



## **Working with families and patients to manage conflict and build consensus: a collaborative framework:**

### **Core principles of this framework:**

- Communicate and share information with consistency and compassion
- Maintain an open and trusting relationship with child and family
- Recognise early warning signs of conflict in families and patients
- Identify actions to take to manage conflict and build consensus
- Support staff if conflicts arise.

### **Barriers to trust & shared decision-making :**

- Failing to listen/respond to family or patient cues
- Focusing on solutions rather than exploring concerns
- Inappropriate language (e.g. getting child or patient name wrong, using medical jargon)
- Making assumptions about parents/patients (think 'worried parent' not 'difficult' parent)
- Giving parents/patients mixed messages about their treatment and care.

**Potential consequence: early signs of conflict**

### **STAGE 1: early signs of conflict**

- Avoiding i.e. parents/carers/patients avoiding health care professionals
- "micro-managing" i.e. parents/patients recording conversations, questioning expertise of health professionals, demanding only certain health professionals look after them or their child. This may have its origins in previous conflict so essential to explore.
- Trusting/open communication compromised

**NB: these signs can be subtle and are often missed or left unacknowledged**

### **Actions to consider**

- Nurse + doctor and/or AHP to talk to patient/parents as soon as possible. **Prepare together beforehand.**
- Refer to appropriate ethical frameworks for decision-making if appropriate eg LTV framework
- Agree record of discussion with parent at end of meeting. Inform Lead consultant if necessary.
- **Put agreed record of discussion on EPR or in notes and ensure parent(s) have a copy.**
- **Ensure appropriate support for staff is in place**
- **Consider:** Would clinical ethics cttee referral and/or 2<sup>nd</sup> opinion help? If yes, start process. Would a neutral facilitator help? If yes, consider internal or external mediation
- Keep under review. **Note:** Stage 1 can last for varying periods of time depending on individual circumstances **Has this de-escalated the situation?**

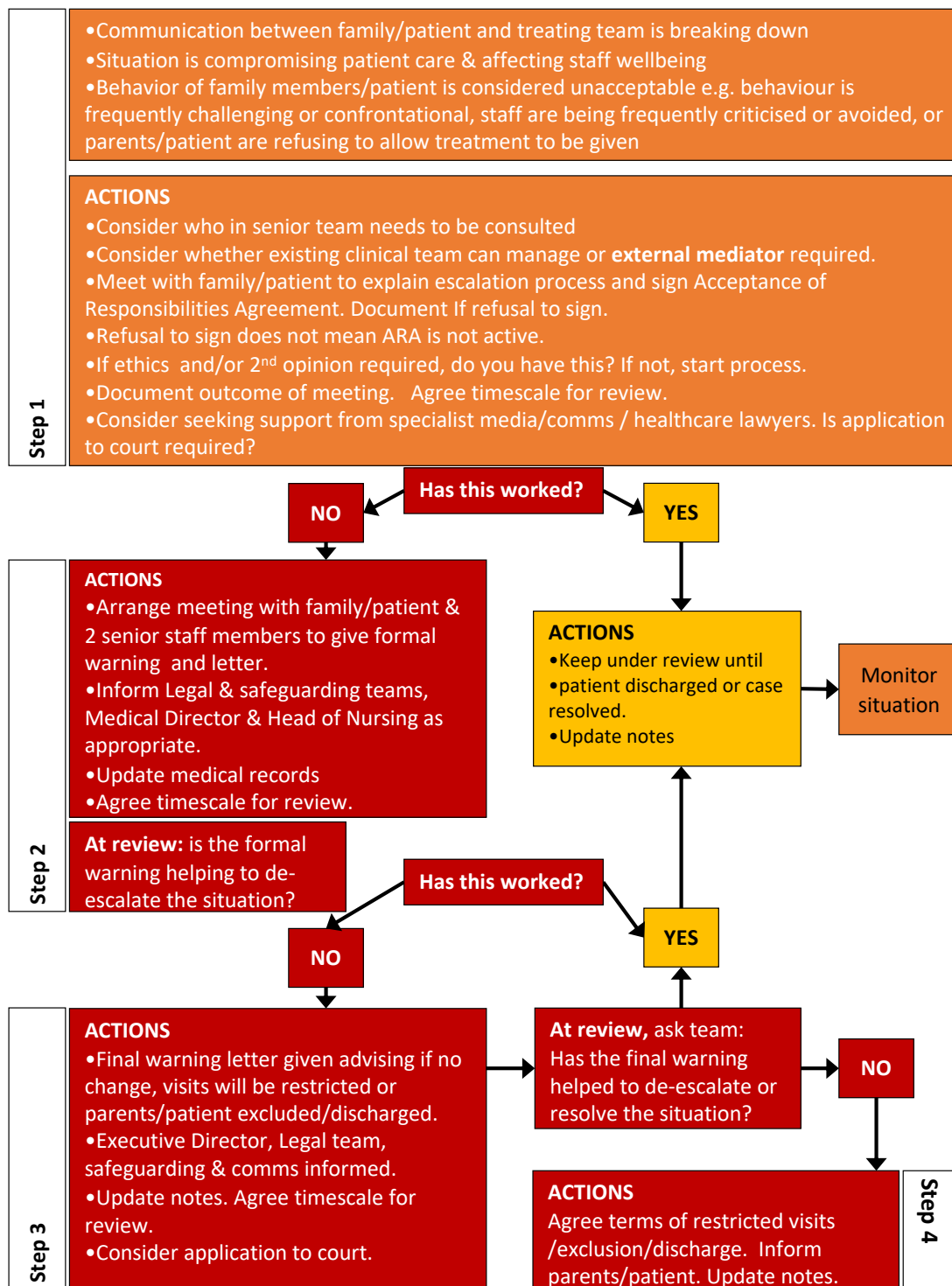
**YES.**  
Keep  
under  
review

**NO.**  
Consider escalating to senior management for review if conflict is ongoing for 21 days. Move to Level 2 of the framework if behaviours deteriorate & staff & treatment plan affected



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**Stage 2:** To be used if conflict is escalating, attempts to reach consensus in Stage 1 have not been successful and:



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