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## BOOK REVIEWS

**Collaborative Caring: Stories and Reflections on Teamwork in Health Care.** Edited by Suzanne Gordon, David Feldman, and Michael Leonard. Ithaca, NY: Cornell University Press; 2014. 286 p. \$27.95. ISBN: 978-0-8014-5339-7. ©

As its subtitle makes clear, this is not a book about group psychology, collaboration theory, or research on health care delivery, although it is grounded in all of these. The editors invited clinicians to submit “short, concise narratives that describe a concrete example in which you personally have been involved.” They also sought personal reflections “that would enhance our understanding of either how to produce genuine teamwork or the obstacles that stand in its way.” The result is a compilation of lived experiences and astute observations from people on the front lines of patient care.

The editors provide just enough conceptual and theoretical background to give these essays clear context. Their definition of teamwork is largely based on the work of Harvard sociologist J. Richard Hackman. *Collaborative Caring: Stories and Reflections on Teamwork in Health Care* rests on several key themes, like notes on the bass clef on a sheet of music:

- Because humans make mistakes, health care is inherently risky.
- Clinical errors injure or kill thousands of patients every year...and increase the cost of health care.
- Patients and their welfare come first, *always*. (Or should.)
- Traditional health care providers work in professional silos and

health professions education perpetuates this practice.

■ Effective teamwork and clear communication are essential in order to improve quality and reduce costs.

■ Teamwork requires psychological safety for all team members.

■ The patient is a key player on the health care team.

Each of the eight sections in the book explores health care teamwork from a different perspective. Each begins with a brief introduction that sets the stage for the essays that follow, with a few supporting references from the literature.

The first section, “Playing on a Real Team,” relates success stories. At first, it seems the editors have started at the end rather than the beginning, but in reality, these stories say, “Look—it can be done!” before getting into the formidable challenges to developing high-functioning teams. Having seen in section one what great teamwork looks and feels like, the reader is brought back to typical reality in section two, with three examples of poor teamwork and its unpleasant results. And it is not just the patients who suffer; bad or nonexistent teamwork damages clinical caregivers, too.

The following sections talk about the patient as a team member, the necessity of psychological safety for team success, teaching and coaching, and collaborative patient advocacy. The penultimate chapter looks at the significant barriers to collaborative care, including traditional limitations and hierarchies in professional roles, time pressures, and limitations of health care reimbursement.

At heart, infusing collaboration and teamwork into the delivery of

health care is about changing culture, and the last chapter, “Taking Teamwork Institution- and System-Wide,” reports several examples of such initiatives.

*Collaborative Caring* makes a compelling case for moving to a collaborative culture in health care, though that is hardly necessary. Other books and articles have done that, including *Creating the Health Care Team of the Future: The Toronto Model for Interprofessional Education and Practice* by Sioban Nelson, Maria Tassone, and Brian D. Hodges, reviewed in the April 2015 issue of the *Journal of the Medical Library Association*. (In fact, at least one contributor is from the Centre for Interprofessional Education at the University of Toronto.) What *Collaborative Caring* does, as the editors intend, is to show rather than tell how true teamwork can make the health care system be what it should be. It is the practical side of the collaboration coin, and it both informs and inspires.

Despite its large number of contributors, this book is fairly consistent in style and is very readable. Most of the essays are just a few pages long, inviting quick revisits once the book has been read. Unfortunately, the lack of an index makes it difficult to find specific information in the book. The text is remarkably free of editorial mistakes, and the occasional grammatical lapse is quite forgivable given the anecdotal nature of the essays. Suzanne Gordon, David L. Feldman, and Michael Leonard, who between them contributed five of the book’s fifty chapters, have made an important contribution to the literature of collaboration in health care. This reasonably

priced book should be required reading for anyone in a health professions education program and is strongly recommended for *anyone* already working in health. After all, as several of these stories show us, health care teams can and should include all of the workers who help to make our hospitals and health systems safe and effective.

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**Health Sciences Librarianship.** Edited by M. Sandra Wood, FMLA. Lanham, MD: Rowman & Littlefield; 2014. (Published in cooperation with the Medical Library Association.) 448 p. \$83.00 ISBN: 978-0-8108-8813-5. ©

This sixteen-chapter book is broken up into four parts that cover health sciences librarianship in a variety of settings, with an extensive preface that discusses the field of librarianship and information sciences, particularly health sciences librarianship. This book has been created to be a textbook for courses on health sciences librarianship. Each chapter ends with a summary, discussion questions, and substantial references. The chapters are written by different individuals, which in some cases could lead to disjointed or awkward reading but is not the case in this instance. The editor asked the authors to focus on their content relevant to academic or hospital librarians as much as possible, which I think helped with the flow of content.

The first part is on the history and development of health sciences librarianship. Chapter one looks at education, professional organizations, and journals needed to enter or support a career in health sciences librarianship along with job opportunities in this field. Chapter two is about the health sciences environment. The US health care system is presented along with discussions on quality, history, professional education in America, and biomedical research. There are a few paragraphs about global health. Chapter three finishes this section by focusing on emerging trends in the field. Evidence-based practice (EBP), active learning, and research collaborations are presented in detail, as they should be. A fourth trend is strategies for adapting new technologies, which I found interesting. The “hype cycle” and minimum viable product (MVP) are very appropriate and relevant to this trend. This chapter reminds health sciences librarians to stay current and offers ideas beneficial to the new librarian as well.

Collection services is the focus of part two. The cycle of developing a collection, identifying patron types and needs, developing policies (uniform resource locators [URLs] are provided for real-life examples), and putting policy into practice are presented in chapter four. In addition, the information on workflows related to physical resources and electronic products is very useful. The topics of statistics, resource trials, journal evaluation, and budget concerns are also examined. Chapter five concentrates on technical services, defined as “acquiring and organizing information resources so that users can find the information they need” (p.16). Cataloging standards, remote data access (RDA), machine readable cataloging (MARC), and online public access

catalogs (OPACs) along with authority control and classification are covered. In addition, discovery tools, link resolvers, linked data, and the semantic web are discussed. Chapter six focuses on technology services such as integrated library systems (ILS), proxy servers, websites, e-resources, computers, and printers. The evolution from print to electronic and its impact on health sciences librarians are discussed. I found this chapter particularly valuable as a seasoned librarian. Information about the technology life cycle and process of using technology are interesting. Reading about the methods of connecting with patrons and types of resource serves as a great refresher.

Part three is the longest section of this book. This part’s focus on user services is appropriate as user services function as the main role for the solo librarian and as a vital function in all health sciences libraries. Chapter seven covers reference and information services. Types of library patrons and the value of tracking and evaluating reference services are explained. In addition, “the reference desk” itself and how and where it lives in a library are presented. The difference between general reference services and scheduled in-depth research assistance session is discussed.

Meeting the needs of researchers is the focus of chapter eight. Traditional databases such as CINAHL, Cochrane, PubMed, and so on are presented along with a short discussion of Google Scholar. The support of EBP and gray literature is mentioned. How to organize and manage bibliographic citations by and for researchers is detailed as well. Chapter nine is about outreach, which can be internal or external with liaison programs and informationists