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Development of an Education Module on Conflict Resolution for Charge Nurses

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Development of an Education Module on
Conflict Resolution for Charge Nurses

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Submitted in partial fulfillment of the
requirements for the degree of
Master of Arts in Nursing

AUGSBURG COLLEGE
MINNEAPOLIS, MINNESOTA

2014

Certificate of Approval

Abstract

A healthy work environment is essential for providing safe and efficient care for patients. When nurses avoid conflict on a patient care unit they create an unhealthy work environment by leaving problems unresolved. Avoiding conflict is common due to the perception that conflict is a negative outcome of dysfunctional relationships. In reality, conflict is a normal part of human interactions that stimulates individuals to adapt to the diversity that surrounds them. Increasing charge nurses' understanding of interpersonal conflict and improving their skills of constructive conflict resolution, supports the creation and maintaining of a healthy work environment. An education module titled *Embracing Conflict: A Bridge to a Healthy Work Environment* is offered as a component of an interactive learning lab for charge nurse orientation. The concepts mutuality, pattern of the whole, and expanding consciousness from Margaret Newman's Theory of Health as Expanding Consciousness provides a theoretical framework for the module's development. As charge nurses model the skills of addressing and resolving conflict, they will increase the likelihood that others will recognize the benefits of constructively resolved conflict and modify their own response. Direct observation of participants practicing conflict resolution skills along with questions from and employee satisfaction survey are used to assess for immediate and long-term changes in behavior.

Keywords: authentic relationship, charge nurse, education module, interpersonal conflict

Acknowledgments

Completion of this project would not have been possible without the inspiration given to me by the faculty at Augsburg and my fellow students. I would first like to thank Dr. Kaija Freborg whose confidence in me far exceeded my own and which I leaned on more than she knows. Next, I need to thank the wonderfully supportive cohort of fellow students that have listened to me as I learned from them. Each of them inspired and motivated me as we shared our joys and frustrations.

A special thanks to my editor and readers; Julie Koop for her time and patience, patience, and more patience. Julie's humble attitude and gentle push has helped keep me grounded and my eye on the end. My readers, Bonnie Luhmann and Dr. Pauline Abraham, deserve accolades for agreeing to provide their time, insight, and support while maintaining an excited anticipation for a final product.

Finally, I need to thank my family who has been a constant support. My wife Kori, and my daughters, Alicia and Korinne have sacrificed in this process by giving me space and time with a tremendous amount of understanding. This project is the culmination of their efforts and sacrifices as much as it is mine. Thank you for everything.

Dedication

I would like to dedicate this work to the bridge builder that inspires and motivates with their words and insight into what I am only loosely aware of. I did not understand how to build a bridge until it was made obvious by you. I will forever be grateful and humbled by your insight.

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Chapter one: Introduction

The work environment of a patient care unit can be chaotic and stressful for nurses providing care. Within this hectic workplace, interpersonal conflict is inevitable, however positive outcomes are possible when at least one individual involved is able to appropriately confront and resolve problems. In the absence of individuals skilled in resolving conflict, the work environment becomes unhealthy for nurses and potentially negatively affects patient care (Almost, Doran, Hall, & Laschinger, 2010). In order for nurses to provide quality care, they must commit to envisioning and creating a healthy work environment. A healthy work environment is one “in which policies, procedures, and systems are designed so that employees are able to meet organizational objectives and achieve personal satisfaction in their work” (Shirey, 2006, p. 258). Healthy work environments are created and sustained by authentic leaders who collaborate within and across disciplines to make appropriate decisions regarding patient care (American Association of Critical Care Nurses [AACN], 2005). Often times the charge nurse for a patient care unit assumes the leadership role of establishing and sustaining a healthy work environment in addition to supporting patient care during each shift.

Charge nurses act as a clinical resource for nurses and provide direction to assure that patient care is delivered appropriately and professionally, resources are used efficiently, and the values and mission of the organization are represented. In order to accomplish these goals, charge nurses must build relationships with other nurses, their patients, and members of a multidisciplinary

team. Developing meaningful relationships is an essential leadership skill for charge nurses to ensure a collaborative approach to patient care and ensure the patient care unit is functioning efficiently and safely.

Collaboration amongst the multidisciplinary care team, which includes the nurse, allows for the integration of their specialized skills and knowledge, ensuring patients receive the best possible care (AACN, 2005). The inevitability of interpersonal conflict amongst the interdisciplinary care team is often the result of individuals interacting in a stressful work environment that makes authentic collaboration a rare occurrence (Marquis & Huston, 2012). To facilitate a collaborative resolution to interpersonal conflict within the multidisciplinary care team, charge nurses must engage in respectful dialogue to determine the best course of action in order to maintain a healthy environment (AACN, 2005). The potential for negative patient outcomes in unhealthy work environments necessitates that charge nurses possess the skills and knowledge to resolve conflict. Therefore, the purpose of this project is to develop an education module for charge nurses on conflict resolution to promote healthy work environments in patient care units at a large Midwestern hospital.

Background

Historically, orientation to the role of the charge nurse at the large Midwestern hospital focused on clerical duties, managing processes, and ensuring adherence to guidelines. The emphasis for orientation included specific tasks such as assessing and documenting overall unit workload, creating appropriate patient assignments, and monitoring admissions and dismissals to

ensure smooth patient transitions. Prospective charge nurses were typically selected based on tenure rather than a formal evaluation of their nursing skills or leadership abilities. The historical orientation process to the charge nurse role was completed on the patient care unit over two to three shifts by shadowing an experienced charge nurse. This orientation process offered limited consistency in the information being presented, its validity, or accuracy and offered limited education on leadership skills or their role in accountability to the organization. This process creates differences in operations and expectations between patient care units that lead to a divergence from the mission of the Midwestern healthcare institution to provide the best patient care through an integrated practice.

Over the years, as the organization has recognized the benefits of a collaborative practice across disciplines, the traditional role defined top down hierarchies found in healthcare organizations have broken down. As the hierarchies continue to fade away, the organization has recommitted to fundamental values of acknowledging and appreciating the contributions of all employees. As a result, a new paradigm has emerged with a flat hierarchy where all staff are encouraged to feel free to speak their mind in an environment of mutual respect. The need for nurse leaders capable of supporting this culture shift prompted the evaluation of the role of charge nurses and their orientation process. In response to the evaluation, the Department of Nursing implemented a centralized charge nurse orientation that standardized information provided to new charge nurses. A centralized charge nurse orientation has been shown to

increase understanding of the expectations associated with the role and has developed a greater appreciation for the implications of individual charge nurses' actions (Homer & Ryan, 2013). The re-designed orientation emphasizes leadership skills, identifies key responsibilities, and clarifies the impact the charge nurse role has on the daily operation of the patient care unit and institutional goals. In addition, the role of the charge nurse has expanded to assume many of the responsibilities of the nurse manager including the maintenance of a healthy workplace.

As frontline leaders, charge nurses must be prepared to intervene and successfully manage behaviors characteristic of unhealthy work environments. These behaviors include actions by nurses or others that are negative, demoralizing, unsupportive, contentious, and aggressive (ANA, 2010). These behaviors include typical reactions to interpersonal conflict such as avoidance, aggression, and belittling others. Environments exhibiting such behaviors are at increased risk for medical errors and provide inefficient care that increase in occurrence when interpersonal conflict and stress among staff is evident (ANA, 2010). Because the charge nurse is viewed as the leader of a patient care unit, the burden of addressing unsafe behaviors and resolving conflict becomes, by default, their responsibility.

The importance of being accountable to the responsibility of addressing and resolving interpersonal conflict is reflected in standards outlined by the American Association of Critical-Care Nurses (AACN, 2005) for establishing and sustaining a healthy work environment. The six standards of the AACN "reaffirm

that safe and respectful environments are imperative and require systems, structures and cultures that support communication, collaboration, decision making, staffing, recognition, and leadership” (p. 13). Nurses skilled in communication are better prepared to resolve interpersonal conflict in a collaborative manner, which is identified by the AACN as a key skill to address negative behaviors and “ensure patient safety, enhance staff recruitment and retention, and maintain an organization’s financial viability” (p. 4). As the leader of a patient care unit, the charge nurse is in a position to influence others and positively affect not only their immediate environment, but also the greater work environment of the organization. Ensuring that charge nurses have the necessary skills to confront and resolve conflict will provide a significant contribution to the health of the work environment, patient safety, and the success of the organization.

Significance of the Project

The nursing profession and the healthcare organizations in which nurses work is consistently faced with a variety of challenges in meeting the needs of patients. Despite the historical attention given to access to services, quality of care, and controlling the cost of healthcare, these issues continue to challenge the adaptability of healthcare organizations (McLaughlin, 2008). Regardless of past efforts at resolving these issues, the urgency for healthcare organizations to implement costs saving initiatives and improve the quality of care cannot be ignored or overemphasized. The passing of the Affordable Care Act (ACA) in March of 2010 brings with it sweeping changes for private insurance providers,

Medicare and Medicaid, and healthcare organizations (The Henry J. Kaiser Family Foundation [KFF], 2011). The provisions of the ACA promise some relief to patients in need of necessary health services but are unable to access or pay for them. In order to offset some of the costs associated with providing near universal healthcare, the provisions of the ACA includes directing the manner in which healthcare is delivered through the implementation of a reimbursement system emphasizing value, quality, and health promotion (New America Foundation, 2010). To remain financially stable in this new system while successfully providing safe affordable patient care, healthcare organizations need to recognize the value in creating healthy work environments where “inter-professional collaboration and coordination are the norm” (Institute of Medicine [IOM], 2011, p. 2). A successful organization will be characterized by individuals in leadership positions who share common goals and are able to inspire a shared vision in others.

The nursing profession, with over 3 million members, is in a pivotal position to lead change efforts necessary for the success of healthcare organizations. In addition to being the largest segment of the healthcare workforce, nurses’ regular interactions with patients and broad practice environments provides a wide range of opportunities to positively affect patient care (IOM, 2011). More specifically, the development of the charge nurse’s role as an effective leader would meet the need for individuals capable of inspiring others due to their collaborative role in maintaining the overall functioning and health of the work environment. To create this healthy work environment, charge

nurses must possess communication and relationship building skills that enhance partnerships within a multidisciplinary team and utilize these skills to address and resolve interpersonal conflict. Without effective communication skills, the charge nurse is likely to avoid conflict, inhibiting the necessary reform, undermining the success of the organization, and most importantly compromising patient safety (IOM, 2011). The potential for negative consequences to patients and the financial risks to the organization underscores the importance for charge nurses to have the necessary leadership and communication skills to resolve conflict on the patient care unit and engage in true collaboration.

The charge nurse that has the appropriate communication skills is able to put aside defensive behaviors, seek to understand the perspective of others, and recognize the value in considering diverse points of view (Crowell, 2011). When charge nurses communicate effectively, they promote a healthy work environment through mutually respectful interactions and the creation of authentic relationships. In the presence of authentic relationships, conflict is no longer a negative interaction to be avoided but is viewed as an opportunity for growth and development through the integration of the ideas of a diverse workgroup. To facilitate the understanding of this strategy and gain an appreciation for the concepts of this project, a theoretical framework built from Margaret Newman's Theory of Health as Expanding Consciousness (HEC) will be used.

Margaret Newman's Theory of Health as Expanding Consciousness

Newman's Theory Health as Expanding Consciousness (HEC) emanates from the unitary transformative nursing paradigm and is grounded in concepts found in Martha Rogers' Theory of Unitary Human Beings (Newman, 1994). Newman's Theory provides the framework for a practice model synthesized from several theoretical influences along with her personal experiences (Newman, 2008). Newman conceptualizes health and illness as a unitary process of expanding consciousness in which individuals become more in tune with themselves, find greater meaning in life, and acquire a more profound understanding of their relationships with other people and the world (Newman, 1994; 2008). Consciousness is defined as the information capacity of the system, which is manifested in the underlying pattern of individuals as they interact with the environment (Newman, 1994). Nursing practice viewed through the perspective of Newman's Theory represents a paradigm shift from understanding health from a medical model focus on disease to a focus on the pattern of individuals and their relationships with others as they interact with each other and the environment.

