



# Impact on Performance in Conflict-Based OSCE through Guided Self-Reflection on Conflict Management Style

Lena Maynor, PharmD, BCPS<sup>1</sup>; Ashleigh Barrickman, PharmD, BCACP, CTTS<sup>1</sup>; Marina Galvez-Peralta, PharmD, PhD, FCP<sup>2</sup>

<sup>1</sup>West Virginia University (WVU) School of Pharmacy, Department of Clinical Pharmacy; <sup>2</sup>WVU School of Pharmacy, Department of Pharmaceutical Sciences

## INTRODUCTION

- Interpersonal conflict arises when two or more individuals experience a disagreement accompanied by emotional tension between them.<sup>1</sup>
- Identified sources of conflict in healthcare working environments include multiple factors, such as personality traits, worldview, communication style and conflict management style.<sup>2</sup>
- Four conflict management styles in community pharmacists have been described using the Conflict Management Scale (CMS), based upon pharmacists having either a principled or pragmatic worldview and either a direct or indirect communication style. The CMS includes debriefing questions intended to facilitate self-reflection on conflict management styles.<sup>3</sup>

## OBJECTIVES

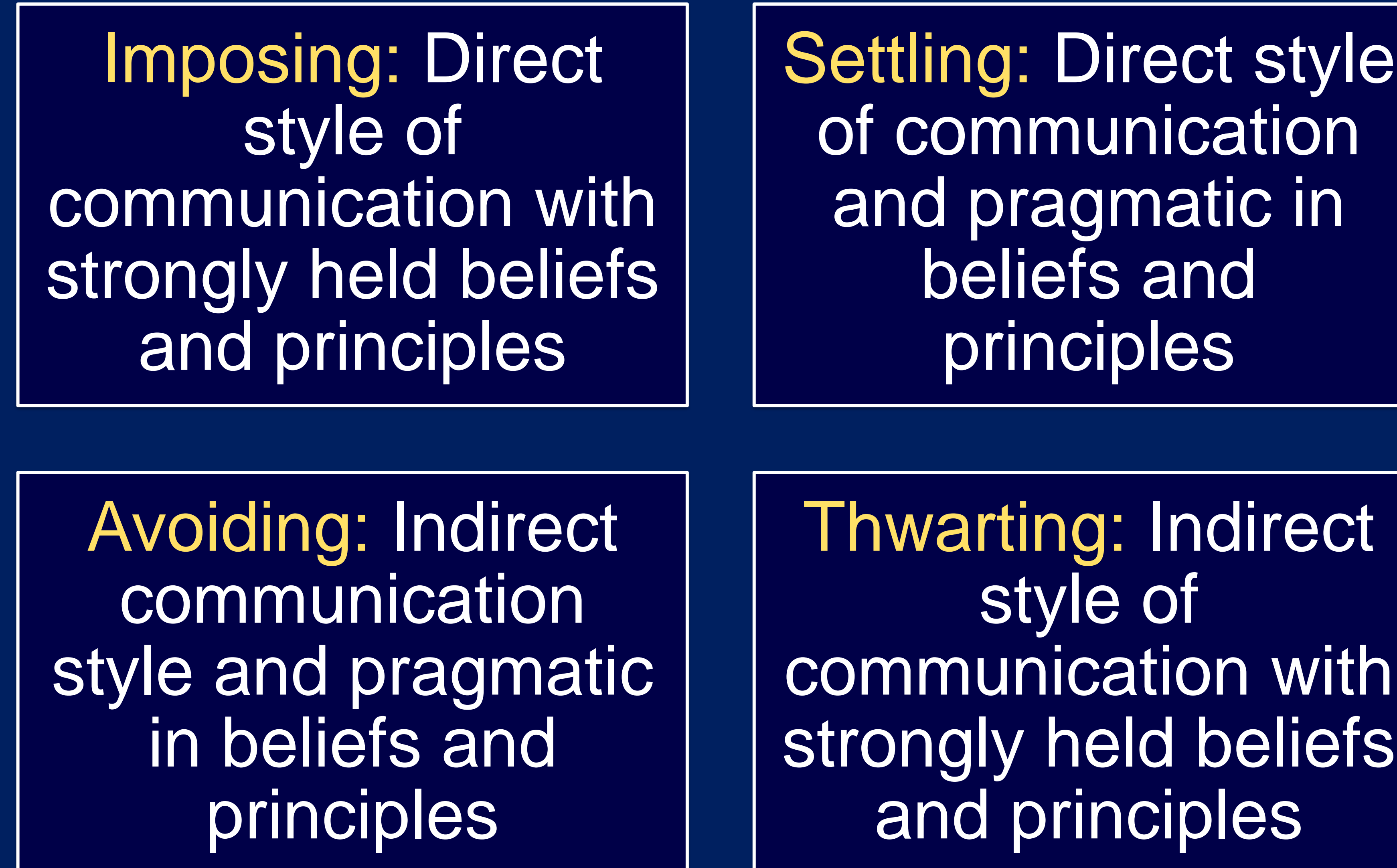
- The objective of this study was to assess the impact of guided self-reflection on conflict management style, using the CMS, on performance in OSCE stations with imbedded pharmacist/patient conflict.

