Crucial Conversations

MANAGING CONFLICT

What is Conflict?

- A difference that prevents agreement
- Disagreement between ideas, feelings, etc.
- A struggle for power

Potential Conflict Situations

- Clinician Conflict
- Staff Conflicts
  - Disagreement with peers
  - Disagreement with patient assignment
  - Disagreement with AOD
  - Staff conflict with Clinicians
  - Staff conflict with patient or visitors
- Interdepartmental Conflicts

Responses to Conflict

Attacking the problem

Passive Behavior	Assertive Behavior	Aggressive Behavior
I lose / You win	I win / You win	I lose / You lose
Becoming a Victim		Attacking Each Other

Become a self-monitor

- How do you react under stress?
- Do you…
  - Become silent?
  - Avoid getting involved?
  - Become angry or violent?

Crucial Conversations

- A discussion between two or more people when
  - Stakes are high
  - Opinions vary
  - Emotions run strong

Step 1

- Prepare
  - What is the conflict about?
  - What is your goal?
  - Plan what you are going to say
  - Rehearse
  - De-brief / get feedback on past situations

Step 2

- Don’t React
  - Natural Reactive Responses –
    - Fighting back (aggressive behavior)
    - Giving in (passive behavior)
    - Passive aggressive behavior
- Be Assertive

Step 3

- Disarm the Confronter
- Listen
- Acknowledge
- Apologize
- Project Confidence
- Show Respect
- Get on the Same Level

Step 4

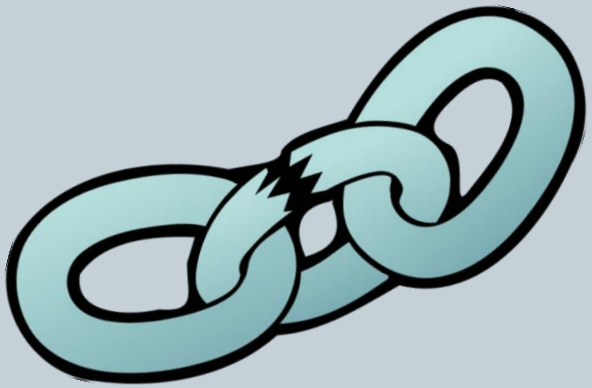
- Reframe the problem
- Provide follow-up on unresolved issues
- Accept the responsibility (if appropriate)
- Never make promises you can’t keep
- Lead them to the alternatives

Incident Reporting

- Date, time, and location
- Name of patient if involved in any way
- Circumstances precipitating event
- Description of questionable behavior
- Consequences of behavior (Peer Review)
- Actions that occurred

Chain of Command

- When do you go over a physician's head to your supervisor and even higher to advocate for your patient?



Chain of Command

- Can a world of medical practice exist for a nurse when following a medical order or chain of command?
- A plaintiff may place the blame on nursing for poor outcomes

Recent L & D Case

- After several hrs of labor, L&D RN determined that her patients' VS were stable and FHT's were normal. She did not see signs of fetal distress.
- MD performed vaginal exam and determined the baby was in an improper position requiring mid-forceps.

Outcome

- The doctor performed the forceps delivery and the nurse assisted him
- The baby was born with a spinal injury and died
- Plaintiff sued the nurse for failing to institute the chain of command and because she did not refuse to participate in the delivery

Court Decision

- Chain of Command and refusal to participate is only required if the decision by the doctor is so obviously negligent, it would cause any reasonable person to anticipate substantial harm to the patient
- Chain of Command is not to be instituted over a mere difference in medical/nursing opinions
- Chain of Command is not to be instituted over decisions a nurse is not permitted to make—such as whether to perform mid-forceps delivery in this case.