From the perspective of the Theory of HEC, the authentic nurse-patient relationship is the essence of nursing practice in which the unconditional caring presence of the nurse transforms individuals to a higher level of consciousness (Newman, Smith, Pharris, & Jones, 2008). Transformation takes place as the nurse becomes fully present in the relationship, often during a time of chaos for the patient; together the nurse and patient begin a mutual process focused on

discovering the evolving pattern of the patient (Newman, 1994). The patient's awareness of the unfolding pattern, made possible through the mutuality of the nurse-patient relationship, creates greater insight into the meaning of their relationships with others and their environment (Newman, 1994). As the nurse interacts with the patient and shares information, choices for action are revealed through an increased understanding of the evolving pattern, and both the patient and the nurse are transformed to a higher level of consciousness (Newman, 1994). From the perspective of HEC, the presence of an authentic, caring relationship is essential for the transformation to a consciousness that is more inclusive and caring.

Authentic relationships promote awareness and insight into another's perspective as they share information during the process of identifying patterns, facilitate a deeper understanding for the individuals involved, and create new knowledge. The development of knowledge is dependent on the ability to identify patterns and their relationship to the pattern of others and the pattern of the whole as they interact (Newman, 2008). The mutuality of a shared experience allows insight into another's reality and for the expansion of consciousness to occur (Newman, 1994). The process of developing new knowledge through the mutuality of the nurse-patient relationship is unique to the paradigm of nursing. A nurse practicing in the context of the Theory of HEC capitalizes on the knowledge of physicians and other disciplines when needed; however, the integration and application of this knowledge in the nurse-patient relationship is the sole responsibility in the discipline of nursing.

Charge nurses are in a pivotal leadership position to influence others and their environment to minimize the potential for negative outcomes from conflict. Interpersonal conflict is an inevitable human experience with the potential for affecting both positive and negative outcomes. Poorly managed conflict erupting on a patient care unit impedes the development of meaningful relationships necessary for a healthy work environment thereby increasing the potential of negative patient outcomes. The importance for those in leadership roles to possess conflict resolution skills is obvious for the creation of a healthy work environment that supports safe patient care. In the next chapter, applicable literature is used to emphasize the importance of this project, support its content, and assist in understanding key concepts.

Chapter Two: Literature Review

Conflict is inevitable in any work environment and can have both positive and negative outcomes. Within the chaotic work environment of the professional nurse, unresolved conflict increases the potential for negative effects on individuals, their relationships, patient outcomes, the work environment, and ultimately the organizations in which nurses work (Almost, 2006). The potential for negative patient outcomes resulting from unresolved conflict within work environments reinforces the need to enhance the conflict resolution abilities of nurses and facilitate a healthy work environment.

Provisions outlined by the American Nurses Association (ANA) emphasize the relationship among healthy work environments, patient outcomes, and the wellbeing of nurses (2010). Nurses working in the often complex and chaotic work environment of an inpatient care unit must be skilled at resolving conflict to minimize the potential negative consequences to patients. Creating and maintaining a healthy work environment that supports safe and effective delivery of patient care is an ethical obligation for the professional nurse (ANA, 2010). The literature review provides evidence that supports the development of conflict resolution skills for nurses and emphasizes the importance of a healthy work environment.

Impact of Conflict on Work Environments

While the literature does not offer the discipline of nursing a common definition of conflict, it does identify common attributes used to describe conflict and its consequences (Kelly, 2006). The attributes of conflict important to the

understanding of conflict in the work environment of nurses include the type of conflict and its stages (Almost, 2006). Viewing conflict as a series of stages provides a framework to define conflict as a “process involving two or more people, where one perceives the opposition of another” (Almost, 2006, p. 447). The process emphasizes the negative emotional reaction by individuals to the perception of interpersonal incompatibilities (Almost et al., 2010). The important part of this definition is that it is the perception of incompatibilities regardless of their existence. Interpersonal conflict among nurses is inevitable in the complex work environment of the professional nurse; however, the definition of conflict provides insight into strategies for addressing and resolving it.

The focus on the negative aspects of conflict represents the traditional view that conflict is a consequence of dysfunctional people or the system they occupy. Conflict from this perspective requires intervention to prevent negative consequences or to restore stability. Recent findings suggest conflict can have positive effects when appropriately addressed by nurses skilled in conflict resolution strategies (Almost, 2006; Coser, 1957; Jehn, 1995). The positive effects of appropriately resolved conflict include an increase in nurses’ satisfaction with their work, improved performance, a healthier work environment, and ultimately improved patient outcomes (Almost et al., 2010; Cox, 2003; Ritter, 2011). The outcome may appear to be similar in both the traditional and modern findings; however, the difference lies in the underlying goal or intent of the individuals in conflict. The traditional view of conflict emphasizes implementation of interventions intended to suppress conflict while the recent perspective

focuses on the development and improvement of relationships in order to capitalize on the unique talents of the whole.

Interpersonal conflict, if appropriately addressed or managed can lead to new ideas, greater insights, and improve teamwork “leaving people feeling more integrated, adjusted, and competent” (Almost, 2006, p. 450). Interpersonal conflict among nurses, left unaddressed or inadequately resolved, has a negative effect on individuals, their relationships, patient outcomes, and the organizations in which they work (Almost, 2006). In the absence of effective resolution, conflict increases the stress level of nurses causing distractions that potentially jeopardizes the ability to provide safe patient care. The materialization of interpersonal conflict in a work environment that is not able to resolve it places the patient at risk for adverse outcomes (Haraway & Haraway III, 2005). The dynamic process of conflict is the result of interdependent attributes acting together to create a conflict situation. These attributes include the underlying causes of conflict, the type of conflict, and how it is managed (Pondy, 1967). The outcome of a conflict situation, either positive or negative, contributes to future conflict situations by influencing how individuals will manage them.

Three broad types of conflict discussed in the literature are relationship, task, and process (Almost, 2006; Jehn, 1995). Relationship conflict, also known as interpersonal or identity conflict is the result of differences associated with individual’s fundamental beliefs or culture. Task conflict involves disagreements regarding what needs to be completed while process conflict involves disagreements about how the task should be completed (Jehn, 1997). An

example of task conflict in the work environment of a nurse would be issues regarding the use of a new skin care product and its effectiveness. Process conflict in this situation would involve a disagreement over who is responsible for applying the skin care product to the patient and how to evaluate its effectiveness. Much of the decisions in the work environment of nurses that arise from task or process conflict issues are resolved using job descriptions or guidelines (Pondy, 1967). Although task and process conflicts may arise suddenly in a nurse's work environment, such as a disagreement about a patient assignment, for the most part this type of conflict is procedural in nature and is managed by institutional rules and guidelines to facilitate standardization.

The rules supporting process and task conflicts are developed to guide actions of individuals and to limit the potential for conflict by clarifying how tasks should be done and who should complete them (Pondy, 1967). When individuals disagree about a task or process, they find themselves in conflict. Resolving task conflict is often accomplished by referring to the rules laid out in guidelines and policies. The outcome of a conflict situation depends upon the behavior of the individuals as they interact in relationships and make choices in response to differences that they may or may not perceive as compatible. This type of conflict, known as relationship conflict, is a consequence of interpersonal difference between individuals when they interact with each other or their environment (Jehn, 1995). The rules do not create the conflict; the disagreement between individuals regarding the meaning of the rules is what creates conflict.

Relationship conflict, also known as interpersonal conflict, includes disagreements between individuals or among groups about interpersonal issues consisting of personality clashes, tensions, animosity, and annoyance (Almost, 2006; Jehn, 1995). The outcome of any conflict situation ultimately depends upon the quality of the relationship of those involved and their ability to effectively communicate. The presence of trust and respect in a relationship define the quality of the relationship and the perception of another's' intention as good or bad. In the presence of trusting relationships, conflict is minimized as individuals engage in open dialogue and accept disagreements at face value rather than misinterpret behavior negatively (Almost, 2006). The ability to create a trusting relationship where individuals communicate openly and honestly to successfully resolve conflict depends upon the disposition of the individuals interacting with each other.

An individual's disposition is a representation of their opinions, values, and beliefs that create their perception of others and their environment. As individuals interact with each other and the environment, their perception of the encounter guides their behavior and affects their relationships and ultimately their environment (Almost et al., 2010). Within the patient care unit, the disposition of the nurse determines how they will react to the everyday stress of their work environment and how well they are able to deal with conflict. A nurse's confidence and sense of control influences their perception of the stress of the work unit and the perception of conflict (Almost et al., 2010). According to Wall and Callister (1995), an individual's disposition taken alone has limited impact on

the outcome of a conflict situation. The likelihood of individuals resolving conflict to a positive outcome depends on the quality of their relationship and the perceived compatibility of the other's disposition. When individuals have similar personalities, attitudes, behaviors, and values they are more likely to create meaningful work relationships that are better able to resolve conflict.

Appropriately resolved conflict increases the morale of individuals, which in turn supports the relationship and cultivates a healthy work environment (Almost et al. 2010; Cox, 2003). When nurses create compatible relationships with their peers they are better able to collaborate and support each other which decreases the amount of conflict in the work environment (Almost et al., 2010). Individuals that are in relationships they feel are compatible have greater insight into another's perspective and exhibit a consciousness that is more inclusive and caring. The work environment of a patient care unit that is pervaded by individuals with an inclusive and caring consciousness is able to adapt to changes and sustain the relationships necessary to provide safe and efficient patient care. It is important to note that it is the interaction between individuals in a relationship that facilitates the changes in the environment and the individual.

The interdependent, interrelated, and interconnected relationships and outcomes of those relationships are part of the complex setting of a nurse's work environment (Crowell, 2011). The unpredictable and chaotic environment of a patient care unit increases the possibility for interpersonal conflict to develop and creates barriers to resolving it constructively (Haraway & Haraway III, 2005). Despite the chaos and the difficulty in addressing and resolving interpersonal

conflict, it is a necessary part of an organization's developmental process, driving growth and inspiring innovation (Andrade, Plowman, & Duchon, 2008).

Alleviating all conflict would be impossible and in reality not beneficial; however, how one perceives and deals with conflict can diminish its negative effects and provide a great deal of support for constructive outcomes that stimulate healthier relationships and work environments. Nurses that are able to recognize the potential for positive outcomes from constructively resolved conflict are more likely to use strategies of conflict resolution that preserves the relationships of those involved in a conflict.

Satisfactory resolution of conflict is not concerned with who is right or finding fault. Resolution comes from the interaction of those in conflict with the intent of gaining understanding and appreciation of one another. This type of resolution requires that nurses learn to act mindfully when in conflict with each other to increase the chance of a constructive outcome. Mindfulness requires individuals "to pay attention more effectively by being active information processors who are aware of many details in their context" (Andrade et al., 2008, p. 32). By remaining mindful, nurses are able to identify fluctuations in their relationships, determine if conflict exists and evaluate its significance, and take appropriate action to address problems or errors (Andrade et al., 2008). Depending on a nurse's mindful assessment of a situation, they will use a variety of approaches and strategies in an attempt to resolve conflict.

While the concept of mindfulness implies consideration of alternative perspectives, Almost et al. (2010) found that most nurses rely on their own

perception exclusively when assessing conflict and choosing a conflict resolution strategy. A nurse's perception of conflict is a reflection of how well they respond to the everyday stressors of their lives, their confidence level, and their internal sense of control in life (Almost, 2006). Nurses working in a chaotic unsupportive environment with complex patient care needs, ultimately have increased stress and interpersonal conflict. In contrast, nurses working in an environment that supports positive relationships have less stress and interpersonal conflict.

