

## Book reviews

**Meads, G. and Meads, T.** eds. 2001: *Trust in experience: transferable learning for primary care trusts*. Oxford: Radcliffe Medical Press. 240pp. £19.95 ISBN: 1 85775 457 3.

### *“There once was an ugly duckling . . .”*

This is an excellent book which will shine more brightly after it has had time to mature. At present it has all the right genes, but their expression is obscured – there is a lack of clarity about the key messages which readers will be searching for. Time and experience will clarify many of the issues – but this book is opportune in helping set the agenda.

Those who are currently developing the new primary care centred health service at local level, have been flying by the seat of their pants, they are reacting to day-to-day events and are desperate for guidance on how to not only survive – but also thrive. ‘Transferable learning’ – examples of what works that can be useful on the ground, has something to offer here – but with the usual caveats about transferability and relevance. Their’s is a new world, they may draw on past experience as they evolve and take on new responsibilities, they need to learn quickly and to actively support such learning at individual and organizational levels.

This book seeks to offer transferable learning – drawing lessons from elsewhere to help the new primary care organizations be more effective. Through this approach the book reminds readers what has been successful elsewhere and how to apply the lessons.

The first section ‘Policy into practice’ sets the scene and describes the challenges facing new primary care organizations – dealing with tribalism, establishing appropriate governance and managing relationships for example. This section could have been strengthened by the inclusion of examples of learning systems and organizations – such as the King’s fund whole systems series. The use of international comparators is also refreshing and appropriate as new primary care organizations begin to

appreciate that the macro forces of globalization affect them as well as everyone else – over the supply of medicines for example. I particularly liked the examples from Moldova and Costa Rica as they help to put our own challenges into perspective.

The second section ‘Practice into policy’ is inevitably less coherent as it brings together a variety of material and authors who offer a ‘pot pourri’ of experiential learning for Primary care to draw on. Between them these chapters outline many of the challenges primary care organizations are facing and provide some helpful guidance – such as John Ashcroft’s chapter on ‘New partnerships’; Robert Moore’s on budget and corporate governance issues; and Michael Berridge on the cultural challenge of Clinical governance. However, transferable learning might be helped by less concentration on description and process and more on principles and outcomes, allowing more space for the learning to appear might also be helpful – either using examples from the past or from other sectors or countries. I regretted the absence of examples of transferable learning which could throw light on pressing current problems such as :

- ✓ Entrenched tribalism
- ✓ Modifying the medical model
- ✓ Moving from disease focus to health focus
- ✓ Building learning organizations
- ✓ Balancing local needs against national imperatives
- ✓ Expanding the sectors capacity while managing poor morale and difficult recruitment issues.

Readers will have to struggle on with these – and other issues. ‘Getting to grips with social services’ for example requires an appreciation of each other’s cultural inheritance, the funding and planning mechanisms involved and the archetypes and paradigms they are comfortable with. At present it sometimes feels as though Social service representatives are ‘token’ in health dominated organiza-

tions – changing that requires a great deal of learning, sharing and analysis.

Examples of learning about these issues, and editing to focus on transferable learning opportunities would have made the section stronger and would have helped to make the final section 'Looking ahead' more meaningful. Scenarios of the future, the ethical basis for successful PCO operation and regaining public confidence are each elegantly written and relevant but would have shone more if the middle section had been more comprehensive.

Like the ugly duckling, this book should shine later – The title 'Trust in experience' implies a

more comfortable situation than readers will be experiencing, however the experience of Primary care organizations now and in the next few years should help to flesh out this book and offer rich transferable learning opportunities more relevant both within primary care and beyond.

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