

RN4

TRAINING SYLLABUS and RECORD
of Practical Instruction and Experience
(PSYCHIATRIC) for admission to the

ROLL OF NURSES

1964

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THE GENERAL NURSING COUNCIL FOR ENGLAND AND WALES · 25 PORTLAND PLACE, LONDON, W.1, U.K.

The General Nursing Council for England and Wales

**Syllabus of Training (Psychiatric) for
Admission to the Roll of Nurses**

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Name of pupil nurse

Date of entry to training

Index number

PREFACE

Introduction

The syllabus of training and record of practical instruction provides information which will be needed by pupil nurses training for Enrolment with the General Nursing Council for England and Wales. It is intended that the training of pupil nurses should be planned to cover the full two-year period. The syllabus sets out the subjects which will be studied and the practical skills which must be learnt in order to practise the art of nursing.

Some of these subjects will be introduced in the classroom before they are practised by pupil nurses in the wards or departments under the supervision of Ward Sisters, Charge Nurses and other trained staff. Tutors will help the pupil nurse in the school and in wards to learn new skills.

Although the syllabus is divided into three sections it should be clearly understood that as the art of nursing involves the care of the whole patient, items from each section will be considered together.

Although nursing is learnt in the wards and departments, pupil nurses will have short regular periods of study in the classroom when they will receive teaching about their patients. Visits of interest will be arranged and the opportunity to read books and periodicals in the School library will be encouraged. All subjects will be taught in an essentially practical manner.

Examination by Assessment

The examination will take the form of a test of practical efficiency held in one of the hospitals in which the pupil received training.

The work of the pupil will be judged by Nurse Assessors. At the same time the record of the pupil's work and reports on progress throughout training will be available to the Assessors.

The test of practical efficiency will be carried out in wards and under conditions in which the candidate received part of his/her training, and will include any routine nursing procedure or treatment available in the ward which has been covered by the syllabus.

As part of the Assessment, candidates will be required to answer a short written paper.

Record of Practical Instruction

The syllabus should be used in conjunction with the record of practical instruction. Each pupil must be responsible for this record, which provides evidence of the practical nursing experience and the skills and treatments in which the pupil nurse has become proficient.

The record should be kept in good order since this will be taken by the pupil to the Assessment where it will be a helpful guide to the Assessors. It will provide a permanent and detailed record of the training of each pupil nurse.

Syllabus

SECTION 1

PSYCHIATRIC NURSING

Introduction to hospital and personnel—

- The functions of the hospital.
- Nursing and lay administrator's departments.
- Dispensary.
- Occupational departments.
- Treatment and out-patient departments.

Introduction to:—

- History and background of nursing
- special reference to psychiatric nursing.

Outline of Mental Health Service

- Hospital services and facilities.
- Local Authority and General Practitioner Services.
- Ethics:—including
 - Relationship between the nurse,
 - the patient, his relatives and other visitors.
 - Personal qualities required in psychiatric nursing.
 - The pupil nurse in the psychiatric team.

Introduction to Mental Health Act, 1959:—

- As applied to care in the hospitals and community care.

Legal and Administrative Aspects

- Procedure for admission and discharge of legal categories.
- Rules relating to patients entering hospital.
- Outline of provisions made for patient and his family:—
 - National Insurance.
 - Pensions.
 - Social Security.

General Outline of Mental Disorder

EITHER

Mental illness

Common features of mental illness and disordered behaviour.

OR

Mental subnormality

Common features of subnormality and severe subnormality.

Admission and discharge of patients—nurse's responsibility

- Reception on admission.
- Observing and recording patients' mental condition, e.g. attitude:—
 - hostile, friendly, withdrawn or overactive.
- Keeping nurses' notes.
- Giving reports on patients' condition.
- Discharge of patients.

Participation in patients' day

- Getting up; meal times; toilet; washing; bathing; getting to bed.
- Gaining insight into problems which affect patients, e.g. worry regarding family, help with letter writing, guidance as to conversation.
- Activities during day to include varied types of occupation and use of leisure.
- Accompanying patients outside hospital.