Almost et al. (2010) found that the impact of the work environment has little negative effect on the disposition of individual nurses in the presence of positive and supportive relationships. Work environments that are perceived as negative and unsupportive have been found by multiple studies to negatively affect nurses' self-esteem, their relationships with colleagues, job satisfaction, team performance, stress levels, and absenteeism (Almost, 2006; Cox, 2003; McKenna, Smith, Poole, & Coverdale, 2003). Of particular concern is the findings of McKenna et al. (2002) in their study of first year nurses in which a "high number of respondents . . . considered leaving nursing" (p. 95) after manifesting symptoms of post-traumatic stress disorder as a consequence of being subjected to work related interpersonal conflict. Their study of first year registered nurses illustrates the seriousness of conflict to the stability of nursing staff in a health care environment already anticipating a shortage of qualified nurses.

All conflict has the potential to affect patients in a negative way by virtue of the interdependence within healthcare organizations. Rosenstein and O'Daniel (2005) found that conflict expressed through intimidation and disruptive

behaviors increases medical errors and preventable adverse patient outcomes, contributes to poor patient satisfaction scores, and causes qualified nurses to seek new positions. In the absence of a healthy work environment, teamwork is weakened, communication within and across disciplines is less effective, and collaborative solutions to problems are impossible potentially leaving conflict unresolved and undermining the success of the organization (Cox, 2003; The Joint Commission [TJC], 2008). Understanding the consequences that disruptive behavior can have on patients, individuals, and organizations justifies initiatives focused on teambuilding, communication, and conflict resolution strategies.

Interpersonal conflict among nurses can be subtle or involve blatant acts of aggression or violence. McKenna et al. (2003) found that most of the interpersonal conflict experienced by first year nurses was subtle in nature, “although direct verbal statements which were rude, abusive, humiliating or involved unjust criticism” (p.95) were also reported. Litigation resulting from such incidents has a direct financial cost to healthcare organizations (Haraway & Haraway III, 2005). This additional and unnecessary expense is ultimately distributed to patients and providers in the form of increased costs, lower wages, and fewer available resources. The inevitability of interpersonal conflict requires that healthcare organizations find strategies to manage it effectively before negative outcomes affect patient care.

The literature recognizes that conflict can have both positive and negative consequences. It can be the catalyst for change, increase creativity, and bring forward problems previously unknown (Almost, 2006; Haraway & Haraway III,

2005; Vivar 2006). Vivar (2006) indicates, “that there is no single way of managing a conflict” (p. 204). The appropriate conflict resolution strategy is determined by the individuals involved after consideration of the context of the problem. The most common conflict management strategy used by nurses in Vivar’s study was avoidance, which in some situations provides time for individuals to reflect and analyze the situation. Typically, however, the use of avoidance as a strategy is ineffective and encourages individuals to deny that a problem exists and limits the chance for a constructive outcome. In order for nurses to actualize constructive outcomes from conflict, they should minimize the use of avoidance and focus on a higher-level strategy for conflict resolution such as collaboration.

A collaborative approach to conflict takes into consideration the perspectives of everyone involved by focusing on understanding the problem from another’s point of view. When collaboration is used, positive outcomes are more frequent and negative outcomes are minimized. In order to accomplish this, Vivar (2006) suggests nurses be educated on conflict management strategies and empower them to “use the acquired skills in pursuit of early conflict resolution” (p. 205). An Internet search for books on communication, conflict, and self-help revealed a vast amount of opportunities for independent learning about conflict resolution. Although education can be completed in isolation, interpersonal conflict is the result of interaction and therefore education should not take place in isolation. By definition, conflict is the result of the interaction

with others; therefore, it makes sense to develop education that includes opportunities to practice conflict management strategies with others.

Conflict Resolution Education

Haraway and Haraway III (2005) showed that training sessions that include opportunities for practicing conflict management strategies was beneficial even when the interventions were brief. Improvements were seen in the participants' job and home settings. "One person stated, 'the training helped me better focus on priorities and establish more long-term goals'" (Haraway & Haraway III, 2005, p. 16). This study illustrates interventions are available that can be used successfully to address the problem poorly of resolved conflict, and may reduce negative consequences of interpersonal conflict.

Conflict typically is viewed as a negative consequence of interacting with others. The idea that conflict can be a positive aspect of interacting with others is foreign to most individuals. Educating nurses on the positive aspects of conflict and providing them the tools and resources to effectively address and manage it, can positively affect others, their work environment, and ultimately improve patient care. Training and education in conflict resolution can provide healthcare professionals with the skills and expertise to help them deal with workplace conflicts effectively. Conflict, when constructively resolved, provides a safer and more satisfying environment for everyone.

The Joint Commission on Accreditation of Healthcare Organizations (JCAHO) recognizes the implication of unresolved interpersonal conflict in the work environment of nurses and provides clear recommendations to provide

“safe and effective care of the highest quality and value” (TJC, 2008, p.1). The JCAHO standards for leadership require that healthcare organizations develop processes for addressing intimidating and disruptive behaviors that solicits and integrates substantial input from an inter-professional team including representation of medical and nursing staff, administrators, and other employees. In order to meet the requirements, JCAHO recommends providing skills-based training and coaching for all leaders in relationship-building and collaborative practice, including skills for giving feedback on unprofessional behavior and conflict resolution (TJC, 2008). The requirements laid out by JCAHO emphasize the importance for training individuals working in healthcare organizations to address and constructively resolve interpersonal conflict. Constructively resolved conflict facilitates the creation of a healthy work environment, which in turn benefits the individuals that work there, and those under their care.

Conflict is an inevitable aspect of life. The consequences of conflict in healthcare organizations affect patient outcomes, employees’ satisfaction, and the work environment of nurses. If the process of conflict resolution is viewed as an opportunity for growth and change, the potential for a positive outcome is increased. Within a patient care environment, charge nurses that are able to resolve interpersonal conflict create a more receptive attitude towards change that stimulates both personal and organizational growth. The success of a healthcare organization is highly dependent on the ability of charge nurses to navigate change and interact in a collaborative manner to provide safe, affordable care for patients (Institute of Medicine [IOM], 2011). Transforming the

charge nurse's perception of conflict from one that is predominantly negative to one that recognizes the positive aspects of appropriately resolved conflict will help to create an environment well equipped to solve problems through collaborative efforts and help to ensure the success of the organizations in which they work. The following chapter describes the development of an education module on conflict resolution as a component of an interactive learning lab for the orientation process for new charge nurses designed to change the charge nurses perception of conflict and increase their motivation to address conflict when it arises.

Chapter Three: Development of an Education Module

Identifying and managing interpersonal conflict on a patient care unit often becomes the responsibility of the charge nurse. Given the potential for negative consequences to patients, the work environment, and the individuals involved in a conflict situation it is essential that a charge nurse be competent in conflict resolution strategies. Competence in conflict resolution requires the use of strategies that combine specific skills and knowledge along with motivation to appropriately apply them in practice (Deutsch, 2006). The integration of individuals that are highly competent in resolving interpersonal conflict into the charge nurse role supports collaborative relationships necessary for a healthy work environment and for providing safe and efficient patient care (Porter O'Grady & Malloch, 2011). Although conflict is a normal and expected human experience, the tendency for nurses to avoid conflict situations supports the need to provide educational opportunities for nurses orienting to the charge nurse role (Almost, 2006). The purpose of this chapter is to describe the development of an education module on constructive conflict resolution strategies to be incorporated into an interactive learning lab for orienting new charge nurses.

An overview of conflict is provided followed by a description of a theoretical framework for the development of the education module based on concepts from Margaret Newman's Theory of HEC (1994). Specifically, the concepts expanding consciousness, mutuality, and pattern of the whole are used to assist in understanding the dynamics of conflict and the importance of developing individual's competence in resolving conflict to ensure the presence

of a healthy work environment that supports patient care. The structure of the module is further guided by the influencer model for enacting change proposed by Patterson, Grenny, Maxfield, McMillan, and Switzler (2008) and supported by relevant findings from the nursing literature. As part of this project, the presentation of a metaphor is included to assist the learner in creating a more intuitive understanding and appreciation for conflict as a natural and essential component of human interaction.

Overview of Conflict

Without exception, conflict is a universal experience of every individual. It could be argued that an individual's experience with conflict begins with the first encounter with diversity and continues to be a constant stimulus for adapting to the chaos of interacting with others and the environment. The chaos underlying conflict is found in all systems, including human and the environment, and is the manifestation of interacting with the diversity in endless re-configuration and adaptation (Porter O'Grady & Malloch, 2011). Conflict is an essential and unavoidable human experience that stimulates adaptation to the diversity encountered as individuals interact with others and their environment. Therefore, avoiding conflict is only possible in the presence of absolute stability. Defined another way, every individual is destined to live with conflict until the moment we reach absolute stability at one's time of death.

“Conflict is the most frequent dynamic in human relationships. And yet it is the most misunderstood and misused element in the whole arena of communication and interaction” (Porter O'Grady & Malloch, 2011, p.166).

Misunderstanding and confusion surrounding conflict is a result of the diversity of individuals, each with a unique perception of the world and events, from which meaning is applied to conflict. An individual's perception is the accumulation of meaning applied to their life events as they interact in relationships with others and their environment. Relationships bring together the unique values, attitudes, and knowledge of individuals that may or may not be perceived as compatible. Conflict is manifested when incompatibility is perceived by at least one individual in the relationship. The outcome of a conflict situation can be either constructive or destructive depending upon the meaning and value individuals apply to the information and the relationship (Deutsch, 2006). Given that conflict is unique to the individual, it is clear that resolving conflict must start with a reflection of one's own perception and meaning.

Through self-reflection, individuals are able to evaluate their own beliefs, assess them for compatibility with others, and apply meaning to their interactions and relationships. Interacting in relationships creates conflict when the intrinsic differences found in the unique beliefs of individuals are perceived as incompatible by at least one person in the relationship. Although the emotional response to conflict is often uncomfortable, the outcome of a conflict situation is not destined to be negative. "All conflict provides a dynamic opportunity for growth and transformation" (Porter O'Grady & Malloch, 2011, p.166). Conflict is the dynamic force necessary to stimulate growth and transformation and is present only when interacting with the diversity of others and the environment. Although it may feel desirable to avoid conflict, reality suggests it is essential for

human existence. Conflict is neither good nor bad, it simply is. By accepting conflict as a normal and necessary part of human existence, individuals can refocus their efforts from avoiding or preventing all conflict to appropriately resolving conflict and discover new opportunities for growth, development and adaptation to change.

Considering the work environment of a patient care unit, the opportunities for improvement as well as for conflict is immeasurable. The source of opportunities and conflict is found in the relationships with others as they interact to make multiple decisions, simultaneously, and at a moment's notice. In the heat of the moment, the opportunity for lengthy dialogue or the involvement of a mediator is not possible; patient care cannot wait for a committee to convene and resolve a conflict. Safe patient care requires individuals capable of openly confronting problems in the midst of chaos while preserving relationships. Openly and safely confronting conflict is only possible in the presence of authentic caring relationships built on trust, mutual respect, and a common purpose. In the absence of authentic relationships, conflict is likely to be left unresolved, straining relationships and undermining patient care.

The focus on interpersonal relationships is at the core of the nursing profession yet it is difficult to embrace the importance of the relationship in the middle of a conflict. It is from relationships with others that stable systems are created that are supportive of individuals in the midst of a chaotic environment (Wheatley, 2007). In the environment of a patient care unit, losing focus on the importance of relationships increases the risk of negative consequences for more

than just the individuals involved in a conflict. Those most at risk of negative outcomes from poorly resolved conflict are also the most vulnerable; the patients who have entrusted their lives in others.

