

BOOK REVIEW

Peak Performance Under Pressure: Lessons from a Helicopter Rescue Doctor Stephen Hearns (editor),
Published by Jones and Bartlett Learning, 2019. pp. 256
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The title of this book, Peak Performance Under Pressure: Lessons from a Helicopter Rescue Doctor, with a helicopter on the front cover, could be misleading. It could be mistaken for a volume of heroic tales by a pre-hospital doctor, several of which are in existence and some of which are not great. This book is nothing like that. The purpose of the book is to get the reader to recognise that emergency responders sometimes have to cope with considerable pressure in their work, and to demonstrate how the pressure can be 'owned' to best achieve good performance.

The author is Stephen Hearns, an emergency physician who has led a team of doctors and retrieval practitioners (with a paramedic or nursing background) who provide a retrieval and pre-hospital care service for Scotland. His personal and system experience has led to him taking a very keen interest in the inevitable pressures of unpredictable pre-hospital missions, researching how these pressures can be best managed and describing the practical implementation of the techniques.

To provide a structure for the book, the author has devised a model of how performance and pressure relate to each other. Chapters address the various elements of the model. The 'pressure pump' describes how the organisation should prepare and support its members. This covers organisational culture, strategic leadership, and the selection and recruitment of team members. 'Pressure control' relates to how an organisation can maintain enough pressure to perform well but provide tools and techniques to avoid pressure levels rising to an unmanageable level. This includes operational guidelines, checklists, equipment management, optimal team dynamics, and operational leadership. 'Pressure testing' covers how an organisation can check that teams are properly prepared for pressure. This covers training, simulation, debriefing, and individual physical and mental preparation. Lastly, 'pressure relief valves' addresses how to regain control when things have got out of hand. This 'rescue' chapter covers

techniques for regaining self-composure and then regaining control of the situation.

Regardless of how much the reader buys into the model, the structure allows a lot of ground to be covered in a concise format. This is a 230-page paperback that can be read relatively quickly. We are all regularly in contact with lectures, articles, and research covering issues commonly encountered in 'performance science'. This frequently includes error management, decision making, leadership techniques, fatigue management, wellness, and dealing with adverse incidents. There are many books available on each topic and this book summarises thinking in many of these areas in a way that is straightforward and relevant. This book goes beyond performance catchphrases and soundbites but, because it is written by an experienced emergency clinician, stops short of the detailed psychology sometimes written for us by psychologists. This will be a relief to those who want to know about the key issues without necessarily committing to significant time and effort covering the vast array of available relevant material

Before reading a book like this, anaesthetists may question whether a book focused on pre-hospital care is relevant to their practice. The author has trained and worked with anaesthetists who make up a significant proportion of his team. Most of the material and concepts covered are relevant to all clinicians who work in an environment where they are called on to perform well in emergency situations or to put in place systems, tools, training, or techniques to improve safety and performance. Some of the techniques and background performance psychology described may be new to anaesthetist readers. Some of the material (e.g. the use of checklists) may be much more familiar. The case studies are all from pre-hospital situations, although some describe examples from providers outside medicine.

This book is an excellent summary of the problems and potential solutions to the stressful situations that are regularly encountered in emergency practice. It is relevant to

anaesthetic, resuscitation, and trauma emergencies. Even prehospital concepts such as managing a 'flash team', a team formed around an emergency whose members may not know each other, which is also frequently encountered in inhospital emergencies. Unlike many multi-author books, the style is happily consistent and, despite the density of information, readable. The author provides us with a wellresearched account of a subject that is also clearly a personal mission. He also follows his own advice by describing some of his own case studies and demonstrating that good

leaders can be stronger by recognising and discussing their own vulnerabilities.

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