Interpersonal Conflict Resolution

A. RESIDENT-TO-RESIDENT CONFLICT (exists when conflict is between two residents)

1. Resident first must inform the other party of the conflict in private, and express his/her own feelings. The resident must take ownership of the situation.
2. If the conflict is not yet resolved, the resident can report the conflict to the appropriate attending physician
   a. The attending physician discusses the problem separately with parties and attempts to understand each party’s concerns.
   b. The attending physician holds meeting with both parties together, reviews the situation, and creates an action plan to be followed.
3. If the conflict is not yet solved, the situation is reviewed by the chief resident
   a. Chief resident reviews issue with the attending and residents involved.
   b. Action plan is established and documented.
4. If the conflict is not yet solved, the situation is referred to the program director and the residents’ faculty mentor for review. If appropriate, the conflict may be discussed by the Pediatric Graduate Medical Education Committee (PGME).

B. FACULTY CONFLICT WITH RESIDENT (exists when a faculty member expresses concern about behavior of a resident)

1. Faculty member takes responsibility to interact with resident in private and discuss the situation. The discussion is behavior specific and provides appropriate behavioral alternatives for the resident.
2. If the conflict is not yet resolved, faculty member informs the chief resident
   a. Chief resident reviews issue with the attending and resident involved
   b. Chief resident provides problem-solving session with resident
   c. Action plan is established and documented, with copy provided to the faculty member concerned.
3. If the conflict is not yet resolved, then the situation is referred to the program director and the residents’ faculty mentor for review. If appropriate, the conflict may be discussed by the Pediatric Graduate Medical Education Committee (PGME).
C. RESIDENT CONFLICT WITH FACULTY (exists when a resident has concern about behavior of a faculty member)

1. Resident discusses the situation with the faculty member and gains an understanding of conflict.
2. If conflict is not yet resolved, the resident meets with the attending physician or Division Director (whichever is more appropriate) and discusses concerns
   a. Division Director reviews the issue with the faculty member and resident involved
   b. Division Director provides problem-solving session with the attending involved
   c. Action plan is established and documented, with copy provided to the resident concerned
4. If conflict is not yet resolved, resident notifies chief resident
   a. Chief resident reviews the issue with the attending Director of Service and resident
   b. action plan is established and documented
   c. Resident may also meet with faculty advisor to provide insight and advice
5. If conflict is not yet resolved, then the chief resident refers the matter to the program director and the resident’s faculty mentor. If appropriate, the conflict may be discussed by the Pediatric Graduate Medical Education Committee (PGME).