

pressure in an urban practice. A couple of clinical errors lead to a formal complaints procedure, and at this vulnerable time she is introduced to Dominic Peters, not long widowed and caring for his 4-year-old daughter, Bella. Ruth is soon emotionally engaged with both of them, and finds herself drawn into a complex situation involving suspicions of fabricated illness and doubts about Dominic's motives. The narrative races along, helped by the use of the present tense and the bite-sized chapters, and the tension ramps up steadily towards the satisfying denouement. It comes as no surprise to learn that Fiona Blakemore is the pseudonym of a practising doctor, and this is her first, self-published novel. As a medical psychological thriller it succeeds well enough, and may provide some welcome relief from reading about COVID-19.

Some recent Amazon reviews:

'There's quite a lot of medical stuff, as you would expect but this is an impressive debut.'

'Very good character development and an interesting insight into the world of a GP. The plot developed well and the ending was very well crafted and kept me guessing until the last.'

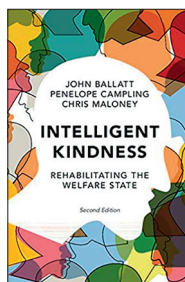
'Intertwined themes of Medicine, finance and controlling behaviour make for a real page-turner.'

Dougal Jeffries,
Retired GP, Falmouth, Cornwall.
Email: dougal6@gmail.com

DOI: <https://doi.org/10.3399/bjgp20X710633>

Intelligent Kindness: Rehabilitating the Welfare State. 2nd edition **John Ballatt, Penelope Campling, and Chris Maloney**

RCPsych/Cambridge University Press, 2020, PB, 258pp, £16.99, 978-1911623229



USING KINDNESS TO MAKE TEAMS WORK MORE EFFECTIVELY

This is the second edition of *Intelligent Kindness*. Originally written for managers in the health services, this second edition has increased its scope to include managers in the social services. While there is something on the national policy level and something for individual practitioners, the bulk of the book is aimed at managers of teams in health and social care. It comes highly recommended with ringing endorsements from Iona Heath and Phil Hammond.

The basic thesis is one with which most GPs will be familiar and in full agreement — which does not mean that the case for it does not need to be made. Since the founding of the welfare state and the NHS, in the full flush of national solidarity after the Second World War, there has been a slow but inexorable retreat from the values of fellowship and compassion that then motivated my parents' generation. There has been increasing bureaucratisation, fragmentation, regulation, and loss of autonomy by practitioners since that time.

The book's argument is that if values of kindness were intelligently applied across the system — hence the name of the book, *Intelligent Kindness* — then the effectiveness of the system would be measurably increased. By kindness, the book means not just compassion, but also the belief that we are 'of the same kind', 'in the same boat together', that we are all kin, that we all belong to the same family.

The book gives the example of the 'Reclaiming Social Work' model.¹ In social work teams dealing with child abuse, practitioners were typically spending 80% of their time on paperwork and 20% with clients. After this intervention, which involved breaking a larger group into smaller teams with a mutually supportive ethos, and training staff in systemic therapy, practitioners were spending 60% of time with clients and 40% on paperwork. There is clearly much modern managers (and many GPs are now involved in managing CCGs and so on) could learn from this book. Equally there is good introduction to the literature of many different specialist fields, such as group dynamics or compassionomics,² which provides useful insights on how to manage teams. The book is well written in clear and accessible English.

Why then did I find it so difficult to read? Much of the book is 'motherhood and apple pie', that is to say, its message is obvious to anybody except an NHS middle

manager running a team on a shrinking budget who needs to pretend that they can meet their targets. More seriously, written by two psychiatrists and a management consultant, it seemed to me to avoid the reality of evil. Even in a well-managed team with good communication, people can still be greedy or lazy. What is needed is a proper balance between autonomy and regulation.^{3,4} Admittedly, current NHS teams almost all have too much regulation and too little autonomy.⁵ On the national scale, we now have politicians who no longer share the values of compassion and kindness that the authors of this book and most GPs take for granted, but rather have turned to an exclusive nationalism typified by the recent 'hostile environment'.

So, this book is a 'must read' for NHS managers who want to use intelligent kindness to make their teams work more effectively. Here they can find some techniques to enable them to do so. It will also help them to put the case for such changes cogently to more senior managers. The book does not, however, address (nor claim to address) the moral, philosophical, and religious question of why, as a nation, our values have drifted so far from those of our parents.

Gervase Vernon,
Retired GP, Essex.

Email: gervase@jgvernion.co.uk

DOI: <https://doi.org/10.3399/bjgp20X710609>

REFERENCES

1. Bostock L, Forrester D, Patrizio L, *et al*. *Scaling and deepening the Reclaiming Social Work model. Evaluation report*. Children's Social Care Innovation Programme Evaluation Report 45. Department for Education, 2017. https://www.researchgate.net/publication/318249830_Scaling_and_deepening_the_Reclaiming_Social_Work_model_evaluation_report (accessed 20 May 2020).
2. Trzeciak S, Mazzarelli A. *Compassionomics. The revolutionary scientific evidence that caring makes a difference*. Pensacola, FL: Studer Group, 2019.
3. Vernon G. Professional autonomy: a good thing or a bad thing? In: Vernon G. *General practice as if people mattered. Collected medical essays 1998–2017*. CreateSpace Independent Publishing Platform, 2018.
4. Friedson E. *Profession of medicine. A study of the sociology of applied knowledge*. Chicago, IL: University of Chicago Press Books, 1988.
5. Iliffe S. *From general practice to primary care: the industrialization of family medicine*. Oxford: Oxford University Press, 2008.