

RN5

**TRAINING SYLLABUS
REGISTER of NURSES
MENTAL Subnormality Nursing**

1982

The GENERAL NURSING COUNCIL for ENGLAND and WALES
23 PORTLAND PLACE LONDON W1A 1BA

RN5

The General Nursing Council for England and Wales

Training Syllabus for Admission to the Roll of Nurses Mental Subnormality Nursing

Further copies of this publication may be obtained from the offices of the Council. It may not be reprinted or reproduced either in whole or in part without the sanction of the Council.

Name of pupil nurse.....

Training school.....

Date of entry to training.....

Index number.....

PREFACE

TRAINING SYLLABUS FOR ADMISSION TO THE ROLL OF NURSES MENTAL SUBNORMALITY NURSING

I. STUDY OF MAN AND HIS ENVIRONMENT

The Syllabus sets out in broad terms the subjects to be studied during training in preparation for admission to the Roll of Nurses (Mental Sub-normality Nursing), maintained by the General Nursing Council for England and Wales.

The aim of the course is to develop competence in giving total patient care so that the enrolled nurse may take her place as a qualified member of the nursing service. The training does not, however, include preparation for undertaking the full responsibilities for assessment of patient need and the planning and evaluation of care for which a deeper level of study and practical training is required.

The Syllabus describes the subjects which will be studied and the practical skills which must be learned; although these are under three separate subject headings, they will be brought together in the study and in the practice of patient care. This learning will take place, for the most part, in the different areas of hospital care but the pupil nurse must also become aware of the importance of family and occupational background and be able to contribute to the patient's rehabilitation and maintenance of health.

Length of the Course

The period of training is normally 104 weeks, exclusive of sick leave and special leave.

The Curriculum

The curriculum will be designed to emphasise the importance of developing the attitudes to health care and nursing practice which are fundamental to a programme integrating the theoretical and practical aspects of nursing education and training. There should be an introductory course of 20 days (4 weeks) during which part of the time will be spent in the wards for supervised practice. Following this a programme of study days or half-days or single weeks of study linked with practical experiences should be arranged, making up a total of 30 days (6 weeks). Lectures from medical and other specialist staff are not compulsory; if any are arranged they should as far as possible take the form of clinical sessions in the ward.

The Examination

Pupil nurses will be made aware of their progress as the course progresses and will be required to pass practical tests and a written examination, in the form of a multiple choice objective test, prior to Enrolment.

The following headings set out in the broadest terms an approach to the study of man and his environment. It is not expected that these subjects will be taught in depth and they should be related wherever possible to the work of the mental subnormality nurse.

Social and psychological aspects

Human development and growth, to include family and community life. The needs of the individual and adjustment at various ages to different circumstances.

An outline of the social and cultural influences on development of the individual. Influences of group membership in social and institutional life. An elementary knowledge of individual differences, including personality and intelligence. Problems of assessing individuals. An outline of basic concepts of individual behaviour. Needs, drives, motivation and learning, emotion.

Human biology

An elementary knowledge of the human body, including nutrition, related wherever possible to first aid, nursing care and other subjects in the syllabus.

II. CONCEPTS OF MENTAL HANDICAP CARE, TEACHING (OR EDUCATION) AND TRAINING OF THE MENTALLY HANDICAPPED

Introduction

Introduction to the historical background in the care and training/treatment of the mentally handicapped. Services for the mentally handicapped.

Current trends and future developments.

Personal qualities and attitudes required of the nurse in the care of the mentally handicapped.

Code of professional practice.

Procedure for dealing with complaints.

Relationships between the nurse, the patient, and his relatives.

The care team.

The role of the nurse in the team; relationships with hospital and community workers.

The effect of admission into residential care on the mentally handicapped person and his family.

Family participation in care.

The importance of attitudes in the care, teaching and training process.

Concepts and nature of mental handicap

Wherever possible this section should be presented in the practical situation and related to the experience available and to the care programme. Factors causing mental handicap.
Features of the main clinical conditions.

