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AIMS RETRIEVAL MEDICINE INCIDENT REPORTING: AN INVESTIGATION OF REPORTERS' EXPRESSIONS OF ATTITUDE AND FEELING

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Duration: 2003 – 2005

Description: This project addresses the question of how writers of critical incident reports express their emotional responses to the events and problems they are confronted with during patient retrievals. The project focuses on the ways in which reporters' expressions of feelings, judgments and assessments about the events and problems confronted might impact on or complicate our coding of the reports in question.

The recent rise in interest in emotion in organisations and in emotive language more specifically has enabled us to devise an interpretive framework which also supplies the means to analyse the discourse of subjective evaluation and emotionality. Collectively, the discursive resources in question here have been systematised under the heading of 'appraisal'. Appraisal provides a framework. This discursive domain of 'appraisal' is detailed sufficiently in the report to support the analyses and to ground the findings.

In addition, the orientation of the research is informed by contextual issues of the current culture of incident reporting in health care. Prominent here is the rising concern with health organisations' progression towards a 'no-blame' culture by means of which they are to deal with issues of quality of care, patient safety and risk management.

Our final report sets out its findings by illustrating how specific types of language or related sets of expressions support or are in tension with the ethos of 'locating sources of error' and instituting 'no blame'. Also, the report aims to help clarify and elaborate the basis for making coding judgments about the language used in critical incident reporting.

Outputs: The main findings of this study are as follows. The discourse of critical incident reporting shows that:

- Emotivity concerns not merely the expression of personal feelings, but draws on a number of linguistic do-

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mains. These domains include expressions about personal feeling and depersonalised or formalised sentiments; person-specific judgment and organisation-centred moralising, and aesthetic and functional assessments of artefacts and objects

- Emotive expressions do not principally target personal or internal feeling, but are about normative moralisations to do with (in)appropriacy and (in)sufficiency, and person-specific judgments about others' (in) capability
- There is a tension between formal (public, depersonalised, organisationalised) and informal (private, emotional, self-oriented) language
- Different domains of linguistic emotivity correlate; that is, if one domain of emotive expressions is drawn upon by the reporter, others will most likely be drawn upon too, creating a 'cumulative' or amplifying effect. For example, if claims about someone's causal responsibility are made, the intensity of these claims appears to correlate with the frequency of expressions that reference personal feeling
- Reports embody emotionality not merely at the level of individual expressions, but also at the level of how they unfold as 'text'. That is, emotive feeling is not merely inherent in singular words, terms or expressions, but also in the degree to which a report is either 'to the point' and linear, or iterative and circular. Being iterative and circular, a report accrues emotive meaning as a result of emotivity being 'piled up'
- The emotivity in incident reports cannot be dissociated from these reports' claims to factuality. Put differently, the factuality and objectivity of incident reports is inevitably attenuated by their emotivity.

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Selected Publications

Iedema R, Braithwaite J, Forsyth R, Nugus P, Jorm C, Travaglia J, Scheeres H (2004). The intensification of communication in modern health care: where narrative meets accountability. Poster presented at *BMA/BMJ Narrative Research in Health and Illness Conference*. London, 9-10 September.

Iedema R, Flabouris A, Grant S, Jorm C (in press). Narrativizing errors of care: critical incident reporting in clinical care. *Social Science & Medicine*.

Iedema R, Grant S (2004). *AIMS retrieval medicine incident reporting: an investigation of reporters' expressions of attitude and feeling*. Sydney: Centre for Clinical Governance Research, UNSW.