

# **Explanation and Analysis of Conflict Patterns, Its Causes and Consequences among Clinical, Para clinical and Administrative Staff of Hospitals affiliated to Ardabil University of Medical Sciences:**

## **Providing solutions**

### **Abstract**

**Introduction:** Hospitals are significantly different than other organizations, mainly due to the nature of services that provide. Multiplicity of relationships, internal competitions, lack of mutual interactions, various talents and needs, conflict of interest, personal problems, feeling of inequality, social, economic and gender inequalities of the society as a whole, are sensible in hospitals, therefore various conflict of interests may potentially arise. If be serious and deep, conflicts may have negative impacts on patient's treatment as well as staff health, therefore can be problematic. Awareness about managerial skills and knowledge is necessary to address such problems. As a result, the current study aims to identify causes of conflict, potential consequences of conflicts, and to provide solutions to address them both intragroup and intergroup among administrative and clinical departments as well as para-clinics affiliated to the Ardabil University of Medical Sciences -which distinguishes the current study from previous ones.

**Methodology:** The current study has taken a mixed method approach and is implemented in four phases by using comprehensive review, qualitative study (interview), quantitative study, and experts panel methods. The first part of the study examined previous domestic and foreign studies. In the second part, to identify causes of conflict and how to address them, 35 staffs of the hospital were interviewed by using purposive and snowball sampling methods. At the third part, to determine the frequency of identified causes, 320 staffs from selected groups were sampled by using simple random stratified sampling, then questionnaires (that were developed by the authors) were used to collect data. At the final section, solutions that were extracted from interviews were categorized by an expert panel composed of eight experts and department managers of the hospital.

**Findings:** After transcribing the interviews and analyzing the findings, 62 causes of conflict were categorized into six main themes and thirteen sub-themes. Findings of the quantitative section show that clinical staff have a higher conceived conflict than those in para-clinical and administrative departments ( $p < 0.001$ ). Moreover, a significant difference was found between reported conflicts by nurses with those reported by physicians, para-clinical and administrative

staff ( $p < 0.05$ ). Comparing conflict score of different groups indicates that the highest frequency belongs to conflicts between nurses and managers ( $4.17 \pm 0.94$ ). Factors such as "inequitable distribution of human resources", "inequality in income and bonuses", and "ignoring staffs' opinion and lack of opportunities to participate in decision-making process", are among the most important conflict causes. Managerial solutions are categorized into two groups: educational interventions, and managerial interventions.

**Conclusion:** Regarding the hospitals' role in providing curative services, identifying conflicts is a basic and important role of managers. Whenever conflict causes are ignored and an appropriate managerial approach is not taken to address them, not only conflicts are not addressed by themselves, but also have extended and resulted into new conflicts. Therefore, the current study aims to identify conflict causes in hospitals from the perspective of clinical, para-clinical and administrative staff. Findings would be a valuable source of information about conflict causes and how to address them, based on proposed solutions or previous measures. Among the most important findings is the fact that there is no single solution to address conflicts, particularly regarding the different types of conflict. It should be noted that, before generalizing the findings to different contexts, cautions should be taken.

**Keywords:** conflict, hospital, clinical staff, para-clinical staff, administrative staff.