‘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>
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<th>Cost £300 a day.</th>
<th>Length of stay 90 days.</th>
<th>Homeless.</th>
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<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 a 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.

• Scarc 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:

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<tr>
<td>Withdrawal</td>
<td>Avoiding</td>
<td>Avoiding</td>
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<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>
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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 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

Emotional: Flight, Freeze, Flight
Rational: Avoid, Policies, Third party, Accommodate, Compromise
Any Questions