Nursing Care and Management of

EITHER

The mentally subnormal

OR

Patients with mental disorders

Short stay patients—occupational therapy, social therapy, periods of leave.

Long stay patients—occupation, parole, outings.

Psycho-geriatric patients.

Special forms of treatment. Introduction to individual and group therapy.

Pre-school children.

Children and adult patients—their education and training.

Physically handicapped patients

Care required for

- (a) individual patients
- (b) groups of patients.

Habit training and rehabilitation of long stay patients to include: personal hygiene, care of clothing, occupation, walks, outings and recreation.

Special forms of care required for (a) individual patients

(b) groups of patients.
General etiquette and good moral standards.

Occupational, recreational and social therapy

General principles of occupational therapy.

General principles of industrial therapy.
Recreational activities, indoor games
outdoor games.

Social—entertainments, drama, music appreciation.

After care

Problems facing the discharged patient in the community.

Roles of Psychiatric Social Workers and Public Health Officer.

First Aid

Aims of first aid treatment.

Rules for dealing with an emergency.

Need for accurate observation and reporting on an accident and the action taken.

Improvisation of equipment.

Use of triangular, and other bandages.

Methods of moving and carrying the injured.

Treatment in the following emergencies:

1. haemorrhage, external and internal;
2. shock;
3. asphyxia;
4. loss of consciousness;
5. fits and convulsions;
6. fractures, dislocations;
7. injuries to soft tissues, including burns and scalds;
8. poisoning;
9. foreign bodies.

SECTION 2

THE HUMAN INDIVIDUAL AND HIS ENVIRONMENT

(i) Personal Development of the Individual

The individual, his development and his relationship with the family and other people.

The patient as an individual. The effect of illness and separation from familiar background on the behaviour of children and adults.

The needs of the individual.

(ii) The Promotion of Individual and Communal Health

The promotion and maintenance of good health. The Importance of good personal habits.
Public Health Services including welfare and other social services.
The part played by the nurse in maintaining these services.

(iii) The Structure and Function of the Human Body including Nutrition

An elementary knowledge of the human body applied to the normal.
The purpose of food, types of food, the food factors necessary in a well balanced diet.
Food suitable for infants, children, adults and invalids of all ages.

SECTION 3

THE PRINCIPLES AND PRACTICE OF NURSING

(i) General care in the ward unit

General cleanliness of the ward, the ward annexes and ward kitchen.
Methods of ventilating, lighting and heating the ward and ward annexes.
Methods of cleansing, storing and sterilising various equipment used in the ward.
Economy in the use of hospital supplies and equipment.
The ward kitchen. Correct methods of storing and preparing food.
Cleaning and sterilising crockery and cutlery.
Storage of clean linen and disposal of soiled and infected linen.
Ward routine—day and night.
Fire precautions.

(ii) General care of the patient

- Care of the patient confined to bed.
- Washing and bathing a patient in bed.
- Care of hair, hands and feet.
- Care of mouth, eyes and ears.
- Helping patients using commode, sani-chairs and water closet.
- Giving and removing bedpans and urinals.
- Observation, disposal and disinfection of urine, faeces, vomit, sputum.
- Collection of specimens of urine, faeces, vomit, sputum.
- Taking and recording temperature, pulse and respiration.
- Treatment of minor ailments.
- Preparation for and serving meals.
- Feeding patients.
- Measuring and charting fluid intake and output.
- Care of unconscious patients.
- Treatment of verminous patients.
- Care of the dying.
- Last offices.

(iii) Medicines and poisons

- Weights and measures.
- Storage and safe custody of medicines and poisons.
- The Dangerous Drugs Act.
- Giving Injections:—Hypodermic
Intramuscular.
- Rules for giving medicines.
- Preparation and dilution of lotions in common use.

Sections 2 and 3

These sections consist of more advanced nursing procedures and experience gained in special types of wards. Completion of all these items is not compulsory but every pupil nurse must show evidence of satisfactory work in each ward to which he/she has been allocated for experience.