## METHODS

- This IRB-approved study was conducted in spring 2022 and spring 2023.
- Third-year students in a pre-APPE capstone course in spring 2022 and 2023 completed two OSCE stations which included an interpersonal conflict. Both stations involved scenarios where patient's requested actions could lead the community pharmacist to act illegally.
- Prior to the first station, students completed the CMS.
- After the first station, students completed a guided self-reflection activity based on their results.
- Three weeks later, students completed the second OSCE station.
- Paired score data for overall OSCE station scores and communication sub-scores between the first and second stations, as well as sub-analyses by conflict management style, were analyzed using the Wilcoxon test.

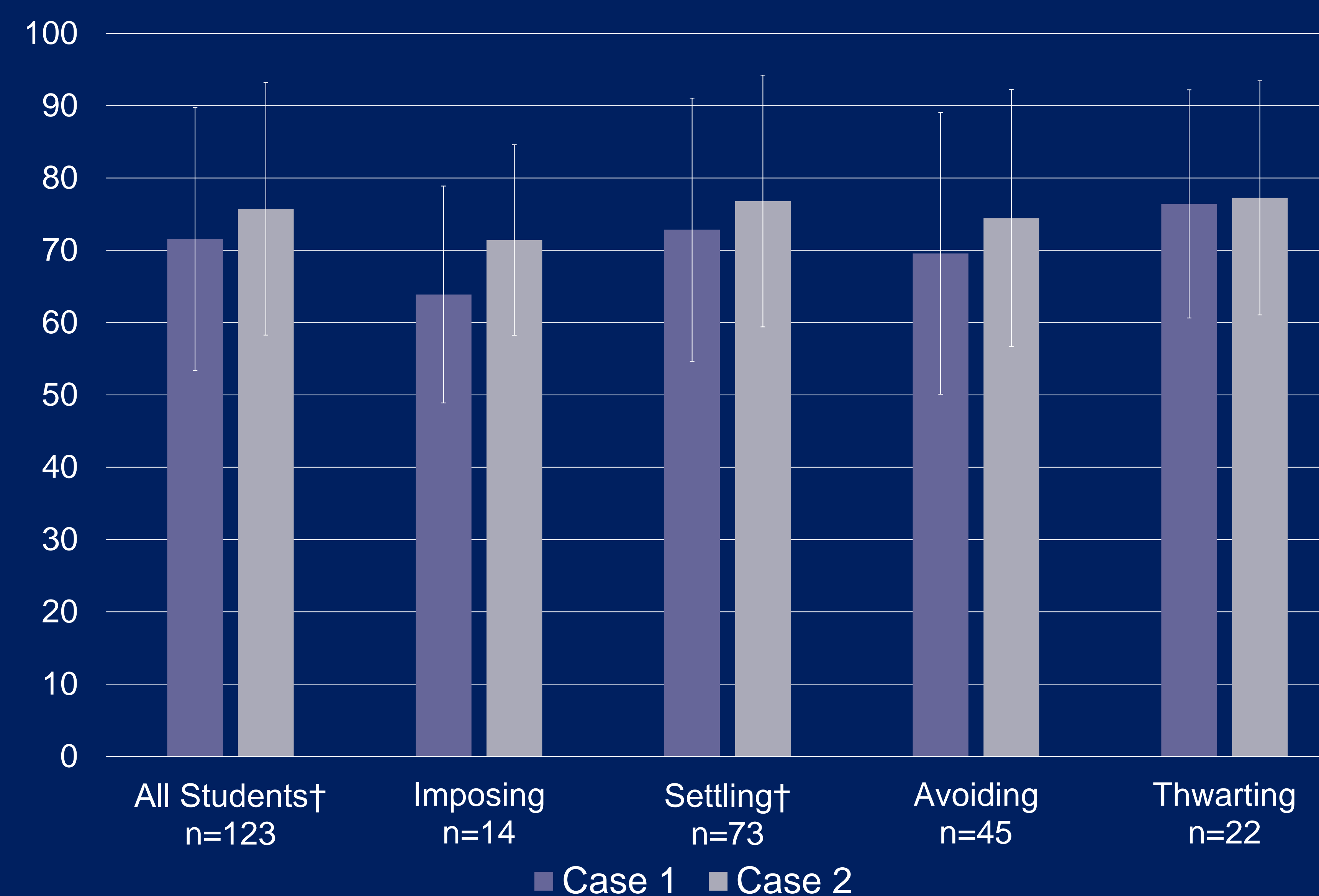
## METHODS

Figure 1 CMS communication styles<sup>3</sup>



## RESULTS

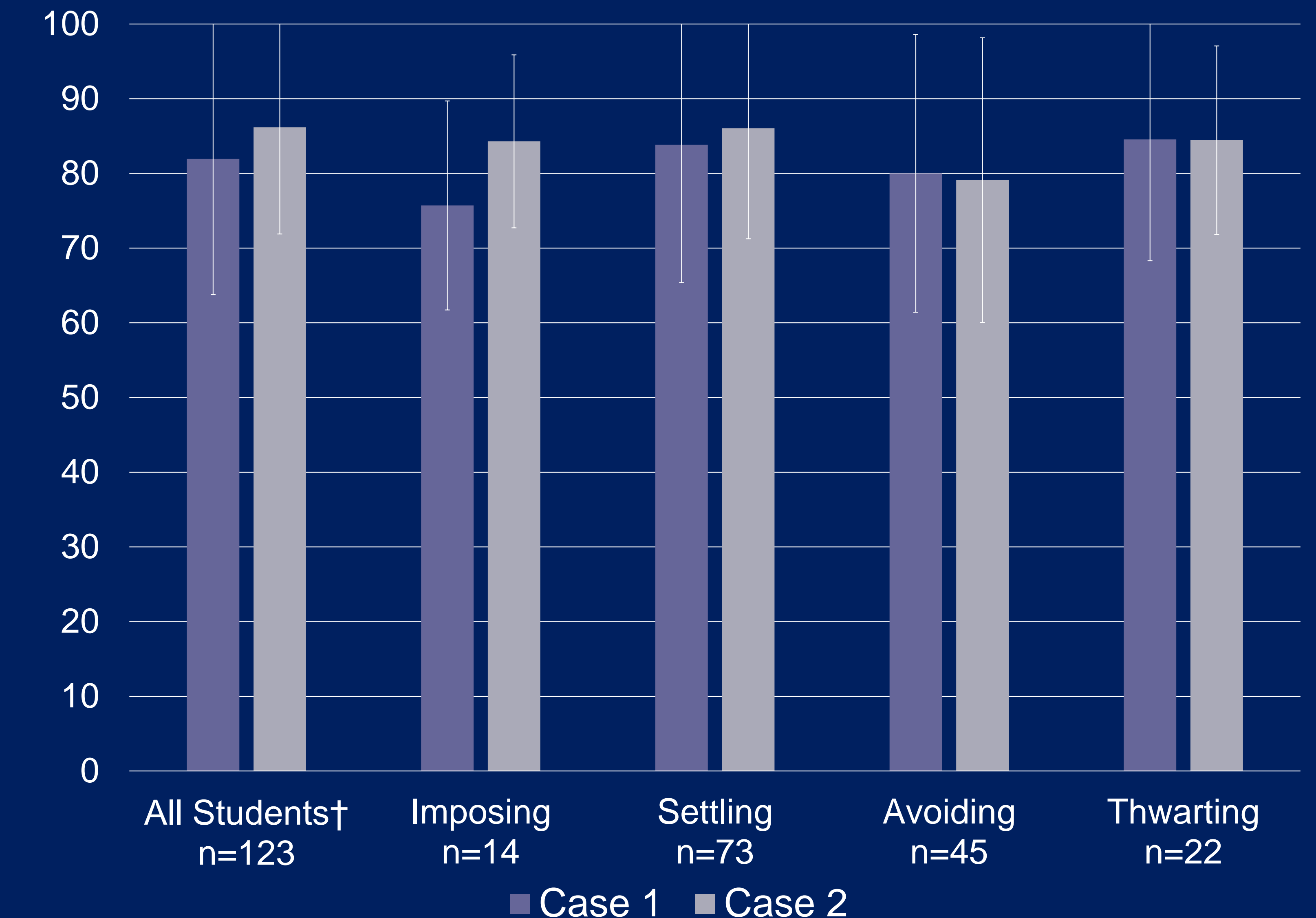
Figure 2 Overall Score for Conflict-Based OSCE Stations\*



\*Students with co-primary conflict management styles were included in all primary sub-groups for analysis  
†p < 0.05

## RESULTS

Figure 3 Communication Score for Conflict-Based OSCE Stations\*



\*Students with co-primary conflict management styles were included in all primary sub-groups for analysis  
