## Correspondence

#### **Health Care Teams**

Dear Editors:

Edmund L. Erde's article, Notions of Teams and Team Talk in Health Care: Implications for Responsibilities, published in the October 1981 issue of LAW, MEDICINE & HEALTH CARE, calls for jettisoning the team model of relations among health professionals as well as between providers and their patients or clients. This recommendation is based on various factors of "team talk," such as the incompatibility of whistleblowing and team integrity, the way team talk masks intraprofessional rivalries, and the difficulty of achieving and maintaining teams given governmental mandates for employees and employers. Erde concludes that team talk "hide[s] the real need for change in the hospital by suppressing feelings of alienation, or by manipulating people to feel guilty, while the causes of alienation are allowed to continue." Erde calls for a new philosophy of employment that does not pretend equality among the professions.

Erde seems to hold that these critical insights follow upon a conceptual analysis of the meaning of "team" which turns on the extrapolation of uses of the term from outside the context of health care into that context, rather than proceeding from a general definition of the term to an application of it to specific instances of health care organization. The latter move, however, has the advantage of forcing one to look at health care organizations for occurrent instances of the ideal concept, rather than looking for examples of the term's use which, measured by the ideal, appear grotesque, guided by ulterior motives or uninformed ("a significant problem with this [athletic team model] is that the members of the 'team' may not know the rhetoric required of them nor understand the non-democratic basis for the control of the team"). Erde claims that the democratic team model rarely exists; but it does exist in exciting, effective and powerful instances. Is it not better to study empirically such examples of the ideal concept, to learn how such difficult matters as decision-making, responsibility, compensation, communication with patients, professional status, and incompetent practices are

dealt with, than to dismiss the team concept on the grounds of incomplete, distorted or perverted examples? I am quite in sympathy with Erde's and Bell's perception that a new philosophy of employment is needed; and it is clear that the team model is not always appropriate for all employee/employer relations. Nonetheless, sociological studies of classic examples can yield applicable knowledge that may realize a part of that new philosophy.

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#### Professor Erde responds:

Nothing I said was meant to discourage "study" of or research into decision-making, responsibility, compensation, communication with patients, pro-Continued on page 38

### The President's Corner

The President's Corner is intended to keep you abreast of your Society's current activities and to share with you our plans for the future.

It is my goal as your newly elected President to expand and improve the activities of our Society by increasing the number of members actively engaged in our work. To accomplish this I have as an initial step assigned responsibility of the various functions of our Society to committees which are now being formed. There are still positions being kept open on these committees for members who wish to become more active in our work.

Our Executive Committee meeting in October was the first to be held in our new offices high up in the Boston University Law Tower. The Sagall Library of Law, Medicine & Health Care is also housed there. The Executive Committee approved the formation of various committees to carry out our functions — Finance, Publications, Membership, Lectures and Seminars.

I invite and encourage you to volunteer to participate in our activities by requesting membership in these committees, or by selecting areas in which you can contribute your expertise. Please send your suggestions and comments to me in care of the ASLM Headquarters, 765 Commonwealth Avenue, 16th Floor, Boston, Massachusetts 02215.

The AMERICAN JOURNAL OF LAW & MEDICINE is being published jointly with the Boston University School of

Law in the same format that has been responsible for its widespread recognition as the leading journal in this field. The first issue of our new publication

— LAW, MEDICINE & HEALTH CARE
— under the editorship of Miles Zaremski is most impressive. It represents a consolidation of MEDICOLEGAL NEWS and NURSING LAW & ETHICS, and the total in this case is greater than the sum of its parts! We invite you to submit articles to our publications.

Seminars and conferences are currently being held or planned as usual. The detailed list will be found elsewhere in this issue. Our Lecture and Conference Committee under the direction of Angela Holder is considering conferences to supply the needs of health law instructors and to bring basic legal knowledge to physicians.

We received a grant from the Klingenstein Fund to help defray the expenses associated with the conference, Human Life Symposium: An Interdisciplinary Approach to the Concept of Person, to be held in Houston, Texas, on March 11-13, 1982. This promises to be one of our best conferences ever, and we shall keep you informed of our progress.

As you can see a great deal is going on in our Society, and you should avail yourself of the opportunity to share in our efforts to maintain our Society's preeminent position.

Sidney Scherlis, M.D. President

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fessional status, and incompetent practices. But the study itself can be compromised and diluted if people in the health care setting think of themselves as being studied as a family, club, tribe, group of insiders, or team. Further, the studies that are made of such groups should have a clear grasp on which team models are implied by the rhetoric of the team and embodied by the organizational charts and behaviors. It is also necessary to ask whether the rhetoric and the behaviors are commensurable with each other since they depend upon an understanding of our concepts about teams as well as the general place of teams in our culture - what "team" connotes, the term's strength as a common denominator (perhaps the least common denominator) among people. So the sympathy that Hull expresses with Bell's and my notion that a new philosophy of employment is needed should be accompanied by sensitivity about the ways that our thinking is influenced, shaped and swayed by idioms.

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#### Health Care Delivery

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