In general, the emphasis in the early months of training should be on learning and becoming proficient in the basic nursing principles, but appropriate items in sections 2 and 3 should be included when experience in special wards is gained during the first year of training. Items in which the pupil has been instructed only should be marked with a /, those which have been practised and in which he/she is considered proficient should be marked with an X. Both should be followed by the signature of the sister or charge nurse and the pupil nurse must also sign in the appropriate column. Only one signature of a sister or charge nurse is needed to indicate instruction or proficiency in each procedure.

Classroom instruction should be indicated in the appropriate column and signed only by the tutor responsible for the teaching.

Section 4

To be completed in respect of pupil nurses undertaking training in mental hospitals.
 Summary in weeks of the total clinical experience during the training period; holiday periods are not to be included.

Type of experience	From	To	Total in weeks
Newly admitted and short stay patients
Medium and long stay patients.....
Physically ill patients
Geriatric patients
Occupational and/or Industrial Units
Night duty (please specify)
Other experience (please specify)

Date.....

Signature.....

Authority for signing.....

Section 4

To be completed in respect of pupil nurses undertaking training in hospitals for the mentally subnormal.
 Summary in weeks of the total clinical experience during the training period; holiday periods are not to be included.

Type of experience	From	To	Total in weeks
Newly admitted patients
Subnormal and/or severely subnormal adults
.....
Subnormal and/or severely subnormal children
.....
Physically handicapped and/or physically ill patients
.....
School training methods
Social, occupational or industrial therapy
.....
Night duty (please specify)
.....
Other experience (please specify)
.....

Date.....

Signature.....

Authority for signing.....

(iv) Nursing Procedures

Preparation of equipment for, and care of patient during, examination of:—

- abdomen;
 - chest;
 - mouth and throat;
 - rectum;
 - neurological examination.
- Urine testing.
Insertion of suppositories.
Giving enemas.
Filling and use of hot water bottles.
Swabbing and bathing eyes.
Prevention of spread of infection.
Sterilisation of articles in common use.
Simple ward dressings.

GUIDE
to the Syllabus of Training (PSYCHIATRIC)
for admission to the

ROLL OF NURSES

1964

THE GENERAL NURSING COUNCIL, 6, BRIGLAND ROAD, WATERS, P.O. BOX NO. 888, 23, PORTLAND PLACE, LONDON, W.1.

Guide to the Syllabus of Training (Psychiatric) for Admission to the Roll of Nurses

INTRODUCTION

This guide has been prepared to assist those who are participating in the training of pupil nurses in psychiatric hospitals by expanding and explaining the items included in the syllabus of training.

In preparing the syllabus two facts were very carefully considered. One was that since 1955 the syllabus of training for nursing assistants prepared by the Ministry of Health had been successfully used in a number of psychiatric hospitals; the other was that as far as is practicable the training of pupil nurses in psychiatric hospitals should be in line with training based on general, geriatric or specialised acute hospitals.

It is hoped that this syllabus of training will provide a realistic approach to the care and needs of patients who are mentally subnormal or mentally ill and will provide well prepared Enrolled Nurses who will take their place in the nursing team.

It is envisaged that pupil nurses will gain experience and join in discussions in all types of wards and departments, and that student and pupil nurses will be trained in the same wards, provided there is adequate supervision and teaching by trained members of the nursing staff.

Although it will not be compulsory for all pupil nurses to be seconded for 'three months' experience in an acute general or children's hospital, every opportunity should be taken to provide this type of experience. It is hoped that some pupil nurses in training in general hospitals will gain experience in mental hospitals or hospitals for the mentally subnormal, provided the distance from the parent hospital is not too great.

In planning the training, the syllabus should be considered as a whole, and instruction should continue throughout the two-year period. The assessment can be taken in the last six months of training, by which time the pupils should have received instruction in all items in the syllabus appropriate to the type of hospital in which they are training.

In planning the training of the pupil nurse it is anticipated that as wide a variety of experience as possible will be included. All pupils undertaking training in mental hospitals should gain experience in an admission ward, with disturbed patients, with elderly and long-stay patients and in occupational therapy or industrial units.