Understanding the importance of relationships is intuitive for most nurses yet in the presence of conflict, the relationships necessary to provide safe patient care are at increased risk. The creation of a healthy work environment, by developing meaningful relationships while remaining accountable to the organization, is a fundamental leadership responsibility (Porter-O'Grady & Malloch, 2011). In the environment of the patient care unit, this leadership responsibility is an expectation of the charge nurse. The leadership of a charge nurse is recognized as an essential component for the effective daily operations of the patient care unit including the maintaining of interdisciplinary team relationships through constructive strategies of conflict resolution (Porter-O'Grady & Malloch, 2011; Shirey, 2006). In order to meet the responsibility of a front line leader, charge nurses require opportunities to learn as well as practice the necessary skills for resolving interpersonal conflict. The following section describes the development of an education module titled Embracing Conflict: A Bridge to a Healthy Work Environment (see Appendix A). The focus of the module is on changing individual's perception of conflict from a typically negative attitude to accepting conflict as a normal part of human interaction that can have beneficial outcomes if addressed and constructively resolved. The intent is to integrate the conflict education module as one component of an interactive learning lab for the orientation of charge nurses.

Module Development

Keeping in mind the ultimate goal of educating charge nurses on conflict resolution strategies is to create and sustain a healthy work environment, it is essential to focus on behaviors that interfere with this goal. The tendency to avoid conflict suggests that changing this specific behavior would go a long way to enhance the work environment of the patient care unit. The large Midwestern hospital in which the education module is intended to be implemented has embraced the utilization of the influencer model described by Patterson et al. (2008) that focuses on identifying and changing specific behaviors. The influencer model offers strategies and flexibility to support the change in behavior necessary for constructively resolving conflict and the development of a healthy work environment. In today's budget conscious healthcare environment, the implementation of a multiday training program for charge nurses is not always feasible nor necessarily appropriate. The use of the influencer model does not require implementing intensive or lengthy training sessions to actualize lasting change.

The influencer model directs efforts for making change at key behaviors while remaining flexible in the use of strategies to address changing needs and circumstances. The appropriate use of the influencer model requires identification of behaviors that are undesirable as well as the desirable in order to choose appropriate strategies for creating and sustaining meaningful change (Patterson et al., 2008). For the purpose of developing the module *Embracing Conflict: A Bridge to a Healthy Work Environment* the undesirable behavior is the

avoidance of conflict situations; the desirable behavior is addressing conflict using constructive conflict resolution strategies.

The influencer model described by Patterson et al. (2008) identifies six sources of influence that guide the selection of strategies for achieving desired change. The six sources of influence are personal motivation, personal ability, social motivation, social ability, structural motivation, and structural ability. Together the six sources represent domains of influence that capitalizes on the “highly developed literatures – psychology, social psychology, and organization theory” (Patterson et al., 2008, p. 77). The influencer model emphasizes that individuals will change their behavior if they are motivated to do so, and if they feel they have the necessary skills. Applying the influencer model to the development of an education module on conflict provides the direction and flexibility necessary to address the interpersonal conflict within the complex work environment of a patient care unit. The flexibility of the model is found in the number of strategies that can be employed within each of the six sources of influence.

Within each of the six sources of influence described in the influencer model a variety of strategies are available which may be employed to appropriately direct efforts and increase the chance of successfully changing behavior. The model is not static or a prescribed method for implementing change, but rather it is intended to be a dynamic tool that can be modified by changing strategies to address the inevitable changes associated with complex situations. The use of any one strategy or realm of influence is not enough to

achieve lasting change; lasting change is realized by adapting to the changes and new information that is exposed in the system as individuals incorporate new ways of thinking and behaving into their lives (Patterson et al., 2008). Reflecting on the specific goal of changing the behavior of charge nurses, emphasis will be given to the personal motivation and personal ability sources of influence described in the influencer model.

Creating an education module that addresses both motivation and ability in the constructive resolution of conflict at the personal level requires charge nurses to recognize the benefit conflict can provide and obtain the appropriate conflict resolution skills. Patterson et al. (2008) emphasize the importance of addressing personal motivation by stating that failing to “deal with personal motivation, your influence plan will fail” (p. 79). Integrating an education module focused on specific skills and behaviors into an interactive workshop setting allows individuals to experience both didactic and experiential learning. The didactic teaching supports learning the benefits of conflict as well as the detriments of unresolved conflict. Providing experiential learning allows individuals to practice the application of the skills learned in a safe and supportive environment.

In their study on nursing and conflict, Mahon and Nicotera (2011), reinforce the need for conflict resolutions strategies that overcome the primary utilization of avoidance when confronted with conflict. In addition to the findings that nurses are highly unlikely to confront conflicts directly, Mahon and Nicotera found that individual nurses would report the conflict to their direct manager in an

attempt to further avoid any direct discussion of issues. Mahon and Nicotera do offer hope for improving the process of conflict resolution with their finding that nurses who do choose to address conflict are more likely to select constructive resolution strategies such as collaboration when problems arise. The presumption taken from the findings of Mahon and Nicotera when combined with the strategies outlined by Patterson et al. (2008) suggest that providing education on the benefits of conflict can influence the utilization of a collaborative approach in addressing and resolving conflict.

The influencer model identifies intrinsic satisfaction as the most basic source of motivation for creating the desired change (Patterson et al. 2008). The utilization of this source of influence requires that individuals change their intrinsic response to activity, such as addressing conflict, from a negative experience to one that brings them pleasure. Developing the personal motivation of a charge nurse to address interpersonal conflict, requires them to increase their understanding of the importance of appropriately resolved conflict as well as being provided opportunities to practice the skills. This approach is echoed by Mahon and Nicotera (2011) in their recommendation that “education should be integrated in practice settings to create professional cultures that recognize substantive (constructive) conflict and value direct communicative confrontations” (p.161). Further echoing a need for a multifaceted approach to education on conflict management is the assertion that a change in practice is likely to be sustained when nurses can “watch others work through conflict, thereby gain an observation-based appreciation for the positive results of good conflict

management” (Mahon & Nicotera, 2011, p.161). Utilizing the principles of the influencer model and findings within the literature regarding conflict, the integration of the education module *Embracing Conflict: A Bridge to a Healthy Work Environment* into an interactive learning lab for charge nurse orientation is a reasonable undertaking.

The implementation of the didactic portion of the module draws from resources already made available by the large Midwestern hospital. Adjustments to the didactic component have been made that reflect findings in the literature that conflict is not inherently negative, but rather is a normal process that, if properly managed, can lead to positive outcomes (Almost, 2006; Almost et al., 2010; Mahon and Nicotera, 2011; Pondy, 1967; Porter-O’Grady & Malloch, 2011). By focusing on the positive aspects of conflict, charge nurses can begin to recognize the value in addressing conflict, which in turn will positively influence their motivation to do so. Patterson et al. (2008) are quick to point out however that focusing on only one source of influence to change behavior is typically ineffective, especially when the strategy used is in the form of a lecture. To overcome the limitation of lectures, the influencer model encourages the utilization of strategies directed at personalizing the meaning of information to further influence individual’s motivation to change their behavior.

Patterson et al. (2008) emphasize that the creation of personal motivation in itself does not create the desired behavioral change. It is equally essential that individuals have the necessary skills and opportunities to utilize them in a safe environment. The strategies for creating the necessary skills of conflict

resolution are found in the influencer domain of personal ability. Strategies from the influencer domain of personal ability emphasize creating opportunities for deliberate practice of the desired skill. Evidence from nursing literature echoes the influencer model by highlighting the value of experiential learning using interactive scenario based opportunities to practice conflict resolution skills (Flynn, Prufeta, & Minghillo-Lipari, 2010; Connelly, Nabarrete, & Smith, 2008). Within the conflict education module, experiential learning is implemented using scenarios created from the experiences of the participants and acted out using role playing within the environment of the workshop.

Since instigating a conflict situation as part of a learning experience may create unwanted outcomes, the use of a vicarious experience is utilized in the education module *Embracing Conflict: A Bridge to a Healthy Work Environment*. The vicarious experiences will be accomplished within the module by utilizing conflict scenarios to be role-played by the participants. During the interactive role-play exercise, the facilitator of the learning lab will engage participants to focus on the emotional aspects of the conflict scenarios while providing guidance and feedback on the appropriate conflict resolution strategies. Connecting learning to emotions and real events allows individuals to identify with the situation on a personal level thereby increasing their motivation to change their behavior.

The expectation is that a scenario is presented by one participant and is to be acted out by two others as a role-play. The creator of the scenario acts as an evaluator and provides feedback regarding the appropriateness of the conflict

resolution technique and the quality of the interaction. Following the feedback of the evaluator, the individuals involved in the role-play situation provide additional feedback focusing on the emotional component of the interaction. Providing each individual an opportunity to participate in each of the three roles reinforces the positive outcomes of appropriately resolving conflict from three different perspectives.

Addressing interpersonal conflict from a variety of perspectives and using real life examples helps to prepare new charge nurses for the dynamic nature of the patient care unit. By remaining flexible and experiencing a variety of conflict situations, charge nurses will be able to choose an appropriate strategy depending upon the circumstances. No two conflict situations are the same; therefore, it is essential that the charge nurse understands that the manner in which conflict is handled, and not the conflict itself, determines whether conflict is a positive or negative experience (Mahon & Nicotera, 2011). Developing the motivation and ability to constructively resolve interpersonal conflict within the practice of the charge nurse will go a long way to creating and sustaining the relationships essential for a healthy work environment.

Teaching charge nurses appropriate conflict resolution techniques through learning in which they can and experience the benefits of appropriately resolved conflict represents the utilization of two sources of influence for enacting lasting change (Patterson et al., 2008). Concentrating on the personal levels of influence is supported by the nursing literature and is consistent with principles for the practice of the professional nurse (AACN, 2005; American Nurses

Association, 2010; Homer & Ryan, 2013). Additional support for the emphasis on the personal level of influence can be found in exploring key concepts of Margaret Newman's Theory of HEC.

Theoretical Concept Exploration

Margaret Newman's emphasis on the nurse-patient relationship provides an easy transition for the application of key concepts found in her theory to the creation of a healthy work environment and the importance of resolving interpersonal conflict. As a nurse and patient interact in a therapeutic relationship they are both transformed to a higher level of consciousness by sharing information and applying meaning to the evolving pattern. In a similar fashion, individual care providers are transformed as they interact and share information and gain insight into the needs of the patients requiring their care. Expounding the concepts of expanding consciousness, mutuality, and pattern of the whole is offered to aid in the application of resolving conflict that is specific to nursing knowledge.

Expanding Consciousness

Newman's Theory of HEC asserts that consciousness is the manifestation of information contained in the fields of energy that are recognized as patterns (Newman, 2008). The interaction of the patterns allows for the exchange of information and for personal transformation to take place. The patterns recognized as individuals interact with each other and the pattern of the environment in a continuous exchange of information and expansion of knowledge. The "aspects of ourselves we associate with mind are different

manifestations of the same underlying pattern” (p.25) and therefore the transfer of information and creation of new knowledge is the expansion of consciousness. Viewed from the perspective of the Theory of HEC, a patient care unit is the manifestation of a complex system of interacting fields of energy recognized as unique patterns. The pattern recognized as a multidisciplinary team is the manifestation of the expanding consciousness resulting from the interrelated and interdependent interactions of individual patterns as they interact to make decisions regarding appropriate treatment of patients. The impact on the patient is the result of the combined efforts of the team based on information shared in relationships as they interact with each other and the environment.

In the environment of a patient care unit, expanding consciousness results from gaining new knowledge and meaning as individuals interact in authentic relationships that are founded on trust and characterized by unconditional respect for others. Authentic relationships facilitate insight into the meaning of events and reveals opportunities for action previously unknown. The creation of authentic caring relationships requires individuals to become attuned to their own attitude and beliefs and letting go of biases to see opportunities in alternative points of view (Marquis & Huston, 2012). Opportunities are made known as new information is gained from the unique perspective of individuals as they interact with each other.

