

BOOK REVIEWS

Teaching and Learning Communication Skills in Medicine,

Kurtz, S., Silverman, J. and Draper, J.

ISBN 1-85775-658-4

Radcliffe Publishing Ltd.

Doctors receive little training in teaching however are often expected to teach as part of their job. One of the most important skills to be developed as a doctor is that of communication skills, which this book sets out to achieve

I feel the term “manual” is better suited to this second edition as it provides comprehensive instruction to the medical teacher on various areas of communication skills. This book’s foundations are strongly built on a solid evidence base, providing a rationale for the methods employed within. The authors’ experience then transforms this evidence into the practical application of communication skills teaching. Areas such as role-playing, consultation analysis and session facilitation are dealt with thoroughly. In addition one of the most valuable features of this book it uses a question-based format in parts allowing the teacher to dip in and out as needed.

This book tackles the spectrum of communication skills in medicine from undergraduate level through the post-qualification period to the experienced practitioner. Furthermore there is detail enough to provide guidance on developing a communication skills curriculum for undergraduates and doctors of all levels.

Any doctor who teaches would find this book of immense value. It also tackles specific concerns the medical teacher may have and provides strategies for dealing with these. Using this book will increase confidence in the medical teacher, which in turn can only improve the quality of the teaching.

Do we need another book on communication skills in medicine? Until we perfect the art of one of the most important skills of the doctor, I suggest we do and this book fits the bill perfectly.

Barry J A Laird, Specialist Registrar in Palliative Medicine, West of Scotland Deanery.

Working relationships: Spirituality in human service and organisational life

Pembroke N.

ISBN 1-84310-252-8

Jessica Kingsley

Neil Pembroke sets out to provide a ‘theological and ethical interpretation of human relationships in human service acts and the organisational life supporting those acts.’ He focuses on four groups, psychotherapists, nurses, midwives, and teachers. He describes the theological background to his study and then looks at various factors of working life, such as self-communication, or sharing oneself as part of a professional role, then follows a discussion of what constitutes a virtue, and then he ties these theories together to demonstrate that self-communication is itself a virtue. The gift of charm is recommended as giving a bit more: the charming nurse lights up a room; the charming teacher elicits love as well as respect.

In the second section of the book, Pembroke uses the analogy of Yahweh’s covenantal relationship with his people Israel to analyse management/worker relationships in the modern workplace. He writes about the structure of modern capitalist business relationships and the ‘quasi-market’ within the modern NHS. In these complex relationships he sees a parallel with Yahweh’s relationship with Israel of love, support and chastisement. However, he does not deal in anything like enough depth with the drawbacks and dangers of his model, touching briefly on the equality of human rights in interpersonal relationships whereas Israel was only able to pray to their God (p130).

This study says much which is true but it lacks thorough examination of its models, and of some of its premises, and there is little to keep the reader engaged as the models are all abstract and literature based. It might have been interesting to tie together the organisational and personal aspects of the book by, for example, asking nurses themselves why it is difficult to remain charming in the face of paperwork, agenda for change, budgetary constraints and the difficulties of work-life balance, rather than simply asserting that they must do so. Equally it would

be interesting to know, perhaps through a survey of the modern workplace, how many workers and managers would subscribe to his theological model of covenant relationships, to ask whether one group prefers the model, and why.

Much in this book is of worth, the need for personal skills, and good interpersonal relationships, for good communication and the giving of ourselves in the workplace is to be commended. Yet, the author fails to communicate his own passion for the subject. Coupled with his lack of any practical research into the actual attitudes in the workplaces he describes, this leaves the reader feeling dissatisfied and wanting a little more.

Janet Foggie, mental health chaplain, NHS Tayside.

Someone Very Important Has Just Died – Immediate Help for People Caring for Children of All Ages at the Time of a Close Bereavement, Turner. M

ISBN 1-84310-295-1

Jessica Kingsley

Turner is a bereavement counsellor and stresses that at the time of a close bereavement people usually forget helpful things said to them. In her work Turner has used notes which she gives to her clients as an aid to memory and this book is based on these notes.

There are eight short chapters beginning with the reaction to a death and covering all the issues up to the funeral with a final chapter addressing the future. Each chapter begins with a brief description of the issue and then continues with a number of bullet points which stress the actions that can be taken. Perhaps the most useful chapter, from a carer's point of view, is the one that gives examples of words that can be used to explain to a child about the nature of death, seeing the body and the funeral.

Implicit in the book is the fact that children, of whatever age should, quite rightly, be kept fully informed of what is happening at this awful time in their lives. Adults are also advised not to hide their feelings from the child.

The book is clearly laid out and easy to read. It is certainly "user friendly" and directly addresses the issues arising around the time of death using

straightforward language. Illustrations help to break up the text but are quite small and could perhaps have been more imaginative especially given the fact that there are several blank pages between chapters.

There is a useful list of contacts at the end but why does Turner omit reference to "Winston's Wish" an excellent resource for bereaved youngsters and who produce written material of a similar nature?

Eric Butlin, Social Worker, Highland Hospice, Inverness.

Being Mindful, Easing Suffering: Reflections on Palliative Care

Johns C.

ISBN 1-84310-212-9

Jessica Kingsley

This book is written in a very interesting style in that the majority of the text is in the form of a diary that the author kept in regard to caring for various patients. It is therefore possible for the reader to follow the care of specific patients across a period of time. This gives insight into the way that the author works out his theories which are expressed in the first section entitled: Mindful Practice.