Pupils in hospitals for the mentally subnormal should gain experience in the admission ward, with young, adolescent and adult patients, and with patients suffering from physical handicaps, including epilepsy. They should also have experience in the educational and training departments of the hospital.

It is hoped that all pupil nurses will gain a minimum of two months' experience in the infirmary wards where physical nursing care is required. Some training schools may wish to include work in the community.

A period of not less than one month and not more than three months should be spent on night duty during the two-years' training.

There will be opportunities for variation in the training, provided suitable schemes are submitted to the Council for consideration and approval.

Because of the variety of experience which may be included in the training of pupil nurses, and bearing in mind the need for a syllabus of training to continue in use for a reasonable period of time, the syllabus has been developed on broad lines with the minimum of detail. It is hoped that this will allow each training school freedom to develop the curriculum and plan the training in relation to the practical nursing experience available.

For convenience the syllabus has been planned in three main sections, but it is recommended that the content of these three sections be integrated throughout the two-year training period in such a way as to prepare the pupil nurse for the type of care he or she will be giving to patients at each stage in training.

The first section relating to mental nursing and nursing of the mentally subnormal includes an introduction to the Health Service, the simple routine of the patient's day, an understanding of the various types of behaviour disorder, an outline of the more common types of mental illness and mental subnormality and a study of the patient confined to bed. These subjects should be introduced at an appropriate stage in the training when they can be linked with the corresponding practical nursing experience.

The section relating to the human individual and his environment provides a simple approach to the normal body structure and function, together with the methods of maintaining health and preventing disease. These subjects should be introduced

by means of everyday examples such as the basis for the normal diet, the way in which digestion and absorption of food takes place and the need for special care in hospitals to maintain an uncontaminated milk supply.

The third section mainly relates to nursing procedures about which the pupil nurses will need instruction before they are allocated to infirmary and sick wards.

It is anticipated that in a number of training schools the existing tutorial staff will be responsible for the teaching of the pupils, depending on the number of student and pupil nurses in training. In other schools an experienced Ward Sister or Charge Nurse may be appointed but overall guidance should be given by the Principal Tutor.

In planning the curriculum it is essential that all pupil nurses attend an introductory course for a minimum of four weeks, which may be extended by one week if this is considered to be desirable. It is important to realise that this training is essentially of a practical nature and that the pupil nurse is usually anxious to be working in the wards with the patients. It is frequently stated that pupil nurses find it difficult to maintain interest and enthusiasm if the preliminary course is too theoretical. Subsequent teaching should be organised regularly each week whilst the pupil nurse is working on day duty, but should be omitted whilst the pupils are allocated for night duty. It is suggested that approximately three hours each week should be arranged as a half study day. Every opportunity should be taken for including teaching in the wards by the discussion method.

The assessment should be taken as late in the training period as possible, but as there are only two assessments each year pupil nurses may enter at any time after the completion of eighteen months' training. The assessment will cover the entire syllabus, and it is recommended that some instruction by members of the medical staff, which may take the form of informal clinical classes, should be included from the beginning of the second year of training.

It is not envisaged that there should be a course of lectures about any one aspect of the syllabus, but that doctors should be invited to talk about the treatment of specified patients or to give a broad outline of the general treatment of a condition. These lectures should be interspersed throughout the training as required.

Pupil nurses should be included in discussions and group work, when Ward Sisters and Charge Nurses can help to relate the instruction about particular conditions to the pupils' experience in caring for the actual patients.

The Education Committee of the Training School should approve the overall plan of training and should be kept informed of any changes which may be necessary both in practical nursing experience and in the teaching programme, so that they are in a position to give their approval and support.

