Conflict management: a practical case, analysis, interpretation and resolution

Gestión de conflictos: un caso práctico, análisis, interpretación y resolución

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ABSTRACT

Introduction: conflicts are very common occurrences in any organization and, although they are inevitable, they can be managed in a positive way. As such, conflict management has been gaining prominence in companies, because when carried out effectively, it increases the organization’s performance and productivity.

Objective: to analyze a conflict in a hospital environment and the strategies for resolving it.

Methods: reflective essay based on the analysis of an organizational conflict situation, using a pedagogical resource centered on experiential learning.

Results: the conflict described took place in a hospital environment, between middle management and two employees. As negative aspects, we can highlight ineffective communication, marked by aggressive and defensive postures, and authoritarian leadership. As positive aspects, we can mention the assertiveness of one of the parties involved, which contributed to the outcome of the conflict in a positive and effective way.

Conclusions: the analysis of this case highlights the importance of empathetic leadership, effective communication and a collaborative working environment in conflict management. Applying these strategies can contribute to a positive and efficient hospital environment, benefiting both healthcare professionals and patients.

Keywords: Hospitals; Communication; Conflict Management; Leadership; Negotiation.

RESUMEN

Introducción: los conflictos son acontecimientos bastante comunes en cualquier organización y, aunque son inevitables, pueden gestionarse de forma positiva. Por ello, la gestión de conflictos ha ganado protagonismo en las empresas, ya que cuando se lleva a cabo de forma eficaz aumenta el rendimiento y la productividad de la organización.

Objetivo: analizar un conflicto en el ambiente hospitalario y estrategias para resolverlo.

Métodos: ensayo reflexivo basado en el análisis de una situación de conflicto organizacional, utilizando un recurso pedagógico enfocado en el aprendizaje experiencial.

Resultados: el conflicto descrito ocurrió en un ambiente hospitalario, entre el mando intermedio y dos empleados. Como aspectos negativos podemos destacar la comunicación ineficaz, marcada por posturas agresivas y defensivas, y liderazgos autoritarios. Como aspectos positivos podemos mencionar la asertividad de uno de los participantes, que contribuyó al desenlace del conflicto de manera positiva y efectiva.

Conclusiones: el análisis de este caso resalta la importancia del liderazgo empático, la comunicación efectiva y un ambiente de trabajo colaborativo en la gestión de conflictos. La aplicación de estas estrategias puede contribuir a un ambiente hospitalario positivo y eficiente, beneficiando a los profesionales sanitarios y a los pacientes.
INTRODUCTION
Conflict is an antagonism of ideas, where people with different opinions debate the same issue. It can be classified as functional, when its resolution brings benefits, or dysfunctional, when it causes the team to distance itself. (1)

Conflicts are very common occurrences in any organization and, although they are inevitable, they can be managed in a positive way. (2) To do this, it is essential to recognize the signs of conflict in good time, continuously monitoring the signs of its presence in the team. (3) Nowadays, what is important for organizations is managing conflicts rather than resolving them, i.e. learning behavioral skills. (2)

Conflict management is not limited to avoiding or reducing conflict, but involves creating effective strategies to minimize dysfunction and maximize the constructive functions of conflict, with the aim of promoting learning and organizational effectiveness. (3) Therefore, identifying and addressing conflict is an indicator of organizational well-being, as reflection on this process results in understanding between the parties involved. (4) Therefore, dealing with conflict is a major challenge, as it is understood that conflict, when properly managed, will increase the organization’s performance and productivity, while poor management will have a negative impact. (3) As such, it has been gaining prominence in organizations, as managers seek to acquire skills and knowledge to identify and manage conflicts between employees, with a view to improving results and performance. (2) The health sector, particularly the hospital environment, requires professionals to use emotional intelligence to manage conflicts inherent in clinical practice, (1) and it is essential to develop conflict management skills, such as effective communication and negotiation. (4) This work is based on the description of a practical case, with the objectives of analyzing and interpreting a conflict in a hospital environment and strategies for resolving it.