Johns' understanding of Mindful Practice is the ability for the health care practitioner – in his case as a nurse – to be ever present of what is happening for the carer whilst they are caring in a way that is non-judgemental so as to bring about an ease in the suffering of patients. The suffering that patients experience may well be physical but will also involve the emotional, spiritual and existential. It is, according to John, only by the carer being acutely aware of what they are experiencing, saying and doing that can truly respond to the patient's experience and thus look at the whole patient rather than just one element.

The spiritual focus of Mindful Practice is based on the meaning the patient gives to their dying and what will happen after their death. Johns is helpful in describing the spiritual as being an elusive element as opposed to much literature wanting to know and explain the exactitude of spiritual care. Johns' understanding of the spiritual can be seen in the larger section of the book in the various narratives of patient care. He does however include a very inter-

esting chart of 'Spiritual Traps' that care givers need to be wary of which may hinder the care of the dying in the way that dying would wish to die and be mindfully present of how we project assumptions onto the dying and the need for us to notice that it is not us who are dying.

Johns' book concludes with a postscript written by Bert Leguit entitled: Reflections from a Buddhist Perspective. Leguit stresses the importance of Johns' ability to reflect on his work and to think about what he has done or said and to suggest that from a Buddhist perspective the work of the carer is to be aware of the ever present changing process of each person's dying.

How good it would be if we could all be 'present' in our work and to reflect in order to notice what we say and do in our care of easy suffering. The skill may be for many of us to relinquish our hold on a very prescriptive way of 'delivering' and 'monitoring' spiritual care to a more balanced approach and one that is largely guided by those we care for so that we respond to their needs and not ours.

Peter Wells, Lead Chaplain and Bereavement Offices Manager, Brighton and Sussex University Hospitals NHS Trust

The Inspiration of Hope in Bereavement Counselling.

Cutcliffe, J. R.

ISBN1-84310-082-7

Jessica Kingsley.

This book is aimed at counsellors in the field of bereavement, at chaplains and clerics, and at mental health practitioners. It's purpose is to address some deficits that exist in hope inspiration theory, to investigate the processes involved in inspiring hope in bereavement, and to gather evidence upon which to base research and intervention. Throughout, the implicit question is 'Who is the counsellor who can inspire hope?'

The author's chosen method is that of grounded theory, and his detailed research strategy is outlined in a useful appendix to the main text. From the research there emerges an integrated theory comprising one core variable ('Hope inspiration') and three sub-core variables ('forging the relationship': 'facilitating a cathartic release'; 'facilitating a healthy (good) ending').

tating a cathartic release'; 'facilitating a healthy (good) ending').

After a somewhat sketchy exploration of the nature of hope, chapters two and three are devoted to a discussion of how hope works, and its importance in bereavement counselling. The author describes hope inspiration as 'a subtle, unobtrusive process, interwoven with the same subtle act of caring'. It is implicit in the counselling, and focuses on ways of being rather than doing. Hope inspiration depends upon the quality of the relationship, the Rogerian conditions of empathy, genuineness and unconditional positive regard, and what is called the 'human-human spiritual connection' between counsellor and client.

Chapters four to six are given over to a discussion of the processes implicit in the three sub core variables, while chapters seven and eight explore implications for education, research and policy. The author argues for a renewed appreciation of the value of the human; of fundamental qualities of caring, compassion, relatedness – in short, for those things which his research has identified as inspiring hope, and which do not rely heavily upon expertise and technique. He argues that an increasing emphasis in healthcare upon brief, solution focussed therapies; upon the acquisition of readily measurable skills; upon the 'quick fix' brought about by the expert fixer, is inimical to an approach which inspires hope.

This book is written in a simple, lucid style, and is concise enough to be read through without the reader becoming bogged down in detail. It would be useful to those whose training in dealing with bereavement issues has not considered the importance of inspiring hope, although person centred practitioners would find much that is basic to their philosophy. My first impression was that the author was often stating the obvious, but on reflection this may be because his emphasis on caring, human qualities is familiar territory to chaplains like myself who are used to that which is intangible, hard to measure, implicit and subtle. There may be weight in what he says about the importance of re-stating such fundamentals, in a climate in which technical intervention can replace human connectedness.

Georgina Nelson, editor, and chaplain, St. John's Hospital, Livingston

Spirituality, Health, and Healing

Young C., and Koopsen C.

ISBN 1-55642-663-1

Slack Incorporated, USA

This is a surprising gem of a book that gives a truly comprehensive exploration of spirituality in healthcare. Although clearly written for the American market and from that experience there is real in-depth insight into spirituality in healthcare that transcends the pond.

The book is clearly structured in four sections that helps break down this broad and diverse topic: The spiritual dimension, providing spiritual care, spiritual dimensions in end-of-life care, and, spirituality and special populations. Each of the 12 chapters ends with a useful summary and key concepts.

There is a useful section on Spiritual Care Generalists and Spiritual Care Specialists. The generalists being the doctors, nurses and social workers, the specialists being chaplains, clergy, parish nurses, and family and friends. The surprise in the specialists are the parish nurses trained in Spiritual care, holistic care and spiritual healing, and the family

and friends. It is encouraging to read a chapter that speaks positively about chaplaincy as a specialist and professional service and describes the blurred distinction between chaplains and clergy many healthcare professionals have.

The book offers a helpful summary of spiritual assessment tools, all of which require a conversation rather than a tick box list, and alongside the assessment tools is a comprehensive list of therapeutic interventions many of which we in the UK would describe as complementary therapies e.g. art, music, dance, animals and humour.

All in all this is a book worthy of a read and one well worth recommending to your hospital/hospice library.

David Mitchell, editor, and lecturer in palliative care, Marie Curie Hospice Glasgow.