THE INTRODUCTORY COURSE

The preliminary training period should be an introduction to the overall scheme of training and to prepare the pupil nurses for the work they will be undertaking in the wards. In order that the pupil nurses understand the reason for the routine for patients in the ward, the plan for the 24-hours' day and night span, and the nursing care of the patient, it is necessary to include relevant items from the section of the syllabus on Psychiatric Nursing and selected items from the section of the Human Individual and his Environment. The purpose of the preliminary training period is to give a simple preparation for the care of the patients, and the need for this course to be kept simple, interesting and closely associated with the care of patients in the ward cannot be over-emphasised. In planning the introductory period it may be convenient to base this on a five-day week, bearing in mind that the aim should be to meet the needs of the pupil nurses, and the hours of duty should be planned accordingly. It may mean that the hours of duty are less than 44 hours each week, and the length of the day may vary, depending on the practical experience in the wards or visits to departments. It is emphasised that pupil nurses should not report for duty until the tutorial staff are available to help and supervise the plan of instruction for the day.

Whenever possible, there should be a daily visit to the wards to enable pupil nurses to put into practice, under supervision, what they have been learning in the classroom.

If it is considered to be in the interest of the treatment of the patients that the pupil nurses should help the patients with certain domestic duties, it will be necessary for the pupils to learn how to give the required supervision. Now that many hospitals are using machines for cleaning it may be advisable to arrange for pupil nurses to observe cleaning in the wards or to have a talk from a Ward Sister, Charge Nurse or Domestic Supervisor about the methods employed.

It is important that suitable discussions about the care of patients are arranged regularly in the ward situation. The daily timetable should be as varied as possible, care being taken to arrange for subjects to be taught on different days and at different times.

Footnote. Information on the membership and function of the Education Committee may be obtained from the Council's Office, P.O. Box No. 803, 23, Portland Place, London, W.1.

Long concentrated sessions with pupil nurses sitting in the classroom should be avoided, and morning or afternoon sessions should be broken up by a visit to a ward or department. When visiting the wards, the pupils will meet others associated with the care of patients, but the Matron, Chief Male Nurse and Chaplain will wish to come to the classroom to talk with the pupils.

Pupils need time for study but it is important that this should be guided and used to some purpose.

Advice should be given to pupils on the selection of library books and nursing periodicals, since some of them find reading difficult.

Educational visits to hostels, industrial units, day hospitals and schools are beneficial if the pupil nurses know why the visit has been arranged and what to look for during the visit, and discuss what they have seen on return to the school.

It is advisable to give pupils some simple written tests from time to time, and a number of training schools find that an end-of-term test or assessment is helpful. This may incorporate written and practical sections, and is a valuable opportunity for Matron, Chief Male Nurse and their senior staff to see the work and progress of the pupils.

SECTION 1

PSYCHIATRIC NURSING

Introduction

This section comes first in the syllabus and will be taught early in the training period since it is a general introduction to nursing, the nursing profession, the facilities available to people in hospital and in the community and the nurse's relationship with those with whom she works.

Development of psychiatric nursing should include a brief introduction to the history of nursing as a whole, leading up to the present day National Health Service, together with an outline of the history of the mentally ill or subnormal, as the case may be, and of the pupil's own hospital.

The subject of the nurse's relationship to patients and relatives should be linked with that of ethical conduct.

At first this topic will be introduced in a simple way to help the pupil nurse to adjust to life and work in the hospital. Later it will be developed so that the pupil gets a better understanding of relationships with people and the importance of high standards of conduct.

The International Code of Nursing Ethics can form a helpful basis on which to develop teaching on this aspect of the syllabus. When introducing the pupil nurse to the hospital, classroom instruction should be kept to a minimum and visits should be arranged to wards and departments.

Legal and administrative aspects should be taught by a simple introduction to the appropriate legislation, the reasons why and procedures by which patients are admitted into psychiatric hospitals, and methods adopted for safety of patients in the pupils' care.

The pupils in mental hospitals will need to acquire a simple concept of mental illness, including symptoms and behaviour disorders, which will enable them to look after and help an individual patient or a group of patients with some knowledge of, for instance, why one patient is eager to talk and another is silent, and for them to be taught in relation to patients in the wards.

Pupils in hospitals for the mentally subnormal must learn to appreciate the degrees to which patients can be handicapped by low intelligence and often by physical disability, and the extent to which they will require assistance, guidance and training in order that they may lead happy and useful lives.

