

# Clinical Supervision: Managing Relationships, Conflict, and Resistance to Change

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## Purpose

The purpose of this course is to outline clinical supervisions procedures for dealing with relationships, conflict, and resistance to change.

## Goal

Upon completion of this course the healthcare provider should be able to:

- List and describe 6 skills needed for supervision.
- Discuss handling relationships, including at least 6 DOs and 4 DON'Ts.
- Describe 7 elements of conflict resolution.
- Discuss 5 approaches to negotiation.
- Discuss 4 elements in dealing with resistance to change.

## Introduction





Clinical supervision can refer to a particular relationship between two professionals in order to promote development or to managerial supervision, the focus of this course. As healthcare costs increase and institutions search for more cost-effective methods of providing care, there is increased use of unlicensed assistive personnel, so almost all professional healthcare providers find themselves in a supervising role. This role may range from team member to team leader to unit supervision to director, but

regardless of the healthcare providers place in the hierarchy of supervision, similar skills are necessary:

- **Clear communication:** Ability to communicate with a wide variety of people in all spheres of influence (patient/client, nurse/nursing practice, and organization/system).
- **Relationship management:** Ability to maintain professional relationships and interact with others.
- **Leadership:** Ability to manage and inspire others.
- **Professionalism:** Understanding and utilization of ethical and nursing standards of care in problem-solving and decisionmaking [See CE course **Critical Thinking: Decision-making and Problem-solving**].
- **Knowledge of the healthcare system:** Ability to see the interrelatedness of different spheres of influence in the healthcare system and to search out information:
  - **Customer/Patients:** Interview patients, and participate in community outreach.
  - **Staff:** Read professional publications, shadow healthcare providers, and attend meetings of other departments/professions.

- **Systems:** Develop mentoring relationships with people in other departments, such as human resources and finance, and participate in community relations groups.
  - **Community/Environment:** Read journals and newspapers and attend workshops and seminars.
- **Business skills:** Ability to apply and use business principles in management, marketing, process improvement, and budgeting.

## Handling relationships

Healthcare providers, such as nurses, are often placed in a supervising position over co-workers and friends. For example, a person may have been working as a team member and then becomes team leader or head nurse for the same group. In other cases, a supervisor is hired from outside the group. For leaders with no or little previous experience, two common responses are 1) show them who's boss and 2) let's all just work together as friends.

### Show them who's boss

Nurse X comes in with a whole new set of rules and changes in procedures to establish authority, often mistaking autocratic leadership for good leadership.

**[See CE course Clinical Supervision: Leadership**

### Styles.]

Nurse X wants badly to make a good impression and is motivated to succeed, but may be unsure how to manage staff members who were previously on the same level and may, in fact, be close friends. If previously part of the group, Nurse X tends to ignore previous relationships and treat everyone the same in order to avoid favoritism, but the result is often overly abrupt and/or controlling behavior.

The primary problem with this approach is that staff members become rapidly resentful and angry and may react in passive-aggressive manners, such as coming late to meetings or "forgetting" assignments. Almost always, conflict begins to arise, causing Nurse X to become even more directive in trying to regain control.

### Let's all just work together as friends

Nurse Y doesn't want to upset anyone and hopes that things will run smoothly if he or she allows staff members to control their

assignments, hoping everyone will do his/her job with Nurse Y staying in the background as much as possible without asserting authority.

Nurse Y also wants to do a good job, but is concerned about how she or he is perceived by others and doesn't really understand the role of a leader. Nurse Y tries to maintain previous relationships as though there has been no change in roles.

The primary problem with this approach is that staff members are rudderless and may take advantage of Nurse Y and often lose respect for this person as a leader. In some cases, situations can become quite chaotic, with work being neglected or missed. Inexperienced staff members receive little or no guidance.

**Practical approaches** Good leaders may emerge with a variety of different leadership styles if they are sensitive to relationship issues, competent, and confident. The first step is to begin slowly without making big changes that may cause resentment or confusion—even when big changes seem warranted! The leader should meet with staff and explain his/her approach to leadership and ask for opinions and suggestions.

