

**OLIVE VIEW-UCLA MEDICAL CENTER/HEALTH CENTERS
POLICY & PROCEDURE**

NUMBER: 775

VERSION: 1

SUBJECT/TITLE: MANAGEMENT OF CONFLICTS

POLICY: In the event that resolution cannot be reached in a matter that could potentially affect the quality and safety of patient care, managers will follow the established chain of command to resolve the issue.

PURPOSE: To facilitate the management of conflicts within Olive View-UCLA Medical Center.

DEPARTMENTS: All

DEFINITIONS: **Conflict** is defined as a disagreement or difference of opinion among peers or colleagues over the management of clinical care or program that cannot be resolved by the parties involved.

PROCEDURE: **I. Conflicts Involving Delivery of Clinical Services**

If a disagreement occurs among clinical providers regarding the care and treatment of a patient, the providers involved shall work directly to resolve the differences.

If the staff are unable resolve the conflict themselves in a timely manner, the issue is to be brought to their supervisor(s) for review. When the matter is elevated, information as to the facts of the situation, nature of the disagreement, and recommended resolution should be provided to the supervisor(s) for consideration in addressing the matter. Staff should always take into account the implications on the clinical needs of the patient.

Conflicts that cannot be resolved by the supervisor(s) are to be elevated to the appropriate member(s) of Olive View-UCLA Medical Center Executive Committee for review of the disagreement, including perceived, real, or potential adverse consequences to the patient(s).

Any disputes of a clinical nature that cannot be resolved by the Executive Committee shall be referred to the Department of Health Services' Chief Medical Officer, who will determine the appropriate course of action.

Any dispute or conflict that may have an impact on patient safety or quality of care, treatment and services shall be addressed immediately.

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II. Conflicts Involving Non-Clinical Issues

In the event of a conflict between personnel regarding a non-clinical matter, staff shall attempt to resolve the matter on their own. If they are unable to do so, the issue should be elevated to their immediate supervisor(s) for review.

When the matter is elevated, information as to the facts of the situation, nature of the disagreement, and recommended resolution should be provided to the supervisor(s) for consideration in addressing the matter. Staff should always take into account the implications on the clinical needs of the patient.

Conflicts that cannot be resolved by the supervisor(s) are to be elevated to the appropriate member(s) of the Olive View-UCLA Medical Center Executive Committee for review of the disagreement, including perceived, real, or potential adverse consequences to patients.

If a dispute regarding the management and operation of the organization arises at the level of the Olive View-UCLA Medical Center Executive Committee that cannot be easily resolved, the issue will be referred to the Department of Health Services' Chief Network Officer, who will assist in resolving the matter and determining the appropriate course of action.

Conflicts that do not involve direct patient care or are deemed to be non-emergent cases shall be resolved within 30 days of the date of the report.

III. Medical Staff Communication with the Governing Body

Members of Olive View-UCLA Medical Center, Medical Staff have the right to bring issues of concern to the attention of the Board of Supervisors at its regularly scheduled meetings using the following process:

1. Medical Executive Committee (or the Medical Staff in a meeting of the Professional Staff Association) decides by vote that a specific issue or issues should be discussed with the Board of Supervisors.
2. One of more representatives of the Medical Executive Committee will present the issue(s) to the Department of Health Services (DHS) Executive Leadership (i.e., Director of Health Services, Chief Medical Officer/Senior Medical Director of Health Services, or the Chief Deputy Director of Health Services) at the Governing Body meeting.
3. If, after discussion, the Medical Staff believes the issue is not or cannot be resolved by the DHS Executive Leadership, the Director of Health Services will work with the Los Angeles County Chief Executive Officer (CEO) to place the issue on the Board of Supervisors' agenda.

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The CEO and Director of Health Services will work with the County Counsel to determine whether the issue is of such a nature that it should be placed on the Board’s closed session agenda.

4. The President of Medical Staff, and/or designee, will attend the meeting of the Board of Supervisors to present the issue.

References: The Joint Commission, Standard LD 02.04.01	
Approved by: Carolyn Rhee (Chief Executive Officer), Dellone Pascascio (Chief Nursing Officer), Shannon Thyne (Chief Medical Officer)	Date: 05/25/2010
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