



iCAHE JC Critical Appraisal Summary

Journal Club Details

Journal Club location	Lyell McEwin
JC Facilitator	Yongyang Lu
JC Discipline	Occupational Therapy

Clinical Scenario

Disciplines in acute settings often find the time management a pressure because of the discharge time frame. Disciplines want to see patients ASAP and recommend any possible discharge avenues or plans based on own clinical reasoning. However sometimes disciplines may have conflicts among them due to differentiation in clinic reasoning, experience, roles and sometimes cultural background. Therefore, it is worth to explore the common types of conflicts in acute settings among disciplines and what the effective strategies are.

Question: what are the common types of conflicts among clinical disciplines in acute settings, in comparison with sub-acute settings and what are the effective strategies in place?

Review Question/PICO/PACO

- P** types of conflicts among clinical staff (allied health, medical officers, nurses) in acute settings (hospitals)
- I** address conflicts
- C** sub-acute settings
- O** effective strategies

Article/Paper

Judith Brown, Laura Lewis, Kathy Ellis, Moira Stewart, Thomas R. Freeman & M. Janet Kasperski (2011) Conflict on interprofessional primary health care teams – can it be resolved?, *Journal of Interprofessional Care*, 25:1, 4-10, DOI:10.3109/13561820.2010.497750

Please note: due to copyright regulations CAHE is unable to supply a copy of the critically appraised paper/article. If you are an employee of the South Australian government you can obtain a copy of articles from the [DOHSA librarian](#).

Article Methodology: Qualitative

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Ques No.	Yes	Can't Tell	No	Comments
1	✓			Was there a clear statement of the aims of the research?
2	✓			<p>Is a qualitative methodology appropriate? A qualitative study seeks to illuminate, understand or explore any phenomenon about which little is yet known. It aims to address questions concerned with understanding the experiences of a specific group of people. Qualitative research also lends itself to developing knowledge in poorly understood or complex areas of health care.</p> <p>This article examines sources of team conflict, barriers to conflict resolution, and strategies for conflict resolution at both the team and individual level on PHCTs; therefore, a qualitative methodology is appropriate.</p> <p>Is it worth continuing? YES</p>
3	✓			<p>Was the research design appropriate to address the aims of the research? This study used the qualitative methodology of phenomenology to examine perceptions and experiences of health care professionals regarding conflict in PHCTs based in Ontario, Canada.</p>
4	✓			<p>Was the recruitment strategy appropriate to the aims of the research? The goal of the sample selection and recruitment was to secure a maximum variation sample with regard to location (urban versus rural), practice type: (Family Health Groups (FHG's) and Family Health Networks (FHNs); Community Health Centres (CHC's); and Family Practice Teaching Units (FPTU's)), team composition and size.</p> <p>Potential teams were identified through a number of sources including: a list of FHG/FHNs provided by the Ministry of Health and Long Term Care; a list of all of the CHC's in the province supplied by the Association of Ontario Health Centres and; the FPTU's identified through academic Departments of Family Medicine in Ontario.</p> <p>Potential teams were mailed a letter of information detailing the study.</p>
5	✓			<p>Were the data collected in a way that addressed the research issue? A semi-structured in-depth interview was conducted with each participant at their practice site and lasted 1 h on average.</p>
6			✓	<p>Has the relationship between researcher and participants been adequately considered? The relationship between the researcher and participants has not been reported.</p>

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7	✓		Have ethical issues been taken into consideration? Ethics approval was received from The University of Western Ontario's Review Board for Health Sciences Research (Review #10949E).
8	✓		Was the data analysis sufficiently rigorous? Credibility and trustworthiness of the data was enhanced through three principal means: interviews were transcribed verbatim, field notes were generated following each interview, and a minimum of two researchers read and analyzed the data independently and then came together for team analysis.
9	✓		Is there a clear statement of findings? The analysis revealed three main themes related to conflict experienced by PHCTs: sources of team conflict; barriers to conflict resolution; and strategies for conflict resolution. Sources of team conflict were described as role boundary issues, scope of practice, and accountability. Barriers to conflict resolution included lack of time and workload issues; people in less powerful positions; lack of recognition or motivation to address conflict; and avoiding confrontation for fear of causing other team members' emotional discomfort. Both team and individual strategies for conflict resolution were identified. Team strategies included interventions directed by team leaders and the development of conflict management protocols specific to the team. Individual strategies included open and direct communication, a willingness to find solutions, showing respect, and the practice of humility.
10	Journal Club to discuss.		How valuable is the research?
11			What do the study findings mean to practice (i.e. clinical practice, systems or processes)?
12			What are your next steps? (e.g. evaluate clinical practice against evidence-based recommendations; organise the next four journal club meetings around this topic to build the evidence base; organize training for staff, etc.)
13			What is required to implement these next steps?