Newman’s Theory of HEC embodies the essence of collaboration in the resolution of conflict. In the presence of true collaboration, individuals set aside their own original goals and establish a new common goal as the priority

(Marquis & Huston, 2012). In this process, individuals accept mutual responsibility and focus on problem solving in a joint effort to achieve a mutually satisfying solution. Healthcare organizations that support this type of problem solving create environments conducive to healing for patients and care providers (Shirey, 2006). The expansion of consciousness that allows for creation of a healing environment requires a process of mutuality in relationships where there is a shared purpose in discovering meaning in the evolving pattern.

Mutuality

Mutuality is a core concept of Newman's Theory of HEC and an essential component of facilitating constructive conflict resolution. The mutuality experienced in authentic relationships is required for individuals to share information and transform to a greater consciousness. From the perspective of the Theory of HEC, mutuality is the manifestation of the caring presence in the process of the nurse-patient relationship. The development of an authentic relationship is the first step of the process of the nurse and patient's engagement to find meaning in the mutual experience (Newman, 2008). The mutuality of the nurse-patient relationship described by Newman is "characterized by receptivity, reciprocity, and a feeling of oneness" (p.23) in which individuals have a genuine concern for others. This type of relationship promotes insight into another's perspective and promotes a consciousness that is more inclusive and caring. Mutuality in relationships creates insight into the shared consciousness and a greater understanding of self and others. The mutual reflection of the

experience, in the presence of an authentic caring relationship, fosters trust and open dialogue between the patient and the nurse.

The development and nurturance of authentic relationships among individual members of an interdisciplinary team fosters “an environment of respect, collaboration and support, and ultimately less conflict” (Almost et al., 2010, p. 988). The presence of authentic relationships minimizes the likelihood of a disruptive outcome from conflict by creating a shared meaning of the event and viewing the situation as a mutual problem to be solved (Deutsch, 2006). The mutuality of the process of conflict resolution as well as the nurse-patient interaction evolves as trust is established in relationships. In the absence of trusting relationships, a work environment is likely to experience excessive conflict that adds stress and leads to further distrust. As leaders of a patient care unit, a charge nurse must be skilled at developing authentic relationships with a high degree of trust that support cooperative approaches to resolving conflict. The existence of trust between individuals affirms the authenticity of the relationship and supports the creation and sustenance of a healthy work environment.

A healthy work environment results from the dynamic process found in authentic relationships in which personal transformation takes place in those involved to a state of greater meaning and understanding of themselves and each other (Newman, 2008). The charge nurse that has an understanding of the Theory of HEC and is aware of his or her own underlying attitudes and biases, is able to gain insight into another’s perspective and allow personal transformation

to take place. Practicing from the perspective of mutuality, the charge nurse is able to collaborate with others to learn new skills and exchange information for improving patient care, create mutually satisfying relationships, and ensure the patient care unit is a healthy place to work.

Pattern of the Whole

The expansion of consciousness is only possible in environments where information is shared freely in an interdependent interrelated dynamic process stemming from the mutuality of authentic relationships. Newman (2008) states that creating authentic relationships requires individuals to recognize and attend to the evolving pattern as the underlying fields of energy interact in the creation of the pattern of the whole. Patterns unfold and reveal themselves in the process of interacting as they intertwine in authentic mutual relationships to expose new meaning of one's life events and their relationships (Newman, 2002). Meaning is revealed in the process of interacting in authentic relationships as individuals gain insight into alternative choices of action from the sharing of reliable and trustworthy information. The evolving pattern from interacting in authentic relationships is the manifestation of information contained in the expanding consciousness and recognized as new opportunities are revealed and knowledge is gained. New knowledge transforms individuals to a higher level of consciousness and adds to the collective consciousness of the whole as they interact with others and the environment. The interaction of the unfolding pattern of the individual with the environment creates a new pattern of the whole (Newman, 1994). The ability for individuals to adapt to the dynamic changes in

the environment of a patient care unit is dependent on the expansion of consciousness made possible through the creation of new knowledge. The evolving pattern can be seen in the manifestation of a highly collaborative interdisciplinary team consisting of relationships built on trust and respect.

The concept of pattern of the whole within Newman's Theory of HEC is reflected in the collaboration necessary for constructive resolution of interpersonal conflict. In the presence of true collaboration, individuals set aside their own original goals and establish a new common goal as the priority (Marquis & Huston, 2012). In this process, individuals accept mutual responsibility and focus on problem solving in a joint effort to achieve a mutually satisfying solution when conflict arises. Healthcare organizations that support this type of problem solving create healthy work environments conducive to healing for patients and care providers.

Individuals working on a patient care unit functioning in the paradigm of a healthy work environment trust and support each other and view interpersonal conflicts as opportunities for improving patient care rather than something to avoid. As these individuals interact and influence others outside their immediate surroundings, they potentially extend the benefits of a healthy workplace throughout the entire organization. In contrast, individuals working on a patient care unit that exhibits hostility, arrogance, and greed focus on self-serving goals that may not be consistent with those of the patient or organization. The success of an organization and its individual groups is dependent on its ability to successfully resolve conflict and value individual differences as opportunities for

positive change (Crowell, 2011). Unresolved interpersonal conflict on a patient care unit has the potential for inflicting negative consequences to individuals throughout the organization as well as the organization itself.

The effective interdisciplinary team optimizes their ability to provide safe patient care by integrating the knowledge of all members in dynamic interdependent relationships. The concepts of expanding consciousness, mutuality, and pattern of the whole found in Margaret Newman's Theory of HEC correspond and support the importance of resolving conflict in the creation and maintaining of a healthy work environment. These concepts are seen in the process of interacting in authentic relationships that enhance the environment of a patient care unit through the integration of information shared by individuals and creating new knowledge. The use of Newman's Theory provides support for the importance of developing nurse leaders able to successfully resolve interpersonal conflict by creating a clear association to the profession of nursing. The use of a conceptual metaphor is offered in the following section to facilitate a more profound understanding of this association.

Metaphor

According to Kenneth Sole (2006), a leader in interpersonal conflict resolution, "conveying the substance of conflict resolution methodology on the printed page is all but impossible" (p.806). The dynamic nature of interpersonal conflict, and developing the skills to resolve it, requires both a broad view of the concept of conflict while attending to the specific knowledge in a flexible manner. There is no single approach to resolving conflict that will work in every situation

therefore; individuals must rely on their understanding of conflict to choose appropriate strategies for a given situation (Deutsch, 2006; Sole, 2006). To provide a more intuitive understanding of conflict, its causes, consequences, and strategies to appropriately resolve it, the metaphor entitled Relationships: The Bridge To Resolving Conflict (see Figure 1) is offered.



Figure 1. Relationships: The Bridge To Resolving Conflict

A bridge spanning a river connects two unique environments inhabited by two equally unique groups of people and allows them to interact and share information and resources. In the absence of a bridge, individuals are isolated from each other and unable to capitalize on the diverse experiences of individuals on the other side of the bridge, minimizing their adaptability to an ever-changing environment. Individuals living in isolation are unable to learn new skills and expand knowledge due to their nonexistent exposure to alternative points of view. Knowledge gained in isolation is limited in scope and does not reflect the diversity that the world has to offer. According to Wheatley (2007), humans learn best when in relationship with others as they “organize in

communities with those who have skills and knowledge that are important to us” (p.140). New ideas and potential actions evolve out of interacting in authentic relationships with others when there is an appreciation for the differences of thought.

The bridge in the metaphor represents the relationships between individuals that unite thoughts and knowledge in a meaningful way with a shared purpose. As individuals interact with each other their patterns intersect and overlap, which evolve into an “interference pattern that continues and encompasses the whole environment” (Newman, 1994, p.106). The ability to find a shared meaning among a multidisciplinary team in the unfolding of the pattern depends upon the presence of authentic relationships. An authentic relationship between members of the interdisciplinary team capitalizes on the diversity of individuals, creates new knowledge, and expands consciousness. Patients benefit from a more comprehensive view of their situation and interventions that are more appropriate and meaningful. In the absence of authentic relationships, or a bridge, there is isolation; in the presence of authentic relationships, there is collaboration and the ability to capitalize on the diversity of thought with a shared purpose. The mutuality experienced in authentic relationships diminishes fear and increases the likelihood that individuals will address conflict and utilize constructive strategies in its resolution.

Mutuality in a relationship helps to remove barriers to resolving conflict and supports the free exchange of information and the expansion of consciousness needed for the provision of patient care. Removing barriers to

addressing and resolving conflict requires letting go of one's own biases and seeing the world from another perspective while having a respectful and receptive attitude. The barriers to resolving conflict and developing authentic relationships are represented in the metaphor by the water flowing under the bridge.

The water flowing under the bridge offers false promises in its serene appearance but swift current by instilling fear, both real and imagined, into the individuals living near its banks. While there may be a real fear of drowning in the river, much of the fear is imagined and is a result of not knowing what is below the surface of the water. The fear of the unknown lurking under the surface of the water represents negative perceptions, personal attitudes, ignorance, suspicion, personal biases, and the unsubstantiated negative opinions of others. To overcome these fears we must let go of trying to change others according to our perceptions in order to be "open to the full spectrum of the whole" (Newman, 1994, p.103). When viewing conflict from the perspective of the Theory of HEC, individuals are able to overcome their fears, including the fear of addressing conflict, by letting go of their assumptions and embracing the unknown outcome of a conflict situation as an integral part of the evolving pattern of the whole.

Each of these fears represents a barrier to the creation of authentic relationships necessary for collaboration and appropriate conflict resolution to take place. When barriers are present, and left unaddressed, the ability to provide safe patient care is undermined by an unhealthy work environment. In

order to overcome the barriers to successful conflict resolution, individuals must have the tools and resources to work collaboratively. In addition, individuals must see diversity as an opportunity rather than a source of conflict.

The tools and resources needed to overcome the barriers and see conflict as an opportunity are represented in the bridge metaphor by the supporting structures of the bridge. In the absence of a sound foundation and quality materials or workmanship a bridge is not trustworthy. Within our relationships with others, the ability to interact and engage in meaningful dialogue and constructively resolve conflict “occurs as trust is established and authenticity recognized” (Newman, 2008, p. 60). A poorly constructed bridge is a source of fear, stress, and potential conflict while a bridge that is safe and aesthetically pleasing encourages individuals to cross the river and interact with the individuals living on the other side. Interpersonal relationships that are negative or hostile create fear and causes individuals to avoid addressing conflict while authentic relationships are able to see conflict as a mutual problem to be solved. Individuals in authentic relationships assume the best of others’ intentions and are more likely to search for constructive resolutions to conflict (Deutsch, 2006). Individuals interacting in authentic relationships recognize the value of diversity, communicate respectfully, and possess a genuine concern for others. The mutuality of authentic relationships enhances the work environment by promoting the desire of individuals to share information while increasing the believability of the knowledge found within the information. The presence of authentic relationships with the work environment of a patient care unit helps individuals to

recognize conflict, and the diversity of individuals that create it, as an opportunity for growth and development rather than something to avoid.

Application of Metaphor to Nursing Practice

Avoiding conflict by isolating oneself physically or psychologically deprives individuals of the rich beauty of the world and the information available only through interacting with others. To fully experience what the world has to offer, we must embrace conflict as a part of our relationships with others as well as an integral part of the evolving pattern of the whole. Viewing events only from one's own perspective diminishes insight into the possibilities available for action. It is through the interactions with others in authentic relationships that consciousness is expanded and knowledge is gained. Relationships that are meaningful and satisfying encourage individuals to share resources and information and expose them to the diversity of the world and the multitude of new information it has to offer. The mutuality found in authentic relationships helps the creation of a shared vision and supports the collaboration between individuals providing patient care.

