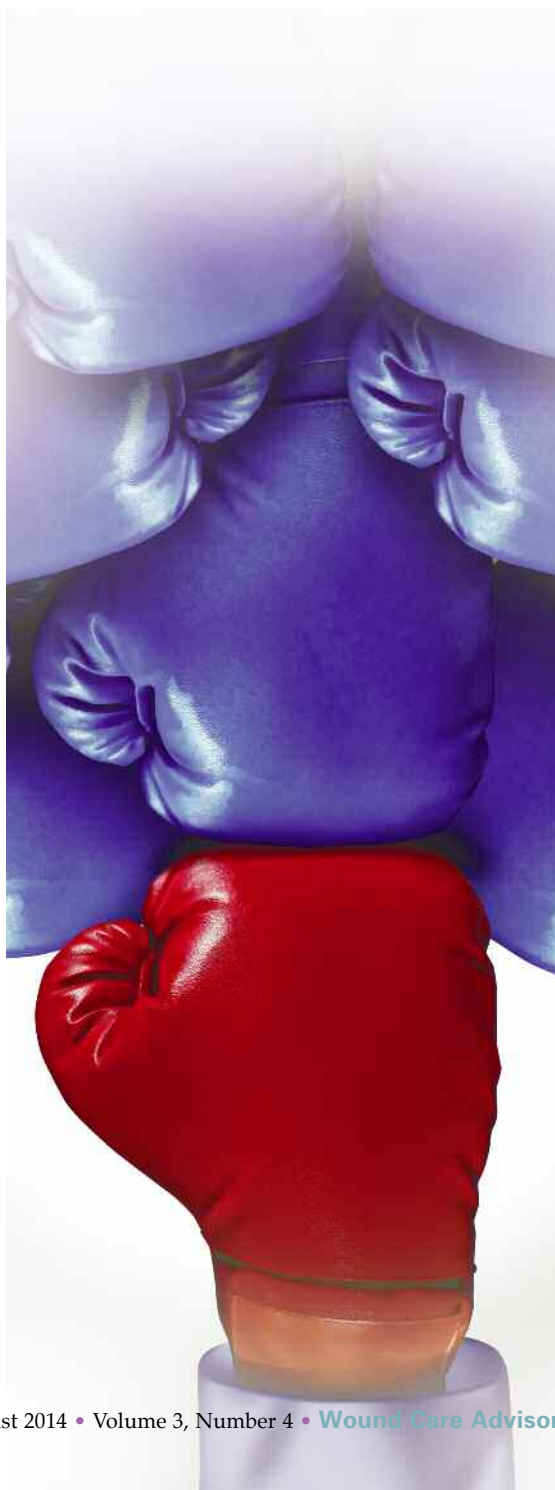
By Pam Bowers, RN, and Liz Ferron, MSW, LICSW

Conflict in the workplace is a fact of life, and dealing with it is never easy. Sometimes it seems easier to ignore it and hope it will take care of itself. But in healthcare organizations, that's not a good strategy. Unresolved conflict almost always leads to poor communications, avoidance behavior, and poor working relationships—which can easily affect patient safety and quality of care.

Much has been written about horizontal hostility and bullying and the impact on employee morale, performance, and satisfaction. But what happens when the conflict is with someone to whom you report, such as a supervisor? Or perhaps it's another higher-up—someone you don't report to directly but who can influence your job and career; for instance, a physician who's a department chair or a hospital administrator. In such cases, the power differential can pose an added challenge to confronting conflict, making it harder for you to do your job. Although intimidation can be outright, sometimes it's more subtle. Examples include being left out of meetings, receiving a less desirable schedule, or not being given important information that the rest of the team has. In smaller communities where coworkers are more likely to have social relationships

outside of work, the threat or reality of gossip or smear tactics may arise.

As research shows, fears of confronting conflict can affect clinicians no matter where they work. For example, in the United Kingdom, a 2013 survey of 8,262 nurses found that almost one-fourth had



been discouraged or warned about raising concerns around patient safety. What's more, 46% had tried to raise such concerns in the previous 6 months; of those nurses, 44% said fear of victimization or reprisal would make them think twice about reporting such issues again.