Technical terms should be introduced gradually as knowledge increases.

Pupils will need an explanation of the reasons for the daily routine of the ward to help them to take part in planning the patients' day, thus gaining an understanding of the therapeutic aims of occupation, recreation and social activities.

When explaining the procedure for the admission and discharge of patients the need for pupils to give patients a kindly welcome and to care for their possessions should be stressed.

Pupils should be taught to observe different groups of patients and should be encouraged to give their own descriptions, verbal and written, of what they see or hear when they are accompanying patients in the wards and departments. These observations should be followed up by informal discussions in the wards with Sisters, Charge Nurses and/or the Tutor.

First Aid

First aid is a subject about which all pupil nurses should have some knowledge and it is helpful in teaching this subject to use the pupils' previous experience, for example in the treatment for severe bleeding, burns, fits or removal of foreign bodies.

So that the introductory course is not overloaded with new material, and because it is primarily an introduction to the work the pupil will be carrying out in the ward, only the general aims and rules for dealing with an emergency should be included in the introductory course. Exceptions may be made in certain training schools where practical nursing experience may include the epileptic patient, when it will be necessary to instruct pupil nurses about the management of an epileptic fit. In teaching other aspects of first aid it will be helpful to relate these to simple applied anatomy and physiology and to the nursing care of certain physical conditions. For example, if when teaching the first aid treatment of fractures the anatomy is taught at this time, the pupils' interest in both subjects is stimulated.

The treatment of each emergency should be demonstrated and a first aid situation can be staged where an accident has occurred; there may be a patient and an onlooker, and the pupils can then use their initiative in dealing with the situation. Class activity helps pupils to learn and makes the teaching more interesting.

SECTION 2

THE HUMAN INDIVIDUAL AND HIS ENVIRONMENT

This section should provide pupils with simple, clear information about the basic structure and function of the organs of the body, the development of the individual from birth to old age, and the maintenance of health and prevention of disease.

Personal Development of the Individual

This section, dealing with the basic needs of people in each phase of their development and their relationships with other people is of great importance.

Pupil nurses should understand the relationships of patients with their families and other people, and have a simple understanding of their own relationships with those with whom they work.

The effect of illness on the patient and separation from familiar background should be discussed simply in the early weeks of training and referred to frequently throughout the training period. The pupil nurse should be encouraged to study the needs of patients, their likes, dislikes and interests, in order to assist in their comfort and well being

The Promotion of Individual and Communal Health

This section should be included throughout training. It is important that pupils should understand how good habits will help them to keep well and then relate this understanding to the promotion of health in the patients and their families. Many items can be introduced by reference to the pupil's own knowledge and related to everyday reports in newspapers or ward reports. School meals or outbreaks of infectious diseases can provide a point of discussion from which to develop the need for a well-balanced diet or immunisation. Visits in the community can be helpful, particularly if these relate to people. They might include the local authority's health department, schools or housing schemes, or a factory to learn about the health and safety precautions. For those undertaking training in a hospital for the mentally subnormal a visit to an infant welfare centre might also be arranged.

The Structure and Function of the Human Body

This subject should be taught simply and should be related to the practical nursing care of the patients and the normal functioning of the systems of the body in general. **No attempt should be made to complete the teaching of this subject in the Introductory Course and at no stage is detailed anatomy and physiology required.**

By using visual aids and relating structure and function of organs to health and the nursing of patients, the subject will be made interesting and helpful to the pupils. The following are broadly the subjects which should be covered:—The body as a whole and how it is made up. The general arrangement of the framework of the body, head, trunk and limbs. The cavities of the body with names and position of principal contents. How the body moves. Names of bones should only be taught in relation to nursing care, for example, in teaching about the treatment for a fractured femur, the bones of the leg can be named.

An outline of the systems of the body, relationship of structure to function

Circulation—How and why the blood circulates.

Respiration—How and why we breathe. Why oxygen is necessary.

Digestion and Nutrition—Why we need to eat and drink. How food is used in the body. A well balanced diet.