In the building of the bridge, individuals are required to collaborate on many levels to combine skills while appreciating the value of each other's contributions. Similarly, within the work environment of a patient care unit not one individual is able to accomplish alone what is possible through true collaboration. To accomplish true collaboration Newman (2008) stresses the need to "reformulize the health-care system as one of cooperation, collaboration, and partnership" (p.95). The collaborative efforts of individuals when building a

bridge is seen in a strong foundation and quality workmanship that ultimately leads to a broader and more inclusive view of the world as individuals cross over the bridge to interact with others.

The collaborative efforts of individuals working in a patient care unit is seen in an environment which offers optimal care for patients through the integration of “specialized knowledge and skills of nurses, physicians, administrators and multiple other professionals” (ANA, 2010). Accomplishing the integration of skills and knowledge requires skilled communication, collaboration, and transformational leadership (AACN, 2005). Incorporating the skills of communication, collaboration, and transformational leadership into the practice of a charge nurse supports the creation of authentic relationships among the interdisciplinary team that are essential for safe patient care. In other words, with the appropriate skills in place, charge nurses are able to build bridges between the diverse skills and knowledge of an interdisciplinary team and create an environment that is greater than the sum of the parts. In such an environment, conflict is likely to be embraced as a natural part of interacting with others and decrease the likelihood conflict will be avoided.

Avoiding the fear of the unknown, or avoiding conflict, perpetuates isolation and fosters the development of unhealthy relationships that sustain conflict because there is no opportunity to learn that one’s perception of the conflict may be a misunderstanding or misjudgment (Deutsch, 2006). Authentic relationships based on trust are able to support individuals through interpersonal conflict with a cooperative approach to solving problems. A cooperative

approach to conflict resolution leads to an increased perception of similarity in beliefs while facilitating an environment of support and openness. Work environments with these attributes of collaboration are characterized by a readiness to be helpful, an open exchange of information, and sensitivity to common interests while de-emphasizing opposed interests (Deutsch, 2006). Without collaboration, it is common to witness dysfunctional work environments with uncontrolled chaos and individuals working in isolation of one another without knowledge of the others intent or goals. Conflict occurring in dysfunctional environments is avoided entirely or resolved poorly, leading to a duplication of efforts and substandard outcomes compared to those resulting from a collaborative effort.

In work environments governed by strict rules and social hierarchy there is very predictable behavior and little conflict until individuals are required to adapt to change (Pondy, 1967). Change and conflict are an inevitable aspect of the patient care environment; therefore, exposure to the inherent individual differences is needed to promote the adaptability needed to provide safe and effective patient care. Once this belief is instilled in the mindset of nurse leaders, such as charge nurses, the more satisfying they will find their professional relationships and address conflict when it occurs. More importantly will be the creation of a healthy work environment that supports the best possible care for patients through the utilization of the integrated knowledge of a multidisciplinary team.

Conflict is a normal and necessary part of human interactions. The outcome from a conflict situation can be positive or negative depending on the perception of individuals, their knowledge of conflict resolution strategies, and their motivation to utilize the knowledge and skills. The education module *Embracing Conflict: A Bridge to a Healthy Work Environment* was developed in response to witnessing the difficulty nurses have in addressing and resolving conflict. With support from the literature, the development of the education module focused on changing the behavior of charge nurses from avoiding conflict to addressing and constructively resolving conflict when it occurs in the work place. Expounding the concepts of mutuality, expanding consciousness, and pattern of the whole from Margaret Newman's Theory of Health as Expanding Consciousness provided a theoretical framework to guide the development of the module. Further clarification of key concepts was accomplished using the metaphor *Relationships: The Bridge To Resolving Conflict*. The metaphor provides a vision of interpersonal conflict as an inevitable aspect of human interaction that can have a positive impact on individuals and the environment when appropriately resolved in the context of authentic relationships. In authentic relationships, individuals are more likely to share useful information that can be disseminated to others outside the relationship thereby improving the whole environment.

Throughout this chapter, theoretical support was provided and clarified for the development of the education module *Embracing Conflict: A Bridge to a Healthy Work Environment*. The implementation of the module as part of an

interactive learning lab for orienting charge nurses is expected to change the behavior of charge nurses and help facilitate a healthy work environment.

Although the content and techniques used in the module's development are based on sound principles and concepts, the effectiveness of the education must be verified to ensure that resources are utilized efficiently. The next chapter discusses the process for evaluating the module's effectiveness in facilitating the desired learning and behavioral change.

Chapter Four: Discussion and Evaluation

A passionate plea for educating nurse leaders such as charge nurses on the strategies to address and resolve interpersonal conflict serves no purpose if there is no change in the behavior of those being educated. What may be a well-designed education module does not guarantee a change in behavior that constitutes meaningful long-term improvements. While knowledge itself is a desirable pursuit, the manner in which individuals put their knowledge to use is the final measure determining if the goal of education has been achieved. The opportunity to learn a new skill or gain new knowledge may offer some personal satisfaction to the learner and meet requirements laid out for the educator, however, in the absence of evaluation there is no way to determine if the efforts were effective. If the effectiveness of education is not evaluated, efforts are more likely to be wasted on strategies that are ineffective or poorly valued by the learner.

Criteria For Evaluation of Success

The influencer model, used in the development of the education module *Embracing Conflict: A Bridge to a Healthy Work Environment*, stresses the importance of behavior change as the final determinate of whether learning has taken place and if the knowledge gained has been implemented into practice (Patterson, et al., 2008). Within the large Midwestern teaching hospital where this education module is to be implemented, the expected behaviors have been made clear in the institution's focus on five safe behaviors. The behaviors are pay attention to detail, communicate clearly, have a questioning and receptive

attitude, hand-off effectively, and support each other. These behaviors, which are expected of every employee, empower employees to speak up when they have concerns, regardless of their role. Having already identified the behavior that is desired to be changed, implementing a long-term study to evaluate the effectiveness of the education module is impractical and not necessary. The influencer model suggests the use of observation to evaluate for a change from undesirable to the desired behavior (Patterson et al., 2008). As noted earlier, the undesirable behavior is avoiding conflict and the desirable behavior is to address conflict and utilize constructive conflict resolution strategies. As individuals participate in the scenario based learning activities that are part of Embracing Conflict: A Bridge to a Healthy Work Environment education module, the facilitator of the interactive learning lab observes for the desired behaviors and provides guidance and feedback to the participants.

Using observation to identify behavioral changes in learners is supported by adult learning theory outlined by Knowles, Holton, and Swanson (2005). The use of direct observation and immediate feedback from the facilitator of the interactive learning lab provides learners with an opportunity to apply knowledge in a safe environment. As individuals interact during the scenario based learning activity, a facilitator observes for their utilization of the conflict resolution strategies outlined in the education module Embracing Conflict: A Bridge to a Healthy Work Environment. The environment of the interactive learning lab where the education takes place provides a supportive atmosphere as the facilitator guides participants toward the desired behavioral outcome. Within the

supportive environment of the learning lab, mistakes are recognized as an opportunity to gain further insight into the strategies of successful conflict resolution as individuals apply their knowledge and practice their newly acquired skills. While the use of direct observation is an effective evaluation tool within the controlled environment of a learning lab, evaluating new charge nurses for long-lasting behavioral change using direct observation is not practical. In addition to the immediate evaluation conducted through direct observation, the intent is to utilize data from an employee satisfaction survey to evaluate for lasting effects.

The employee satisfaction survey, which is conducted every two years, assesses employee perceptions of work environment, professional relationships, commitment to safety, leadership, and overall job satisfaction. Twelve specific questions (see Appendix B) were selected from the survey to evaluate for lasting behavioral changes in addressing and resolving interpersonal conflict. The survey questions have been selected for their association with the desired behavioral changes resulting from the implementation of the education module *Embracing Conflict: A Bridge to a Healthy Work Environment*. In the absence of a controlled study, the results from such a broad survey cannot be directly attributed to any single factor such as the use of an education module (Knowles et al., 2008). Although the results of an employee satisfaction survey may not be a direct reflection of the success or failure of the education, it does provide an indication for the long-term need for changing focus of future education to maximize resources and efforts. If future employee satisfaction surveys indicate an improvement in the area of speaking up and addressing conflict, then efforts

can be re-directed to other areas of concern; thereby, using resources as efficiently as possible.

After participating in the Embracing Conflict: A Bridge to a Healthy Work Environment education module, the new charge nurses conclude their experience in the interactive learning lab by creating a personal plan for their professional development. This process is supported by what Knowles, Holton, and Swanson (2005) describe as “the fundamental conception of adult education as continuing education: rediagnosis of learning needs” (p.134). In the process of completing a professional development plan, learners are expected to evaluate their learning and the presence of desired new behaviors against their actions to search for discrepancies between the two. The self-identification of learning needs along with an ongoing personal evaluation helps to hold individuals accountable to their own professional development. Further accountability to the individual’s professional development is facilitated by having individuals share their professional development plan with their direct supervisors. By sharing their professional development plan with their supervisors, the new charge nurse will have gained the support of another nurse leader that will aid them in being accountable to their plan.

The importance of evaluating the outcome of the learner is a primary concern following the participation in any education endeavor; however to ensure long term success, the strategies for teaching are also evaluated to remain flexible in the teaching methods and content of the education program. The influencer model described by Patterson et al. (2008) does not focus on a

specific process for addressing a specific problem, rather they outline “strategies and skills that can be applied across the vast array of human challenges” (p.6) that can be utilized in a dynamic fashion to meet changing needs of learners and the environment. Direction for modifying the content and teaching strategies contained in the Embracing Conflict: A Bridge to a Healthy Work Environment education module is accomplished by using open-ended questions at the conclusion of the interactive learning lab. The value and quality of the learning activities are assessed by asking participants what they found most beneficial in the learning process and what new skills they felt they would most likely utilize as they begin their new role as a charge nurse. The qualitative information gained from asking open-ended questions will be used to direct future efforts at providing meaningful education. Qualitative information received by soliciting feedback from learners, when combined with quantitative results, has been shown to provide the most useful information for evaluating educational programs and their outcome (Knowles et al., 2006). The use of open-ended questions, direct observation, and data from the employee satisfaction survey provides the necessary insight into the effectiveness of teaching strategies and the value learners place on the knowledge and skills being taught. The ultimate goal of implementing the education module Embracing Conflict: A Bridge to a Healthy Work Environment into the charge nurse orientation process is for individuals to embrace conflict as a normal part of interacting with others and to utilize effective conflict resolutions strategies to create a healthy work environment.

Despite conflict being a normal and essential component of human interaction, the negative emotional responses typically associated with conflict induce behavioral responses such as avoidance and minimizes the potential for a positive resolution to conflict situations (Deutsch, 2006). The environment of a patient care unit is a complex system of diverse interdependent agents interacting in relationships, adapting to change and in turn affecting more change (Porter O'Grady & Malloch, 2011). The ability of a charge nurse to interact interdependently with the diversity found in the patient care unit depends upon the support from others as well as their emotional demeanor. Supportive relationships and an emotionally confident demeanor reinforce the resolve needed to address conflict and model the behavior of effective conflict resolution to others.

Finding a balance between authority and building relationships necessary for the smooth functioning of the patient care unit may be a struggle for charge nurses. Charge nurses need to make decisions that others may find unpopular one day and then work alongside the individual that disagreed with their decision on a different day. For instance, the assigning of a particularly difficult patient by the charge nurse could be viewed as a personal attack and motive for future retaliation of some kind. However, the presence of mutuality in authentic relationships empowers charge nurses to make difficult, and sometimes unpopular, decisions with confidence. Confidence is found in knowing that their relationships are not jeopardized by the decisions they make and that any conflict that arises will be addressed as a mutual problem to be solved. The application

of an appropriate theory to interpersonal conflict provides a framework for a consistent approach to interpersonal interactions and resolving conflict in which meaning to the events and purpose of an individual's actions is made. Viewing the role and responsibilities of the charge nurse from the perspective of Margaret Newman's Theory of HEC provides support and rationale for the decisions a charge nurse makes and guides the manner in which they accomplish their responsibilities.

