‘How hard can it be’ - managing conflict in an interprofessional discharge team in England

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‘How hard can it be’ - managing conflict in an interprofessional discharge team in England

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Background

- Interprofessional vs Multiprofessional team – both health (psychiatrists, mental health nurses, occupational therapists) and social care professionals (social workers, housing officers, welfare rights officers).
- Mental Health – schizophrenia, bipolar disorder, anxiety, psycho-affective disorder, personality disorder, obsessive compulsive disorder etc.
- Discharge Team – to discharge patients promptly but safely.
- Acute care – mostly required urgent mental health care, 95% of service users are under Mental Health Act 1983 (amended 2007), detention.
### Nine Key Facts

<table>
<thead>
<tr>
<th>Cost</th>
<th>Length of stay</th>
<th>Homeless</th>
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<tbody>
<tr>
<td>£300 a day</td>
<td>90 days</td>
<td>Homeless</td>
</tr>
<tr>
<td>Unemployed</td>
<td>Under Debt</td>
<td>Lack of family support</td>
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<tr>
<td>Involved with wrong crowd</td>
<td>Misuse of drugs and substances</td>
<td>Involve with criminal activities</td>
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Conflict

- Robbins et al. (2001; 489): "A process that begins when one party perceives that another party has negatively affected, or is about to negatively affect, something that the first party cares about*.

- Martin and Fellenz (2010, 300): "Refers to situations in which the interests of different parties are not aligned. This frequently emerges when the differences between two or more groups or individuals become apparent*.

- Taylor (1999: 1): "Conflict occurs when two or more parties believe that what each wants is incompatible with what the other wants. Conflict arises when differences cannot be satisfactorily dealt with*.

- Dreu and Van de Vliert (1997; 1): "Conflict occurs when an individual or group feels negatively affected by another individual or group*"
Conflict is Inevitable

– Conflict is situational i.e. fluid in nature but a dynamic process.
– Different interests or incompatible interests or outcomes.
– Conflict is based on both real and perceived differences.
– In an interprofessional team – part and parcel of everyday life.

• Scare resources.
• Competing demands.
• Different strategic priorities.
• Different professional culture.
• Different professional values.
Research So far

– Dyad professional: mostly physicians and nurses.
– Physical health.
– Specific conflict management framework:

<table>
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<tbody>
<tr>
<td>Withdrawing</td>
<td>Avoiding</td>
<td>Avoiding</td>
</tr>
<tr>
<td>Forcing</td>
<td>Competing</td>
<td>Dominating</td>
</tr>
<tr>
<td>Sharing</td>
<td>Compromising</td>
<td>Compromising</td>
</tr>
<tr>
<td>Smoothing</td>
<td>Accommodating</td>
<td>Obliging</td>
</tr>
<tr>
<td>Problem Solving</td>
<td>Collaborating</td>
<td>Integrating</td>
</tr>
</tbody>
</table>

Table 1: Conflict Management Strategies.
Research questions

– How the health and social care professionals confront and manage conflict in the inter-professional discharge team.
– Why health and social care professionals apply specific conflict management strategies to facilitate a safe and timely discharge from an acute mental health hospital.
– Focus: England
Research Methods

- Qualitative Approach.
- A Case Study.
- Purposive sampling strategy.
- Semi-structured Interviews (11 practitioners: 2 psychiatric consultants, 3 mental health nurses, 1 senior mental health nurse manager, 2 social workers, 1 social care worker, 1 housing officer, 1 welfare rights officer).
- Documentary analysis.
- Thematic Analysis.
Research Findings

- Different perceptions: what constitutes conflict.
- Different ways to manage the same conflict.
- Emotional spillover is the hallmark.
- Health professionals heavily relied on policies and procedures.
- Social workers starting point is collaboration.
- Both professionals use compromise and accommodating conflict management strategy.
- Unwritten rules - Reciprocal arrangement: I did it now it’s your turn....
Research Findings

– Confront first, and management next.
Research Findings
Any Questions