†p < 0.05

## CONCLUSION AND IMPLICATIONS

- A majority of students had a primary conflict management style of settling, following by avoiding, thwarting, and imposing.
- Total station score and communication sub-scores for conflict-based OSCE stations improved following a guided self-reflection activity using the validated CMS for pharmacists.
- Additionally, students with a primary conflict management style of settling had significantly improved overall scores.
- This suggests possible utility in incorporating the CMS as a tool for self-reflection specific to conflict management style within a pharmacy curriculum.

## REFERENCES

1. Austin Z, Gregory PAM, Martin JC. Pharmacists' experience of conflict in community practice. *Res Soc Adm Pharm.* 2010;6(1):39-48. doi:10.1016/j.sapharm.2009.05.002
2. Kim S, Bochatay N, Relyea-Chew A, et al. Individual, interpersonal, and organisational factors of healthcare conflict: A scoping review. *J Interprof Care.* 2017;31(3):282-290. doi:10.1080/13561820.2016.1272558
3. Austin Z, Gregory PA, Martin C. A conflict management scale for pharmacy. *Am J Pharm Educ.* 2009;73(7):122. doi:10.5688/aj7307122

## CONTACT

Lena Maynor, PharmD, BCPS, Professor, Department of Clinical Pharmacy, West Virginia University School of Pharmacy. Email: lmaynor@hsc.wvu.edu