Appropriateness of Margaret Newman's Theory to Nursing Practice

Margaret Newman's (2008) emphasis on the importance of the nurse-patient relationship in the mutual process of facilitating a transformation to a higher level of consciousness for both the nurse and the patient is equally applicable to the relationships within a multidisciplinary team. The existence of authentic caring relationships based on trust and respect amongst the members of a multidisciplinary team is necessary for the smooth operation of the patient care unit and for the provision of optimal patient care. Although trusting and caring relationships are necessary for providing optimal care, the underlying differences of the individual members of a multidisciplinary team is the source of conflict. When the differences between individuals are viewed as an opportunity for integrating knowledge and expanding consciousness, patients benefit from care that considers all options. In the absence of an appreciation for differing perspectives, individuals avoid each other and patients suffer from care that is prescribed from a narrow point of view. Without authentic caring relationships, members of a multidisciplinary team are essentially working in isolation.

Individuals working in isolation are unable to transform themselves, their patients, or the environment through the integration of knowledge into the collective consciousness of the pattern of the whole.

In the absence of interaction with others, it is possible to avoid conflict, however the ability to adapt to change is stifled and progress is slowed due to the absence of alternative points of view to challenge an individual's way of thinking. Interpersonal interaction, and the inevitable conflict, is therefore required for adapting to change and expanding consciousness. The Theory of HEC asserts that the patterns manifesting themselves out of interacting with others provide a "multifaceted level of awareness to sense the underlying pattern" (Newman, 2008, p. 35). Applying the assertion that pattern manifestation is the result of interacting with others to the development of the education module *Embracing Conflict: A Bridge to a Healthy Work Environment* provides the focused attention on developing meaningful relationships that support satisfying resolution to interpersonal conflict. The principles of the Theory of HEC that guide the development of the nurse-patient relationship is equally pertinent for the development of relationships able to overcome conflict and realize the potential benefits that can occur when conflict is appropriately resolved. The successful resolution to conflict begins with identifying one's own biases and letting go of them to see the reality of a situation from another point of view. The interpretation of the event is developed through the unique interaction with others and the environment, not in isolation.

By letting go of one's desire to be right and recognizing the value of others as part of an interdisciplinary team results in the expansion of consciousness. As noted earlier, the information shared freely in trusting relationships creates an awareness of alternative courses of action previously unknown. Expansion of consciousness is not possible in the absence of interacting with others. Although underlying differences between individuals will always be present to some degree, in the presence of trusting relationships these differences are appreciated and incorporated into the expanding pattern of the whole. This evolving pattern of the whole includes the individuals of a multidisciplinary team and the environment in which they work.

Newman's Theory states that meaning is found in the human-environmental pattern where individuals are seen as a dynamic field of energy in a dynamic and continuous interaction (Newman, 2008). This conceptual view of the interdependence between individuals and environment supports the efforts to develop an education module on conflict resolution for charge nurses that will in turn create a healthy work environment. As individuals interact with each other in caring and trusting relationships, they are more willing to accept the differences and find intrinsic value and meaning in alternative views rather than see them as a threat or a source of conflict. Therefore, the need to support the health of complex interdependent relationships is at the core of creating a healthy work environment that supports patient care. Providing the safest and most efficient patient care is simply not possible without the support of others in meaningful relationships. The importance of relationships and the sometimes difficult task of

maintaining them is captured by Margaret Wheatley (2007): “Everywhere life displays itself as complex, tangled, messy webs of relationships. From these relationships, life creates systems that offer greater stability and support than life lived alone” (p. 28). The point is clear, the development and nurturance of meaningful and caring relationships is essential for creating a healthy work environment that integrates knowledge in order to provide the best possible patient care.

The truth of a situation is not within oneself or found in the opinion of another, it lies somewhere in between the two and is discovered only when the meaning is shared with others. There are moments individuals may feel confident they know the truth of a situation and then the influence of another, often in times of conflict, changes the direction of their thoughts. Out of nowhere, reality is changed forever, always traveling forward, all because conflict made them see something differently and they allowed themselves to be changed by considering a different view.

Personal Reflection

The presence of conflict in the lives of individuals is evidence of the diversity in the universe and stimulates the senses into awareness of the vast beauty found in those differences. Despite the universal presence of conflict, individuals are not always able to see or accept the beauty in the diversity. The meaning of conflict is different for each individual and as they evolve and transform, the meaning changes. We are able to identify our transformation as we reflect back on previous experiences of interpersonal conflict and are able to

regard issues that caused us distress in the past as trivial events. We are unable to alter the events of the past; the issues that caused us distress are a permanent part of our perception of the world and influences how we act now and in the future. Allowing oneself to be transformed through our interactions with others, we are able to apply new meaning to the events and be better prepared to deal with similar stressful situations in the future. Our transformation facilitates a more profound and inclusive view of the world and expands our consciousness as we interact with the vast diversity the world has to offer and integrate our view into the ever-changing pattern of the whole. The inevitability of experiencing conflict as we interact with others is proof of the existence of diversity and an indication of our transformation as we struggle to find new meaning in the events of our lives as a result of interacting with others.

The inability to recognize the potential benefits of a conflict situation perpetuates the belief that conflict is a negative outcome of human interaction and is something that should be avoided. Avoiding conflict or failing to appreciate the innate differences that make us individuals, creates and sustains our personal biases and negative perceptions of others that make us unreceptive to alternative points of view. If we are unable to let go of our negative, often times unsubstantiated, view of others then the potential for finding meaning in the interactions with others is lost. The distinct lack of focused attention on recognizing the positive aspects of conflict within the literature has helped illuminate the need for developing the education module *Embracing Conflict: A Bridge to a Healthy Work Environment* in order to improve charge nurses'

understanding of conflict and add to their professional development. As the future of healthcare continues to evolve, leaders capable of utilizing every opportunity for growth and development, including interpersonal conflict, will be necessary to ensure the ongoing delivery of safe patient care.

The overriding tendency of nurses to avoid conflict is a frequent finding in the relevant literature and has been identified as a key behavior that should be addressed and changed (Almost, et al. 2010; Haraway & Haraway, 2005; Mahon & Nicotera, 2011). Implementing an education module that focuses on the positive aspects of interpersonal conflict while attending to the necessary knowledge regarding conflict, its causes, and strategies to appropriately resolve it is a worthwhile endeavor. By recognizing the benefits of conflict, individuals are more likely to engage in appropriate strategies to resolve it and preserve their professional relationships. The constructive resolution of interpersonal conflict is highly dependent on the ability of the individuals involved to recognize the conflict for what it is, evaluate its significance, and utilize appropriate interventions directed at a collaborative solution.

The research and development of the Embracing Conflict: A Bridge to a Healthy Work Environment education module has provided a great deal of personal insight into the complex nature of conflict and its impact outside the interpersonal relationships in which it is manifested. Working as a nurse manager, this author has been involved in a large number of conflict situations. A great majority of these situations have provided anecdotal evidence supporting the need to provide additional education on conflict resolution. The anecdotal

evidence suggesting that nurses are poorly equipped to effectively address and resolve interpersonal conflict helped guide the review of literature that validated the need to increase the conflict resolution abilities of charge nurses. Nurse manager colleagues who have voiced similar shortcomings in the ability of staff to independently resolve conflict have provided additional support for the development of the Embracing Conflict: A Bridge to a Healthy Work Environment education module. Once the education module is implemented and evaluated, the benefits of embracing conflict as a positive influence in the creation of a healthy work environment can be supported with data. More importantly will be the development of nurse leaders, such as charge nurse, to disseminate the change in behavior in others as they model the behaviors and appropriate strategies in the successful resolution of conflict.

Facilitating the professional development of charge nurses helps to ensure that patient care is provided safely and efficiently in the environment of a patient care unit. The ability of a nurse to meet the leadership expectations of the charge nurse role is dependent on the presence of specific skills and knowledge along with the ability to put them into practice. The development and implementation of the education module Embracing Conflict: A Bridge to a Healthy Work Environment is intended to develop the essential skill of addressing and resolving conflict using a combination of didactic and experiential learning activities. The module is intended to be a dynamic tool that can be modified based on feedback from participants and the utilization of pertinent

questions from an employee satisfaction survey to evaluate for the presence of desired behavioral changes and the evidence of a healthy work environment.

The following chapter discusses options for utilizing the education module *Embracing Conflict: A Bridge to a Healthy Work Environment* to develop conflict resolution skills in staff nurses that are unable to participate in the interactive learning lab for charge nurse orientation. The implication of effectively resolving conflict within a patient care unit in the creation of a healthy work environment will be expanded in the following chapter to include the potential benefit to the entire organization.

Chapter Five: Conclusion and Recommendations

The complex nature of healthcare requires the utilization of a variety of skills and knowledge to ensure it is able to successfully provide patient care now and in the future. The idea that any single individual is able to obtain and utilize all the knowledge and skills necessary for the safe and efficient delivery of patient care is unrealistic. The success of the organization and more importantly, the health of the patients seeking care, depends on the ability of individuals to interact in meaningful relationships and facilitate a collaborative approach to patient care. In the chaotic environment of a patient care unit, the ability to collaborate can easily be undermined when the inevitable interpersonal conflict is left unaddressed or ineffectively resolved. The ability to facilitate a constructive resolution to conflict is highly dependent on the presence of mutuality in relationships where conflict is viewed as a mutual problem to be solved (Deutsch, 2006). The diversity essential to ensure the success of healthcare organizations makes interpersonal conflict an inevitable outcome as individuals with different thoughts, beliefs, and backgrounds interact. Given that interpersonal conflict is an inevitable outcome of human interaction, it makes sense to educate nurse leaders on constructive conflict resolution strategies that minimize the potential negative consequences of conflict.

Implications for Transformational Nursing Leadership

There are many strategies available for resolving conflict, however findings in the literature consistently confirms nurses are most likely to try and avoid conflict out of fear of consequences and ignorance of more effective

conflict resolution strategies. The focus of the education module *Embracing Conflict: A Bridge to a Healthy Work Environment* is on changing the behavior of charge nurses in confronting and resolving interpersonal conflict while facilitating the development key characteristics of transformational leaders.

Transformational leaders possess a trustworthy character and utilize effective communication skills to develop meaningful relationships. The relationships developed by a transformational leader inspire others in the creation of a shared purpose and an environment with a strong sense of teamwork that is better prepared to navigate change (Crowell, 2011). The education module *Embracing Conflict: A Bridge to a Healthy Work Environment* supports the development transformational leaders by creating a shared vision that emphasizes the positive effects of constructively resolved conflict. As the new charge nurse utilizes their skills of conflict resolution within the work environment of the patient care unit, they inspire others by modeling the positive outcomes possible when conflict is appropriately addressed and resolved.

The inevitability of interpersonal conflict developing within our personal and professional relationships transforms our perceptions of others and the events surrounding the conflict situation. Since conflict stems from an individual's perception of incompatibilities, regardless of their actual existence, a charge nurse must remain attentive to both internal and external forces that may negatively affect their perceptions and impair their ability to objectively address and resolve interpersonal conflict. While the focus of this project is on developing the leadership skills of new charge nurse, all "nurses are expected to

engage in professional role activities, including leadership” (ANA, 2010, p.10).

Given the standards laid out by the ANA and the universal presence of conflict, it makes sense to utilize the Embracing Conflict: A Bridge to a Healthy Work Environment education module outside the interactive learning lab for charge nurse orientation.

Expansion of Project

Implementing the education module Embracing Conflict: A Bridge to a Healthy Work Environment into the orientation of all new nurses would promote the development of effective conflict resolution strategies while supporting and refining the attributes of transformational leaders within the disposition of all nurses. Further dissemination of the skills and knowledge on conflict resolution is possible by creating a modified version of the charge nurse interactive learning lab and making it available to all staff. Ongoing professional development of charge nurses could be accomplished by creating an online toolkit for conflict resolution. The toolkit would include links to resources for conflict resolution and information that reinforces key concepts from the education module. The development of independent learning activities, and incorporating them into the online toolkit, would provide an additional opportunity for ongoing professional development.