METHOD
Type of Study
Reflective essay based on the analysis of an organizational conflict situation, using a pedagogical resource centered on experiential learning, designed to develop skills and competencies in a simulated environment. In this case, we used a description of the situation and analysis based on the description of the conflict and the reflection questions used in the debriefing. (5)

The study was approved by the Ethics Committee (Opinion No. 14/2023). Participants signed an informed consent form to allow information collection about their experience. The anonymity of the participants’ data was ensured by coding them with the letters A, B and C.

Scenario
The conflict took place in a hospital environment, between middle management (A) and two employees, one from the morning shift (B) and one from the afternoon shift (C), on the 13th of October, 2023.

In this service, there are two treatment rooms with similar equipment (which we’ll call AL1 and AL2), with AL2 having more precise and complex technical features and specificities than AL1. This is important because the conflict arose due to the transfer of patients between these units. The service is organized in a rigid functional hierarchy, marked by authoritarian leadership that restricts suggestions for improvement from employees. This style of leadership translates into a tense environment, where professionals face constant pressure and have few opportunities to actively participate in decisions. The emotional and psychological burden is high due to the treatment of cancer patients, combined with the stress and exhaustion of rotating shifts and extended hours. Collaboration between different professional groups in the multidisciplinary team is hampered by the lack of open communication and the climate of tension imposed by the leadership. As a public hospital, the service faces an overload of patients, exceeding its capacity, aggravating working conditions. This overload also contributes to the physical and emotional exhaustion of the professionals, resulting in demotivation, dissatisfaction and increased conflict within the team.

Data collection and analysis
Information on the conflict experience was collected and the data analyzed in May and June 2024. Data collection and analysis was based on the debriefing proposed by Lima et al. (5): How did you feel during the conflict experience? What do you think you did well? Was communication based on respect, clarity and intercollaboration? What could have been done differently? Did you handle the conflict situation correctly? Did you do the right thing without favoring someone because of a personal relationship? Were you fair and listened
to what the director had to say? Did you listen to what the director had to say? Were you quick to resolve the conflict? Did you negotiate alternatives and possibilities to resolve the conflict? Given everything you have experienced, what would you do in a similar case? The analysis takes a qualitative and descriptive approach, where a narrative synthesis was made based on the answers to the debriefing questions.

RESULTS
Description of the conflict
The doctor instructed A to transfer patient X from AL1 to AL2. A passed this instruction on to B to carry out the transfer. It was mentioned to A that AL2 was overflowing with patients, making it difficult to receive one more. A suggested that, if necessary, one or two patients from AL2 could be transferred to AL1 as compensation. At shift change, this instruction was passed on to C, who began the process of transferring the patient. However, Medical Physics interfered with the medical indication and cancelled the patient’s transfer from AL1 to AL2, informing A of the decision. A went to AL2 to pass on the new information, but C said that the patient’s transfer had already taken place and would not be annulled, as AL2 still had too many patients. A, in an aggressive and authoritarian manner, asked under what indication the procedure had been carried out. Faced with this attitude, C reacted impulsively and aggressively, questioning the reason for the question and expressing her dissatisfaction with the situation. B, calmly and reassuringly, explained the other side of the situation, showing the appointment and making A understand. A, calmer, accepted that the transferred patient would remain like this.

