**Work Environment**

**Part One**

Problems and arguments in working organizations are inevitable especially because such organizations harbor employees from all walks of life. It is scaring for managers to all always expect problems that are bound to occur in day to day activities because they always feel entrusted with a responsibility to offer problem solutions that must work for both conflicting parties (Cowman & Keating, 2013). Nonetheless, managers should understand that problems occur at all times and they are opportunities for the improvements of working relationships and the healthcare system as a whole. If the manager like the family nurse practitioner, in this case, looks at the problems from this angle, he or she would always welcome problem in the clinic settings. Perhaps the aspect of being able to come up with an immediate solution would stand out as the most disturbing scenario in these settings. The steps described in this post help in solving the problem of the constant arguments presented by the workers led by the family nurse practitioner.

The family nurse practitioner could start by identifying the issues that acted as important sources of the constant arguments. The identification of issues ensures that the family nurse practitioner is clear about the particular problem and bears in mind that different people have different views regarding the same issue. Furthermore, the practitioner, in this case, should understand the interests of each of the conflicting parties so as to think of a solution that satisfies each of the individual’s interests (Dijkstra, Beersma & van Leeuwen, 2014). At this stage, the practitioner can come up with a list of possible solutions; a procedure that can be made successful through brainstorming. Afterward, the practitioner needs to evaluate the options and select the best option that satisfies the interests of all the conflicting parties that expose patients into insecurity. It is also important for the practitioner to document the agreed on options instead of relying on verbal agreements and memory which cannot be evidenced in resolving future conflicts (Dwomoh, Kwarteng, Frempong, and Frempong, 2015). The requirement for the family nurse practitioner is to ensure that an agreement including contingencies is properly done, accompanied by monitoring and evaluation.

**Part Two**

Conflict resolution skills are essential for all activities of the day in an organization, and they can positively propel a manager’s momentum or that of the entire organization. Conflicts need to be confronted head-on instead of being festered, an approach that makes the working environment toxic. So as to be accorded respect, leaders should act responsibly understanding that leadership is not about popularity but rather it is about the development and guidance of the full potential of an individual (Saeed, Almas, Anis-ul-Haq and Niazi, 2014). One way of dealing with conflicts in a right manner is right timing which entails taking action immediately hard evidence is established about an employee who is prone of negatively impacting the others via wrongdoing. If a lot of time is taken before making a decision on wrongdoers, the rest of the team players in the organization proceed to make the same decisions that manager could not make. As such, the leader momentum is lost, and the reputation of such a leader is put at stake. Furthermore, the leader can offer conflict resolution by knowing the boundaries and limitations of those that he or she leads so as to understand the risks and rewards of solving the problem within the limitations of each employee. Moreover, the leader can learn to understand the differences existing in different employees by considering problems from different points of view (Landry & Erwin, 2015). Due to the increasing generational and cultural diversity in the present workplace, it is no longer practical to consider conflict resolution in black and white. The final strategy is confronting the tension before other people take the initiative and before the situation escalates to an unmanageable state.

**Part Three**

Teamwork is an important aspect in the improvement of patient safety in all clinical settings. For instance, teamwork improves communication within the working environment. Communication not only enhances a better working relationship among the workers of the organization but also helps in building long lasting and mutual relationships between the healthcare providers and patients within the health facilities. With such relationships, the patients can entrust the health workers with their confidential information that may lead to better patient outcomes. In this regard, the safety of the patient is safeguarded with an assurance of improved health outcomes (Smith, Yount, & Sorra, 2017). Furthermore, teamwork through the enhancement of communication helps in eliminating or minimizing incidences of clinical errors that occur as a result of poor communication among the healthcare workers and patients. Clinical errors put patients at risks of unintended deaths as well as unnecessary expenditures that follow prolonged hospitalizations. All these are factors that in one way or the other contribute to patient insecurity and which can be eliminated through the advocacy of teamwork among the healthcare workers as well as the patients within the healthcare facilities (Top & Tekingündüz, 2015). Teamwork also boosts patient satisfaction, a factor that contributes to the enhancement of the quality of healthcare delivered to patients. Overall, it is evident that teamwork plays a huge role in enhancing patient safety in clinical settings.

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