

## Book review

**Glasby, J.** (ed.) 2012: *Commissioning for health and wellbeing – an introduction*. Bristol and Chicago: The Policy Press. 257 pp, ISBN 978 1 84742 792 2 paperback; ISBN 978 1 84742 793 9 hardcover; indexed – yes; illustrated – some diagrams. First published online 1 August 2012

The attractive cover of this book shows an apple sliced into four pieces – presumably alluding to the tricky resource allocation decisions required of commissioners. However, on second glance of the precariously balanced horizontal slices I wondered whether a reference to the family game Jenga<sup>®</sup> might be more appropriate, with the unskilled removal of one piece threatening the integrity of the whole structure.

This easy to read, well-presented book aims to be an introductory textbook for those who want to understand the basics of commissioning in health and social care. It skillfully guides the reader through the, at times, turgid terminology (eg, ‘strategic needs assessment’, ‘engagement culture and systems’ and ‘world class commissioning’) offering definitions of key terms and helpful diagrams to complement the main text. The contributors are either based at or associated with the University of Birmingham and the book has arisen out of their research, teaching and consultancy work related to the National Health Service and local government in the United Kingdom. However, the authors point out that the current commissioning agenda can be viewed as the product of international trends in public sector reform, and attempt to present the wider context.

Until recently, jobbing health and social care practitioners may have felt that commissioning was something removed from their day-to-day interaction with patients/clients and not something that

they needed to engage with, or even understand. In the United Kingdom this is changing, particularly for General Practitioners (GPs). The authors argue that those wishing to see improved and better integrated services need to have at least a basic grasp of the emerging new landscape in health and social care provision, with commissioning playing a central role. However, in a world of evidence-based medicine and policy making it seems concerning that the evidence base for commissioning is, as the authors note, ‘ambiguous’.

Chapters cover aspects of the commissioning cycle (needs assessment, priority setting and procurement), and various cross-cutting themes such as joint (joined-up) commissioning, public/user involvement, personalized budget control and decommissioning. All include helpful summaries of key issues and reflective exercises to encourage active engagement with the material. However, the pace of change is so rapid in this area that even aspects of this recently published collection are now out-of-date (such as reference to ‘GP consortia’).

The strengths of this book include the clarity of writing, its grounding in real-world practice and the authors’ expertise in understanding the political and policy context. Those wishing to get to grips fast with ‘the commissioning agenda’ need look no further.

*Bruno Rushforth*  
GP and Clinical Research Fellow in  
Primary Care  
Academic Unit of Primary Care/NHS Airedale  
Bradford and Leeds  
Charles Thackrah Building  
101 Clarendon Road  
Leeds LS2 9LJ, UK  
Email [b.j.rushforth@leeds.ac.uk](mailto:b.j.rushforth@leeds.ac.uk)