Book Reviews

Collaborative Management in Health Care: Implementing the Integrative Organization

Martin P. Charns and Laura J. Smith Tewksbury

Jossey-Bass, San Francisco, 1993, 321 pp., \$39.95

BY THE AUTHORS' OWN ADMISSION, A book about implementing integrative organizations is a "tall order." Their goal is to write about making healthcare organizations more effective, "more responsive to patients, more timely and efficient in delivering services, more satisfying for professional staff, and more collaborative in relations with physicians" (p. 3). That indeed is a tall order.

Nevertheless, the book is comprehensive and coherent. The first part discusses an effective organization's design, including the challenges of improving organizational effectiveness, the continuum of organizational forms, leadership skills for integrative managers, the accompanying incentives or rewards, congruence between organizational structure and information systems, and surviving the change process. In the second part of the book, six case studies are reviewed in light of these concepts.

It is difficult to disagree with the authors' first premise that "the design of an organization has an important influence on what happens, how people interact, what is done, and what is not done" (p. 6). What this statement lacks, however, is an explanation of why institutions should engage in efforts at redesign. Charns and Tewksbury do cite many recent efforts to improve the functioning of hospitals, but the reasons they give for seeking improvement have become clichés. The text fails to convey the urgency with which the current healthcare crisis is propelling change.

More important, the text does not convey a sense of the difficulty of the task. Organization design implies changing or restructuring the present arrangement of people, work, and responsibilities. This is not a minor task. However, the authors make little mention early in the text of resistance to change and how to deal with it. Value-driven reasons for

The Art and Vocation of Caring for People in Pain

Karl A. Schultz, Paulist Press, Mahwah, NJ, 1993, 110 pp., \$7.95 (paperback)

Using the story of Job as a starting point, this book argues for an ecumenical dialogue involving the disciplines of healthcare, spirituality, and pastoral care. The author addresses the importance of self-understanding and of the personal meaning in suffering and care giving. He explores positive and negative paradigms of care giving, the language of suffering, and the benefits of humor. Finally, he gives practical suggestions for healing through use of the book of Job.

Physician-assisted Death

James M. Humber, Robert F. Almeder, and Gregg A. Kasting, eds., Humana Press, Totowa, NJ, 1994, 165 pp., \$39.50

Seven articles by leading authorities examine the medical, ethical, legal, and philosophical issues involved in physician-assisted suicide. The analysis includes an examination of recent public opinion polls and surveys of physicians, the impact on both society and the physician-patient relationship, and the relationship between physician-assisted death and the right to privacy.

BOOK BRIEFS

Handbook for the New Health Care Manager: Practical Strategies for Challenging Times

Donald N. Lombardi, American Hospital Publishing, Chicago, 1993, 486 pp., \$42 (AHA members), \$52 (nonmembers)

In 16 chapters this text describes multiple techniques to help new managers build teams, make decisions, communicate effectively, handle conflict, and manage time and stress. It includes practical tools such as "management guidesheets" covering key issues to ask in various situations, a mentoring guide to help managers practice new skills, and a 10-part process for effective decision making.

Quality Practice Management: How to Apply the Principles of Total Quality Management to a Medical Practice

A. Douglas Bender and Carla Krasnick, Thayer Press, Swathmore, PA, 1993, 269 pp., \$79.95 (paperback)

This workbook was developed as a selfstudy guide for physicians who wish to introduce total quality management (TQM) into their practice. Ten chapters cover the basic principles, benefits, and tools of TQM; highlight areas for quality improvement in a practice; and provide exercises and steps for implementing TQM.

BOOKS RECEIVED

Cancer and Faith: Reflections on Living with a Terminal Illness, John change, such as improving the community's health status or providing universal access, are not frequently identified in the text, even though these reasons provide the impetus for overcoming resistance to change. Dealing with change issues within the context of organization design may have made the text more helpful to the reader.

The authors present their central thesis in chapter 2, "The Continuum of Organization Structures." It is, perhaps, the most complex chapter, for it deals simultaneously with differentiation and coordination. Charns and Tewksbury define differentiation as the specialized work functions, while integration is an attempt to coordinate these functions across traditional boundaries such as departments or programs.

Carmody, Twenty-Third Publications, Mystic, CT, 1994

Communication for Health and Behavior Change: A Developing Country Perspective, Judith A. Graeff, John P. Elder, and Elizabeth Mills Booth, Jossey-Bass, San Francisco, 1993

Creative Long-Term Care Administration, 3d ed., George Kenneth Gordon and Ruth Stryker, eds., Charles C Thomas Publisher, Springfield, IL, 1994

Managing Stress: Principles and Strategies for Health and Wellbeing, Brian Luke Seaward, Jones and Bartlett Publishers, Boston, 1994 (accompanied by Managing Stress: A Relaxation Tape)

Medical Staff Credentialing: A Practical Guide, Fay A. Rozovsky, Lorne E. Rozovsky, and Linda M. Harpster, American Hospital Publishing, Chicago, 1994

Work redesign in healthcare is a relatively new concept. The authors present a continuum of nine organizational forms, describing the strengths and weakness of each. However, their treatment of the forms, especially of integration, tends to be too removed from the human dimensions involved. Collaboration, which is at the heart of integration, requires a far different set of values, motivations, and interpersonal skills than does functional differentiation, which is generally rooted in authority, power, and control. It would have been helpful to describe or characterize the human dimension in the shift from differentiation to integration.

The preceding chapters come together in chapter 3 as the authors delineate more clearly the leadership skills integrative managers need. They pose a logical sequence, in which structures follow strategy and dictate the qualifications needed by integrative managers. Although the book emphasizes the need for new organization design, integration, in fact, requires a new vision as well. This vision will be expressed in the form of strategies that ought to be agreed on and communicated. Thus the authors' elaboration seems truncated. This triad of concepts needs to be developed with greater depth.

The preeminent skill that an integrative manager needs, the authors contend, is the ability to tolerate a high degree of ambiguity, especially in a time of uncharted change. In addition to having a clinical background credible with physicians and other clinicians, the integrative manager needs skills for conflict management, interpersonal communications, and process.

The authors ignore other important considerations, however. They do point out that at the heart of integrative organizations are foundational values such as mutual respect, trust, attentive listening, collaboration, and a commitment to common goals and a shared vision. However, the authors make little note of the fact that the cultures of a large number of healthcare facilities are patterned on hierarchical models of organization that are antithetical to integrative models. More attention needs to be paid to the ensuing clash of cultures that integration may precipitate.

Another consideration omitted is appropriate support for the integrative manager. Charns and Tewksbury imply that managers' authoritative approval for the implementation of the redesign will enhance its chances of success. However, if senior managers are unable to endure the ambiguity integrative managers must live with, the project is doomed to failure. Integration requires the same leadership skills throughout an organization—an understanding the authors seem to overlook.

Clearly this book's centerpiece is in the first three chapters. The chapters elaborating rewards and information systems are readable but break no new ground. On the other hand, the six case studies are valuable. They are varied in content and are written in a less formal style than the rest of the book. The cases provide a good way of learning what could be tried and what ought to be avoided in one's current situation.

A surprising fact about this book is that is was published in 1993. As a recent publication, it seems to lack enthusiasm for its own subject matter, integration. As healthcare reform sweeps across the United States, an indepth articulation of integration is needed more than ever, but this book falls short of meeting its own tall order. The authors are knowledgeable, but they show restraint in thoroughly exploring their ideas and drawing out the interrelationships between major concepts. Nonetheless, if managers have not begun to think about integration, this book is a helpful (if dry) first read.

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