

# Miscommunication Kills

## A Rationale for Shared Learning

Dr. Ailsa Haxell & Terry Weblemoe

Email: [ailsa.haxell@aut.ac.nz](mailto:ailsa.haxell@aut.ac.nz); [terry.weblemoe@aut.ac.nz](mailto:terry.weblemoe@aut.ac.nz)

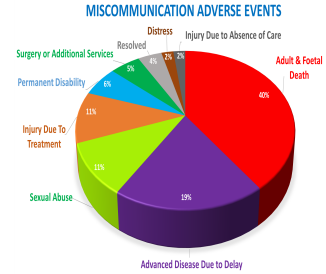


### Background

- Medical iatrogenesis** is the preventable harm that people experience in their associations with health practitioners (Illich, 1976).
- In New Zealand, Davis, Lay-Yee, Bryant, Scott, Johnson, and Bingley (2001), reported a 12.9% iatrogenic rate for those hospitalised. Their retrospective study investigated documented adverse events across 13 NZ hospitals. The undocumented adverse event rate can be presumed to be much higher. Evans (2007) portrayed the staggering size of these preventable events as: the death rate being equivalent to four Boeing 747's crashing in New Zealand every year; three times the road traffic death rate; and double the deaths from both homicide and suicide.
- This study** investigates adverse events as documented in complaints to the Office of the Health and Disability Commissioner (HDC) and health-related complaints to the Office of the Privacy Commissioner. The investigation into HDC complaints results in anonymised discussion and case notes that are accessible on line <http://www.hdc.org.nz>. One hundred recent case notes were analysed (29-2-2012 to 30-5-2014).

### Analysis

- Findings** - Incidence of cases where miscommunications were implicated:
  - 100% of cases referred to the Privacy Commissioner are, by definition, concerned with miscommunications.
  - 99% of cases investigated by the Health and Disability Commissioner involve miscommunications.
- Adverse events suffered were significant:
  - 40% of cases involved what was considered to be a preventable death.
  - 19% of cases involved significant disability (extending beyond 6 months).
- Technology-mediated communications:
  - 30% of cases involved telephone calls, text messaging, faxed communications, and computer-mediated communications such as emails.
- While technology is recognised as having influence, miscommunications did not occur in any of the reported discussions and case notes without there being human involvement. While news media representation tends to conflate new technology as causative, this remains an attribution error. Technology does not operate of itself.



### Implications

- Conclusion** - The incidence of miscommunication within the health sector remains critical. Miscommunication is implicated in preventable deaths, as well as in the development of significant and ongoing disability, delays to treatment and needless distress.
- Implications** – What is reported here is an uncomfortable truth. However, “what currently is” need not define what “might be”; or as paraphrased by John Law: “reality is not destiny”. Educational institutions have the scope to alter how communications are taught and learned by providing a focus not only on clinical skills but processes where we as health professionals learn to communicate better with each other. Having a shared toolkit of communication skills is but one step toward this; an educational process whereby those of differing disciplines are required to talk to one another as health practitioners in training is a further step.

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