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ADR at work

Workplace mediation at South East Sydney Area Health Service

Sue Rawlinson

Unresolved conflict in the workplace can be very costly for both the individual and the organisation. The cost includes not only the time and money spent in resolution attempts and litigation but also the negative effects on workplace relationships and staff morale. Increasingly, organisations are turning to dispute resolution strategies.

South East Health, in its commitment to the promotion of a positive work environment, established its Internal Mediation Program late in 1998 as one of a range of conflict resolving mechanisms utilised by the organisation and its staff. A fundamental principle of the program is that the prompt resolution of conflict, at the lowest organisational level possible, benefits both the individual and the organisation.

The mediation team consists of volunteers from South East Health staff drawn from a number of facilities within the area and a range of occupational groups including, human resources, nursing, medical, counselling, training and others. They have been thoroughly trained in workplace mediation and are supervised in the performance of these duties by the area's Mediation Co-ordinator.

Anyone employed by South East Health — staff or management — can access the Internal Mediation Program.

Mediation is used for a number of different circumstances in South East Health, including interpersonal conflict, work practices, grievance resolution, alleged harassment, EEO issues and internal customer complaints.

Among the 'good practice' aspects of the program are the following.

- Parties are provided with written information about the mediation process which emphasises the voluntary and

confidential nature of the process and are furnished with a formal Agreement to Mediate for consideration.

- Mediation does not replace administrative and supervisory responsibility for managing workplace conflict, nor does it replace other mechanisms outlined in related policies, for example, grievance, harassment, or EEO policies. Rather, mediation complements other methods of resolving conflict.
- Parties retain their rights to access industrial advice through their relevant union or staff association.
- Agreements reached during mediation are not to be used in any future disciplinary process.
- Agreements reached during mediation are reviewed with the parties six weeks to three months following mediation.

A mediation policy and guidelines have been developed. The likelihood of success is enhanced by an number of factors:

- thorough assessment by mediators for suitability prior to mediation;
- the adoption of a co-mediator model for peer support and review; and
- on-going supervision of mediators by the Mediation Coordinator.

Professional development activities include in-service training with external mediation trainers and regular team meetings and discussion. Promotional activities include articles in facilities' newsletters, seminars, distribution of mediation brochures and briefings of management and staff.

The program was evaluated after its first year of operation. An examination of the broad demographics of referrals to the program revealed that 70 per cent were manager/administration referrals, while 30 per cent were self-referrals or referred by human resources. Interpersonal conflict was

given as the major reason for referral for mediation; work practices were the next most common reason. The majority of conflicts were of more than 12 months duration. Some had been going on for many years. Irrespective of the duration of the dispute, an incident or argument precipitated referral for mediation in most cases.

A client satisfaction survey was sent to parties in the workplace disputes assessed over the 12 month period. The majority of respondents stated that mediation resulted in agreements being reached and that long term benefits were derived from the process. Personal benefits included improved communication and respect, a better relationship with the other party, and the acquisition of skills which could be used in other situations. One respondent stated that the process proved to be a catalyst to discussion of important issues at ward level. Almost uniformly, the most helpful part of the process was being able to talk freely without fear. In the least helpful category were statements about it being stressful at times and requiring courage from the parties involved.

Mediators were asked to comment on any impact that mediation training or practice might have had on their understanding of organisational issues, personal and professional skills and job performance. Those mediators who work in a supervisory or management capacity stated that their mediation experiences had helped them manage workplace conflict more effectively. They listed benefits such as enhanced communication, facilitation and problem solving skills and the ability to diffuse difficult situations more easily. In addition, the ability to advise other managers in dealing with staff conflict was mentioned.

The program is now almost two years old and going well. Additional mediators will be recruited and trained in 2001, as the program is being used increasingly throughout South East Health. ●

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