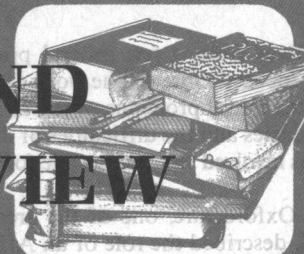




BOOK AND VIDEO REVIEW



USER SURVEYS OF GENERAL PRACTICE

I. Some suggestions about how to do such surveys by post
Ann Cartwright

Institute for Social Studies in Medical Care, London (1989)
43 pages. Price £2.50

II. Some findings from a postal survey of users' views and experiences of general practice

Ann Jacoby

Institute for Social Studies in Medical Care, London (1989)
28 pages. Price £2.00 (£4.00 for both books)

In the first of these concise and informative booklets, Ann Cartwright lists the types of information which can be gathered by user surveys in general practice. She then goes on to show how such surveys can be carried out, giving practical suggestions about how to select a suitable sample, phrase the initial letter which is sent to patients and obtain a good response rate. The major part of the booklet is devoted to the design of questionnaires for use in user surveys. The questions need to be clear and unambiguous and most should be answered by ticking or circling a response.

In the second booklet, Ann Jacoby describes how one user survey provided information on patients' perceptions of general practice. Information was gathered about the accessibility of care, the nature of care and the doctor-patient relationship. The study was carried out in 10 different areas, with a random sample of 160 people in each area. The results are of interest in themselves but are also useful as a bench mark against which practices can judge their own performance.

Taken together these booklets will be of value to general practitioners who wish to include patients in their audit of the services provided by their practice.

GRAHAM BUCKLEY

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LIVING AND WORKING WITH HIV

A training pack for staff in the personal social services

CCETSW, London (1989)

Six book pack. Price £20.00

This pack has been produced and published by the Central Council for Education and Training in Social Work (CCETSW). It arises from a project undertaken in 1988 to gather information on the training needs of staff providing services for people with human immunodeficiency virus (HIV) infection.

The pack consists of a 94 page A4 document, *Training guidance for staff in the personal social services*, and a similarly sized directory of training resources together with four discussion papers addressing some of the more sensitive areas, such as working with black and ethnic minority communities.

Although described as a training pack, no training materials

are included. Rather, it is intended to assist those who are responsible for developing training policy and programmes. The guidance manual contains a complex matrix to help identify information needs, attitudes and feelings, skills and organizational issues for different staff groups working with a range of people affected by HIV. The directory of training resources is well classified to complement this and the guidance document also provides helpful information about training strategies, methods and evaluation.

Although specifically intended for a social services audience, many of the issues and problems identified are common to other aspects of community care. Health service managers may find it helpful to refer to the guidance when developing training programmes for community based staff. Primary care teams may also find the pack helpful in assessing their training and support needs related to living and working with HIV.

MARYAN PYE

*Special adviser to the AIDS programme,
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RESPONDING TO THE AIDS CHALLENGE

A comparative study of local AIDS programmes in the United Kingdom

Maryan Pye, Mukesh Kapila, Graham Buckley and Deirdre Cunningham

Longman, Harlow (1989)

215 pages. Price £12.95

Responding to the AIDS challenge is the result of the coordination by a small steering group from the Health Education Authority, the Royal College of General Practitioners, and the then Faculty of Community Medicine, of reports from nine areas in the UK about how the challenge of the acquired immune deficiency syndrome (AIDS) had been met at a local level.

The aim was to select areas which had high and low prevalences of AIDS and which were spread over a wide geographical area. Four areas of high prevalence and five areas of low prevalence were located, each with two or three local contributors of whom eight were in health education, seven were community physicians, five were general practitioners and three were other types of clinician.

The four areas of high prevalence were Paddington and North Kensington, Bloomsbury, Lothian and Brighton. In Paddington and North Kensington the organizational response had shifted from a clinical base with research funding to a management base with health authority funding. Local issues such as housing and prostitution were considered in depth, whereas the report from Bloomsbury concentrated more on the problems of drug users and the community care of AIDS.

The report from Lothian revealed that there was little provision to cope with AIDS and associated drug usage; much

depended on initiatives from a few general practitioners. In Brighton the report focused more on the work of the voluntary sector and highlighted initial problems owing to inexperienced staff in statutory agencies and the difficulties of deciding which of the various groups involved was responsible for which aspects of AIDS care.

The report from Oxfordshire, one of the areas with a low prevalence of AIDS, described the role of an AIDS liaison officer and primary care facilitator, whereas in Bradford an AIDS control forum had been established with an emphasis on education and ethnic minorities. In north west Hertfordshire the district AIDS policy emphasized prevention and health promotion; the report from this area included a discussion of the problems of AIDS and mental handicap.

Northern Ireland was another area of low prevalence and the organizational response to health promotion was facilitated by good communication between the various groups involved. The same emphasis on health promotion was evident from the report from Wales where the Welsh AIDS campaign was launched in 1986. This was claimed to be successful, although more in terms of good relationships between agencies rather than from any evidence of outcome measures.

We need to understand more about the process of organizational change in order to improve the delivery of services and this book is a valuable account of varying local responses to the challenge of AIDS. The scale of the problem is indicated by the following facts: the first UK AIDS case was identified in 1981, six years later there were 1000 cases, and in 1988 1% of all men aged between 15 and 45 years in Edinburgh were positive for the human immunodeficiency virus.

DAVID R HANNAY

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TEAMWORK IN PALLIATIVE CARE

Robin Hull, Mary Ellis and Vicki Sargent

Radcliffe Medical Press, Oxford (1989)

160 pages. Price £8.95

This book is one of a pair released simultaneously, the other being *Palliative care* written by a recently retired hospice medical director. The authors of *Teamwork in palliative care* are equally well qualified — an experienced academic general practitioner and two senior nurse colleagues all working in the same hospice, a trio uniquely placed to write on teamwork, that much aspired to but seldom achieved ideal.

The challenges are obvious to all in the field. How do you marry the many skills of so many cooperating disciplines? How do you support each other at times of professional stress or loneliness? In what specific ways can nurses assist doctors in the diagnosis of pain and confusion? In what specific ways can doctors help nurses to use their many professional skills to the full? How can professionals in palliative care cope with frequently changing and overlapping roles?

Readers will find much useful information in the chapters on palliation (as indeed they will in the sister volume) and much of interest in the chapters on complementary medicine, the acquired immune deficiency syndrome and hospices. All are written, as one would expect, with sensitivity and keen insight. Only at the end of the book is there a chapter devoted to teamwork, again challenging and thought provoking but less helpful than I had hoped it would be.

Teamwork is so much more than each member of each profession involved in a patient's care being knowledgeable and doing the job to the best of their ability. This book may well help them to do that, but an opportunity has been missed to advance our insights into genuine teamwork.

DEREK DOYLE

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