The importance of a safe and clean water and milk supply.

Food suitable for infants, children, adults and invalids of all ages. The preparation and serving of food.

Excretion—How the body gets rid of waste products and excess water. Why cleanliness of the skin is important.

How the activities of the body are controlled. How we see, hear, speak, taste and smell.

Names and functions of endocrine glands.

Why we need sleep, rest, recreation and exercise.

Body defences—an outline of the body's natural defences and how these may be raised by medical help. The part they play in maintaining the health of a community.

SECTION 3

PRINCIPLES AND PRACTICE OF NURSING

General Care of the Ward

An understanding of the reasons for a good standard of general household cleanliness is necessary. Application of the principles of hygiene to ward practice, methods of ventilating, lighting and heating wards and ways to eliminate noise should be discussed.

In teaching pupil nurses the care of linen, it is helpful to visit the ward annexe during bed-making to see how soiled and foul linen is dealt with, and also to visit the linen room to see the precautions taken to prevent loss and the method of issuing clean linen to the wards.

The routine of the ward will interest the pupil nurses, and reasons for the routine for the day should be explained. It is a recommendation of the Council that during the introductory period the pupil nurses gain experience at varying times during the day to become accustomed to the ward routine, when they should be under the supervision of the Ward Sister or Charge Nurse.

Fire precautions should be the responsibility of the local or hospital fire officer, who should be invited to talk to the nurses and demonstrate the use of fire fighting equipment and the rescue of patients from the wards.

General Care of the Patient

It is important for those planning the teaching programme to realise that these items are not meant to be taught in the order in which they appear in the syllabus, but should be included in such a way as to meet the needs of the pupil nurses in their work with different patients.

Where pupil nurses gain experience in more than one hospital, care should be taken to see that they are aware of any differences in nursing procedures.

Bed-making may be demonstrated in the classroom, but opportunities should be taken to practise in the wards.

When teaching the lifting and moving of patients, correct methods should be demonstrated and practised in the classroom, so that the pupils avoid injuring themselves or causing discomfort to patients. At this stage it is helpful to discuss posture in general and the structure of the vertebral column. A film strip or film on lifting the patient may help to impress upon the pupils the importance of this procedure to both patient and nurse.

Washing and bathing patients in bed should be demonstrated in the classroom and preferably practised and then supervised in the wards. This also applies to the routine treatment of pressure areas and care of the mouth.

The items dealing with the giving and removing of bedpans, the use of sani-chairs, observation of excreta and collection of specimens will be taught in principle in the classroom, but it must be the responsibility of the trained staff to see that pupil nurses are shown how to give patients bedpans and to assist patients in the use of sani-chairs and commodes.

Taking and recording temperature, pulse and respiration rates will be taught in relation to admitting patients at a time when the pupils need to use this technique.

Pupil nurses should have plenty of opportunity during the introductory course to assist with the preparation and serving of meals, and at a later stage can assist in feeding helpless patients.

Although pupil nurses may have little or no contact with venipunctured patients, it is important that they should know how to deal with the condition.

Observation of changes in the patient's condition is a subject which will be taught continuously throughout the training. The importance of reporting and recording observations should be discussed in the classroom before the pupils are instructed and supervised in the wards.

Care of the dying and the last offices should be discussed generally with the pupil nurses during the first year of training, and the equipment required for carrying out the last offices should be demonstrated. It is the responsibility of the Ward Sister or Charge Nurse to give further instruction while the pupil is assisting her or him in carrying out the last offices.

Medicines and Poisons

This section of the syllabus, comprising six items relating to storage and administration of drugs, is an important one and will be included in the teaching of pupil nurses at all stages of training. At first a simple introduction to the subject is required. Details should be omitted, so that the pupils have a clear general understanding of the rules pertaining to the storage and administration of medicines and poisons.

Nursing Procedures

The teaching of subjects included in this section of the syllabus will be planned as required throughout the training period, the most important consideration being the need to link as closely as possible the teaching in the classroom with the experience in the ward.