Nurses working in the charge nurse role have a responsibility to the organization, their coworkers, and the patients occupying the units under their direction. The success of any leader in meeting their responsibility, including a charge nurse, does not happen immediately or in the absence of mistakes. The

opportunity to practice the skills of conflict resolution on an ongoing basis would be an additional benefit to the expansion of this module. The possibility of each patient care unit participating in regular practice sessions on conflict resolution that includes staff not in the charge nurse role would assist in expanding knowledge and skills to others. Through an ongoing expansion of the knowledge and skills of conflict resolution through modeling the behaviors of appropriate conflict resolution, the culture of the unit will develop a low tolerance for negative behaviors and destructive outcomes resulting from poorly resolved conflict.

The implementation of this module into the orientation of charge nurses not only helps nurses meet their responsibility to patients, coworkers, and their environment, it is also expected to increase job satisfaction and helps ensure the success of the organization. The fact that nurses fail to address conflict is a testament to the importance of creating nurse leaders willing to address and effectively resolve issues when they arise on the patient care unit. As charge nurses gain the skills of constructive conflict resolution, they demonstrate characteristics of transformational leadership by modeling appropriate behavior and motivating others to a higher moral level and a shared vision. By setting a positive example for others and creating a shared vision, the charge nurse can begin the process of transforming the patient care unit into a work place that is healthy for both patients and the individuals that work there.

Conclusion

The development of the education module Embracing Conflict: A Bridge to a Healthy Work Environment provides the charge nurse with an opportunity to

learn and practice the skills of constructive conflict resolution. Charge nurses that are able, and motivated, to constructively resolve conflict are well prepared to meet their “ethical obligation to maintain and improve healthcare practice environments conducive to the provision of quality health care” (ANA, 2010, p.5). The complex and chaotic environment of a patient care unit is composed of the interdependent relationships among a diverse interdisciplinary team as they interact with each other and their environment. Conflict is inevitable as individuals interact and are exposed to the diversity of thought and the dynamic nature of providing patient care. Constructive resolution of the inevitable conflict requires transformational leaders capable of creating and maintaining authentic relationships. Interacting in authentic relationships promotes open and collaborative dialogue that reveal opportunities and information that transforms individuals to a higher level of conscious and new knowledge (Newman, 2008). The process of transformation begins by recognizing the value in another perspective and letting go of the desire to defend our own point of view when it is challenged by new information.

Responding defensively when our perspective is challenged emanates from ignorance, fear, and arrogance. Ignorant to the fact that alternative thoughts exist, fear of the unknown, and arrogance in the belief that our way of thinking is correct. Letting go of our own perspective to critically think and evaluate the perspective of others reveals opportunities available in the diversity that surrounds us. Conflict is the evidence that diversity exists and is a stimulus we should embrace as an opportunity to learn and expand the consciousness of

the whole. It seems to be a unique idea to admit that opportunities are available to us if we consider another perspective. One has to wonder if individuals enjoy their current situation so much that they are willing to ignore the possibility that it could be better if only they looked at the world through the lens of critical thought.

Each of us has the capacity to be rational and fair in our interactions with others. Accomplishing this task may appear to be an easy and natural endeavor yet in reality, it requires us to critically evaluate our thinking about each other and embrace the diversity we see around us. Avoiding conflict equates to avoiding the opportunities available in the diversity the world has to offer and proliferates egocentric thinking. By embracing a multicultural worldview where closed-minded thinking is discouraged and open-minded thinking is the norm, we will be able to identify and condemn egocentric thoughts and behavior. Having confidence in oneself and our beliefs make it possible to consider all other points of view and evaluate evidence objectively while remaining uninfluenced by overly confident assertions of others. Confidence in oneself allows us to discard our prejudices, overcome our fears, and maintain a fair-minded approach in resolving conflict. A healthcare organization that is able to obtain, support, and disseminate this perspective in resolving conflict will have earned the trust of their patients. As nurses embrace this perspective they will help build not only a better work environment, but also a better society.

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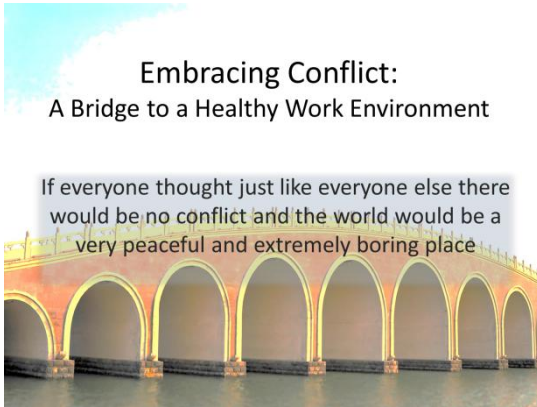
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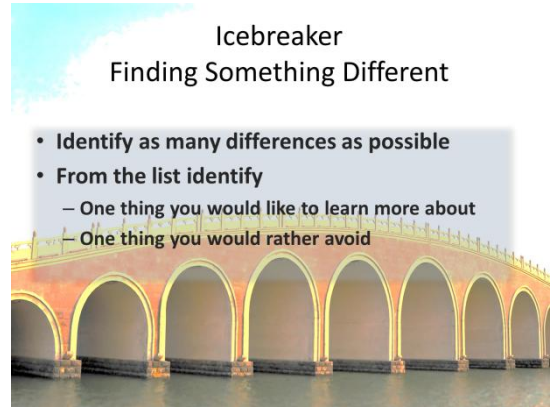
Appendix A

Embracing Conflict: A Bridge to a Healthy Work Environment



Embracing Conflict:
A Bridge to a Healthy Work Environment

If everyone thought just like everyone else there would be no conflict and the world would be a very peaceful and extremely boring place



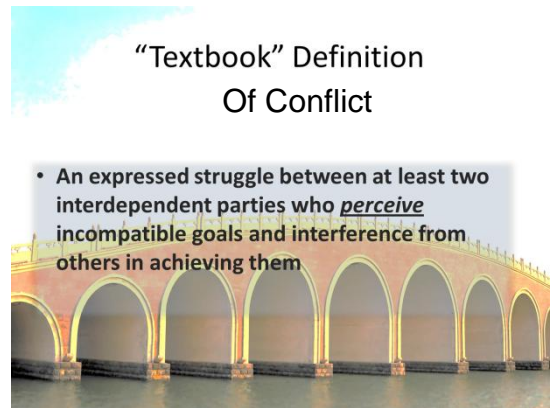
Icebreaker
Finding Something Different

- Identify as many differences as possible
- From the list identify
 - One thing you would like to learn more about
 - One thing you would rather avoid



Why Can't We All Just Get Along?

- Time to talk about some sensitive issues:
 - Who we are
 - Where we come from
 - Peer pressure
 - What 'bugs' us



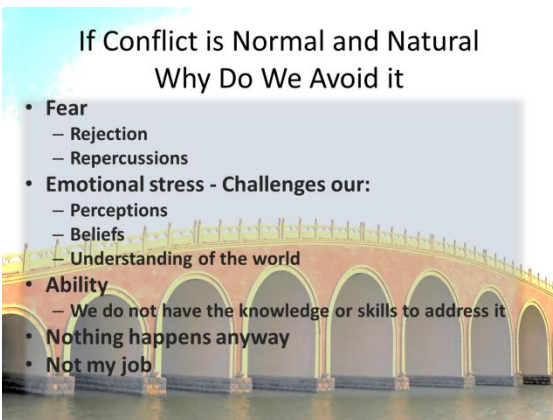
"Textbook" Definition Of Conflict

- An expressed struggle between at least two interdependent parties who *perceive* incompatible goals and interference from others in achieving them



Interpersonal Conflict:
What it is

- A normal and fundamental part of human interaction
- The most frequent dynamic in human relationships
- Represents an opportunity for growth and transformation – stimulates change



If Conflict is Normal and Natural
Why Do We Avoid it

- Fear
 - Rejection
 - Repercussions
- Emotional stress - Challenges our:
 - Perceptions
 - Beliefs
 - Understanding of the world
- Ability
 - We do not have the knowledge or skills to address it
- Nothing happens anyway
- Not my job

CONFLICT RESOLUTION

- “Involves a transformation of the relationship and situation such that solutions developed by the parties are sustainable and self-correcting in the long term.” (Fisher, 2006)
 - Requires reconciliation of differences and restoration of harmony
 - Acknowledging own transgressions
 - Forgiving others
 - Assurance of future peace when conflict arises

Think Differently: “What is in this for me?”

- Self improvement
- Increased creativity
- Better understanding of tasks and problems
- Insight into other’s view’s
- Wider selection of alternatives
- Increased participation
- Improved motivation and energy

Reframing

- Seeing the conflict as a mutual problem to be resolved through cooperative efforts
- Whatever resolution is achieved, it is acceptable to each party and considered to be just by both

Things To STOP Doing

- STOP assuming that your truth is THE truth.
- STOP insisting that other people must agree with you.
- STOP unconsciously assuming that anyone else will see it the way you see it.
- STOP invalidating other people’s experience
- STOP blaming anyone else for how you feel

Check Your Motives

- If your intent is to blame, punish, or criticize, you will accomplish nothing and may damage the relationship.
- “What do I really want for results and for the working relationship?”

Manage Your Emotions

Ask yourself:

- Why would a decent person do this?
 - Assume positive intent
- What is driving my emotions?
 - What is my self talk, my assumptions?
 - What are the facts and am I losing sight of them?
- How have I contributed to this problem?
 - There is more than just “him, her, that person, etc.” in the relationship. You are there too
- Keep your mind open

Time To Speak Up

- If you hesitate ask yourself:
 - What are the consequences of not speaking up or speaking too forcefully?
 - Will the problem continue?
 - Will it affect my relationship with this person?
 - Will it affect others?
- If the answer is “yes” to any of the last three, you need to speak up!

What Do I Say? Four Step Process To Speaking Up

1. State your positive intention and ask permission
2. Describe the facts first, not your judgments or conclusions
3. Describe the impact and/or why you are bringing it up
4. Give the other person an opportunity to respond

Time To Practice:

- Identify a current or recent conflict experienced in the work place.
- Discuss:
 - Who was involved
 - What was the circumstances
 - What was the outcome

Things to Remember

- Create a concert not a performance:
 - You are in this together so everyone benefits
- Use your authority properly
 - See it as a responsibility for the well being of others, not control of others
- Use it or lose it
 - Practice, practice, practice. Every time you avoid conflict you are avoiding an opportunity.
- Be prepared to make mistakes and admit them
 - In the presence of sincere apologies most mistakes are forgiven

Conflict Is Unavoidable

- “If we are so confident that we are right, what possibly could be the harm of listening to another point of view? What is the worst thing that could happen? We could be wrong.”
 - Anonymous

Relationships: The Bridge To Resolving Conflict

Relationships

CONFLICT

Suspicion FEAR Negative Perceptions Ignorance Personal Bias

Shared Meaning Respect Mutuality Knowledge Authenticity Trust

Appendix B

Employee Satisfaction Survey Focus Questions

- There is a high level of trust among employees within my work unit
- Where I work, I feel free to speak my mind without fear of negative consequences
- People where I work are willing to openly confront and solve problems
- Staff will freely speak up if they see something that may negatively affect patient care
- I believe employees treat each other with respect and courtesy
- The institution is committed to creating a Culture of Safety
- My department is committed to creating an environment that is inclusive to both men and women
- My department is committed to creating an environment that is inclusive to both minorities and non-minorities
- There is a spirit of cooperation and teamwork within my work unit
- My work environment is one where we admit and learn from mistakes
- There is mutual respect between physicians/scientists and allied health staff
- There is a high level of trust among employees within my work unit

(Sirota Survey Intelligence)