Debriefing
On the part of the employees (B and C), the feelings were incomprehension, anger, exhaustion, and frustration. On the part of management (A), the feelings were arrogance, surprise, and acceptance. There were positive aspects to the conflict, especially in the intervention of B, who adopted a calm and reassuring attitude, which was essential for resolving the conflict. Their intervention was crucial in clarifying the situation for A, reducing tension and facilitating mutual understanding. Another positive point is A’s acceptance of the situation after the explanation. The management showed flexibility, which indicates an openness to dialogue and negotiation, fundamental aspects of conflict resolution. With regard to the nature of the communication, we can highlight several moments. At the shift change, communication was direct, clear and objective when B gave C their instructions. Moments later, the initial communication between A and C was tense and aggressive, and A’s initial approach, without active listening and with an authoritarian attitude, resulted in an impulsive and aggressive response from C. This dynamic exacerbated the conflict until B intervened, bringing calm and clarity to the communication. Remember, Medical Physics clearly communicated the cancellation of the original transfer to A, but there was no direct communication with B and C to ensure that everyone was aware of the change. The conflict was resolved mainly through the intervention of B, who explained the situation in detail to A, highlighting the difficulties in transferring patients and the workload. Accepting the situation, A allowed the patient to remain in AL1, demonstrating her desire for a peaceful and collaborative solution. The manager’s flexible attitude after understanding the situation helped to resolve the conflict. Initially, A suggested transferring one or two patients from AL2 to AL1 to compensate for the transfer of patient X to AL2, in an attempt to balance the workload between the two units. After B explained the difficulties in scheduling, patient X remained in AL1, avoiding further overloading AL2. This final decision showed an adaptation and a practical alternative to the initial plan, demonstrating the capacity for negotiation and flexibility on the part of those involved. In a similar situation, management must ensure that all the professionals involved are aware of the changes that are going to be made and allow discussion of possible difficulties and solutions before carrying out any action, practicing active and empathetic listening and less authoritarian leadership. Employees, for their part, must remain calm, communicate clearly and directly and always express themselves constructively, avoiding impulsive reactions.

DISCUSSION
This reflective essay made it possible to analyze a conflict that occurred in a hospital environment between management and two employees. The analysis focused on the type of communication used by each party and the factors that contributed to the conflict’s emergence and resolution.

The conflict highlighted weaknesses in the service’s communication and leadership style; ineffective communication and aggressive and defensive postures exacerbated the conflict, creating an environment of tension between the players. These results are similar to those found in other studies, where communication between professionals is not effective.1,2

Authoritarian leadership did not provide a healthy environment of collaboration and open dialog, and imposed decisions without considering working conditions and limitations, resulting in negative reactions. However, positive aspects emerged during the resolution of the conflict, both in Intervenor B’s intervention
and in Intervenor A’s final decision. Leadership styles are mediators of conflict management, and consequently improve motivation, employee productivity and reduce the level of anger and frustration.\(^{(8)}\)

In health services, which are high-stress environments where conflict can be imminent, it is necessary to create prevention and resolution strategies. Participative and collaborative leadership can promote a healthy and calm working environment.\(^{(9)}\)

The transformational leadership style allows for constructive conflict management, in which it is possible to obtain a deep understanding of differences, better identification of sources of conflict and facilitation of open discussions, leading to the formation of an organizational culture centered on individual growth, as well as, productive team collaboration.\(^{(10)}\) Transformational leadership has the ability to weaken the unjustified and negative effects of various types of conflict since the leader demonstrates a higher level of emotional intelligence at the group level and mitigates the effects of conflicts with positive implications for the team’s results.\(^{(11)}\)

Improve internal communication to ensure that all professionals are aware of decisions.\(^{(12)}\)

Training in conflict management and assertive communication for employees and managers, helping to prevent and resolve conflicts more effectively, equipping them with the necessary skills to deal with high-stress situations constructively, objectively and assertively. In addition, creating clear protocols for transferring patients and providing psychological support to healthcare professionals can help reduce stress and exhaustion, thus reducing the occurrence of conflicts.

As limitations, this study does not allow inferences to be made since it only refers to the analysis and description of a single conflict situation. But it allows us to raise some questions that can be studied in future studies, namely, literacy style and the development of negotiation and assertive communication skills in conflict resolution.

CONCLUSIONS

The analysis of this case highlights the importance of empathetic leadership, effective communication and a collaborative environment in conflict management, thus contributing to a positive and efficient hospital environment that benefits all those involved.

REFERENCES


FINANCING
No financing

CONFLICT OF INTEREST
The authors declare that there is no conflict of interest

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