If one or two staff members are close friends to the new leader, he or she may be able to take them aside and discuss the importance of keeping personal relationships separate from work so that other staff members don't feel the leader is showing favoritism. Just ignoring a friendship altogether is not a solution.

If the leader is a part of a larger group that socializes together, then the leader faces more of a challenge. It can be difficult to go from complaining about administration (a common past-time of staff) to becoming part of it. A direct approach is often best: "I know we're all good friends, and I value that, but **while we're at work** I'd like us to stay focused on our professional roles rather than our personal relationships, so we can work together as efficiently as possible."

There is a strong relationship between managing relationships and general management skills. The leader should seek out feedback from colleagues about his or her skills in managing relationships. The leader often benefits from a mentor, especially when first beginning to supervise others.

Learning to manage relationships with staff members requires a learning curve for most people, and some learning is simply by trial and error, but some actions can help establish leadership and cooperation from staff. Other actions must be avoided at all costs because they result in loss of respect and authority.

**MUST DOs:**

□ Demonstrate integrity.

- Treat everyone fairly.
- Be honest.
- Explain the reasons for decisions.
- Establish procedures and remain consistent but not rigid in application. Sometimes change is warranted.
- Articulate expectations clearly.
- Remain supportive of staff.
- Provide feedback.
- Handle commitments.

**MUST NOT Dos:**

- Show favoritism with assignments, benefits, time off, scheduling or any other matters.
- Gossip about others at any level in the institution. The leader should not participate in gossip and should change the subject or leave if others are engaging in even seemingly harmless comments about other people.
- Complain about one staff member to another—at work or on private time. EVER. Discussing anything to do with a staff member is a violation of privacy.
- Exhibit dishonesty or incompetence.



## Conflict resolution



Conflict is a common occurrence when people work together, especially in teams, and the supervisor must take the lead in resolving conflicts before they result in discord that severely impacts the staff's ability to function as a unit.

While sometimes disruptive, conflict may result in positive outcomes because it forces staff members to deal with issues that may be contributing to stress. Conflict resolution should occur immediately when problems arise if at all possible, not put on hold until the next meeting or a later date.

Steps to resolving conflict include:

**Listen** Both sides to the conflict should state their views on the issue while the leader listens without bias, focusing on the views of those in conflict rather than the individuals themselves. The leader should ask in the beginning that each side present opinions without discussion from the other side so that the leader can understand both perspectives.

**Encourage negotiation** The next step is to suggest that the two sides cooperate and try to negotiate a solution. Maintaining open communication is especially critical to solving conflicts. The leader can ask what steps could be taken to resolve the conflict or how it could be handled differently. This often leads to negotiation and compromise because it allows for an open exchange of ideas and validates legitimate concerns. Negotiation may take a number of different approaches:

- **Competition:** One side wins and the other loses, so this is an all or nothing approach to determine which side has the most value or can prevail. One side may try to dominate the other. The solution may result from a leader decision, group decision, or administrative mandate. While this may resolve the immediate issue, it usually does not resolve the conflict because the same differences remain.
- **Accommodation:** One side concedes, usually when it's clear that the other side has the most benefit based on weight of evidence or pressure of opinion from others. The conceding side may not be particularly happy, however.
- **Compromise:** Both sides make some concessions in order to reach a solution that is acceptable to both sides. In this case, both sides may be somewhat unhappy with the results, so compromise is often more practical than ideal. However, because both sides participate, conflict is often resolved—at least initially.
- **Collaboration:** Both sides work together to arrive at a solution that gives them both what they want. Collaboration can lead to creative solutions; however, not all issues lend themselves to collaboration, and it may not be successful if those attempting to collaborate are highly competitive.
- **Avoidance:** Both sides feel uncomfortable directly addressing conflict and are unable to make progress in reaching a solution unless they receive strong guidance from the leader.

**Maintain focus** The leader must often provide guidance to keep the discussions focused on the issue at hand and to avoid arguments. The leader may need to remind those who interrupt or begin arguing that each side will have equal time to present opinions.