It's no wonder many clinicians view dealing with conflict directly as risky. They fear retaliation or even job loss for addressing conflicts with a manager or other higher-up. For patients, the downstream effects of conflict avoidance can be catastrophic. Conflict also can cause:

- poor team dynamics
- nothing getting resolved
- breakdown of trust
- need for workarounds
- misplaced aggression.

Addressing conflict constructively

While dealing with conflict can be risky, you have to weigh the risks of confronting it against those of avoiding it—for your patients and your own psychological well-being. We recommend a direct approach. For one thing, your leader may be unaware of your concerns or how you've been affected by workplace conflict. You need to bring these forward to make her or him aware of conflict and have the chance to address it constructively.

Another reason to bring concerns forward is to preserve your personal integrity. Without an opportunity to speak up, you can easily become passive, discouraged, and cynical and let negative feelings build. This approach compromises your job performance and team unity.

If your concern relates to an isolated or immediate incident, wait to cool down before approaching your leader so you can

present the issue in a coherent, professional way. Document your concerns in advance to help you express them more articulately and discern any behavior patterns. Request a time and place to talk that allow privacy and are convenient for

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all involved. If you expect an emotionally charged conversation, consider including a union representative or someone from the human resources department or employee assistance program (EAP), to bring objectivity and help diffuse tension.

When sharing your concerns, remain professional. Be friendly but direct. Present the facts and demonstrate respect. Make sure to speak for yourself by using "I" statements, not "you" statements. Here are examples of how to present concerns in a constructive way.

Sample statement #1:

"Yesterday, when I was changing Mr. X's dressing, I felt you wanted me to rush to finish up. Do you remember that? I felt embarrassed and flustered, and I don't think those are good feelings to have when I'm working. It seemed like the task you needed me for could have waited. But perhaps I'm missing something. Am

?...I would have appreciated your waiting patiently for me. I know you're busy and have a lot going on, but it would have meant a lot to me."

Sample statement #2:

"The last few times I was in your office talking with you, I felt somewhat diminished when you took phone calls, as if our conversation wasn't important. Were you even aware of that happening? I was thinking you might not be, and that's why I wanted to bring this up. I know you have a lot of demands on your time and are dealing with important matters, but it would mean a lot to me and my working relationship with you if I had your full attention when we meet."

Listen respectfully

After you've shared your concerns, listen closely to your leader's response—and don't argue. If you can't resolve the issue, inform the other party that you'll need to go to his or her supervisor. (See *Case studies in conflict management*.) If you decide to do that, stay calm, state your concerns objectively, and be clear on what kind of resolution you want and the actions you'd like that person to take. Before the conversation ends, make sure you're both clear on the next steps and their timing. ■

Selected reference

Royal College of Nursing. Nurses need support when raising concerns. April 24, 2013. <http://thisis-nursing.rcn.org.uk/public/updates/nurses-need-support-when-raising-concerns>. Accessed October 29, 2013.

The authors work at Midwest EAP Solutions in St. Cloud, Minnesota. Pam Bowers is a nurse peer coach. Liz Ferron is a senior EAP consultant.

How to love and care for yourself unconditionally

When stress brought her life to a grinding halt, the author was forced to learn how to truly care for herself.

By Yolanda G. Smith, MSN, RN, CCRN

Are you able to relax, have fun, and enjoy the simple pleasures of life? Or do you:

- have trouble falling or staying asleep?
- smoke, drink, or eat to reduce tension?
- have headaches, back pain, or stomach problems?
- get irritated or upset over insignificant things?
- have too much to do and too little time to do it?

Wound care clinicians are committed, compassionate, and conscientious about caring for patients, friends, colleagues, children, and significant others. Yet many have difficulty giving the same loving, unconditional care to ourselves, and they end up caring for others at our own expense. They're al-