**Assess** Based on presentation of the conflicts and efforts at negotiation, the leader must make an evaluation of progress and determine whether another approach is necessary, such as renegotiation or third party intervention. In some cases, the leader or those involved may determine that fact-finding is necessary before a solution can be reached. In that case, those responsible for

gathering information should be assigned and a time set aside to meet again.

### **Utilize humor and empathy**

A good sense of humor can help diffuse tension. Discussions do not need to be rigidly formal or conducted with gravitas every moment. The leader sets the tone, so showing empathy with each side of the conflict is important in making people feels they are being accorded respect.

### **Summarize**

After both sides have presented their opinions and thereafter as needed, the leader should summarize the issues and key arguments for both sides, clarifying any points that are unclear.

### **Reach resolution**

The leader should avoid forcing a resolution but should try to help others reach agreement. If the leader must make a choice, then the reasons should be carefully explained, allowing time for questions and discussion.

## **Resistance to change**



change.

People tend to prefer that with which they are comfortable, so even if changes are for the better, resistance is common. The leader should anticipate that any changes will be met with resistance and plan in advance ways to defuse and overcome this resistance.

People are often resistant because of practical concerns. They may fear loss of their jobs, increased responsibilities, and the need to learn new information, and they may have a general lack of understanding about the need for



**Provide information** Full disclosure is the best approach. This means the first step should be complete honesty about what the changes will mean in

terms of people's jobs and responsibilities. Each staff member should understand how the changes would affect them individually. This should include positive results and negative (such as a change in assignment or increased work load), if that's the case. Information should include the reason for each change and the expected outcome.

Information should be provided both orally—through meetings and discussion—and in written form. For example, if a proposed change in routine patient care will affect RNs, LVNs, and CNAs, each group should receive documentation regarding exactly how the change will affect them:

- Will they have training?
- Will they have to demonstrate competency?
- Will their workday change?
- Will this affect employment?
- How will they document changes?

**Encourage feedback** Staff members need time to digest new information and to question as well as to express their feelings about proposed changes. Anger is a common first response, and the leader should not respond in kind but should use tact and patience in discussing the issues, reiterating the reason for changes.

It's important to keep in mind that proposed changes are not always for the better, and staff members may have legitimate concerns and good reasons for resisting change. These concerns should not be dismissed without consideration because they may prove to be valid. The leader should remain empathetic, "I understand your concerns. Let's talk about them."

**Encourage participation** Participation in the decision to make changes should ideally start before changes are announced, but this

simply isn't always the case. For example, changes may be mandated by accreditation or safety standards. However, staff should be encouraged to participate as much and as soon as possible.

Often there is more than one way to institute the same basic change, so engaging staff members in designing the process of change can help them become more accepting. For example, if computerized charting is going to move from a central charting area to point of care, there are many decisions to be made, including:

- Where and how should the computers be placed?
- Should each patient have a dedicated terminal?
- Should computers be placed on movable carts?
- Should ergonomic keyboards be used?
- What type of training is necessary?
- Where and when will training take place?
- Who will provide training?
- How will the space currently used for computers be utilized?
- Who will provide service and maintenance?
- What happens if a computer isn't working or the system goes down?

Even though a change is mandated, many of the decisions that revolve around the change can often be decided with staff participation. Explaining the expected role of the staff in decisionmaking early in the process can help to allay concerns.

### **Establish a climate for change**

Encouraging staff members to identify processes for change and rewarding those staff members when proposed changes are instituted is a good way to encourage participation in change and acceptance of change.

It's also good to keep in mind that tangible benefits, such as time off or monetary awards, are more likely to encourage staff members to seek out changes than intangible benefits, such as "heartfelt thanks."

## Conclusion

Not everyone is a born leader, but skills in clinical supervision can be learned and practiced. The supervisor must remain open to other ideas and make an honest self-appraisal, recognizing areas of strength and seeking out help in those areas of concern that are impairing the ability to be a good leader:

- Do I understand the requirements of my job?
- Am I meeting expectations?
- How am I handling changes or conflicts?
- What are my areas of strength?
- What are my areas of weakness?
- What would make me a better supervisor?
- What is my most significant contribution?
- What aspect of supervising do I enjoy most?
- What aspect of supervising do I enjoy the least?
- What type of education or training would help me do a better job?

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