Nursing care of the mentally handicapped Education and training and the role of the nurse

Education and training based on the following processes :—
Observation of the patient and his total environment.
Assessment related to education and training.
Giving care.

Evaluation of care.

Creation of a family atmosphere.

The nurse's role in developing self-help skills.

Methods of communicating with the mentally handicapped—verbal and non-verbal.

General principles of learning and teaching of the mentally handicapped.

Role of the nurse in the development of motor skills.

The nurse's role in occupational and industrial training.

Management of behaviour problems and procedures for weakening disruptive behaviour.

Preparation of the mentally handicapped for transfer from one residential setting to another (e.g. from home to group environment, group environment to group environment, group environment to home).

The role of the nurse in the supervision, participation with and encouragement of social skills and recreational activities.

Community nursing care

Problems facing the mentally handicapped in the community.

Support for the mentally handicapped in the community.

III. ENVIRONMENT MANAGEMENT, PHYSICAL DISORDERS, PERSONAL CARE AND FIRST AID

Environmental management

Providing a safe, healthy and comfortable environment.

Fire precautions by day and night.

Care, storage and use of materials and equipment.

Care, storage and handling of food.

Weekly and daily routines.

Physical disorders

Recognition of signs and symptoms of physical disorders as they occur in the mentally handicapped.

The effects of physical illness upon behaviour.

Personal care

Reception, assessment and admission procedures.

Care of clothing and property.

Observation and recording of general condition and behaviour.

Personal cleanliness and hygiene; bathing techniques.

Prevention and treatment of infestation.

Bedmaking; care of patients confined to bed.

Moving and lifting patients, positions used in nursing care.

Care of the incontinent patient.

Serving meals and feeding patients.

Care of the terminally ill, unconscious and dying patients.

Nursing procedures

Administration of drugs; observing and reporting their effects.

Legal and administrative aspects relating to the prescribing, storage and administration of drugs.

Subcutaneous and intra-muscular injections.

Principles of asepsis; sterile procedures; control of cross-infection.

Preparation for physical examination and diagnostic tests; observing and collecting of specimens; urine testing.

Measuring and charting of temperature, pulse, respiration and blood pressure.

Insertion of suppositories and giving of enemas.

Artificial feeding.

First aid and treatment in emergencies

Prevention of accidents.

Aims and principles of first aid treatment.

Action at an emergency, e.g. fire and accident on the wards; electrocution.

Handling and transport of the injured person.

Resuscitation.

Wounds and haemorrhage.

Shock.

Asphyxia.

Fits and convulsions.

Fractures, dislocations and sprains.

Loss of consciousness.

Burns and scalds.

Poisoning.

Miscellaneous conditions, including minor ailments.

IV. LEGAL AND ADMINISTRATIVE ASPECTS

Outline of the National Health Service, Mental Health Services, hospital and domiciliary; relationship with social services; general practitioners and other community based organisations.

Social security benefits.

Employment, training and rehabilitation.

The role of voluntary organisations.

Outline of mental health legislation.

Provisions relating to admission, detention and discharge.

Special hospitals and security units.

Protection of and civil rights of the mentally handicapped.

PRACTICAL EXPERIENCES REQUIRED FOR THE TRAINING OF NURSES FOR ADMISSION TO THE ROLL OF NURSES MENTAL SUBNORMALITY NURSING

Definition of the overall aims and the learning objectives for each part of the course

There is need to define the expected outcomes of the course together with learning objectives for each experience. Whilst the intention should be to develop in the pupil nurse a high quality of competence in giving care, the training does not prepare the enrolled nurse for the full responsibilities for planning and evaluating care which usually depend upon a deeper knowledge than is offered in this course.

Practical experiences

In selecting the areas for inclusion and building these up into a curriculum it should be possible to ensure that pupil nurses have the opportunity to learn the following aspects:

Initial care on admission.

Care of subnormal and severely subnormal adults.

Care of subnormal and severely subnormal children.

Care of physically handicapped patients.

Care of physically ill patients.

School training methods.

Social, occupational and industrial training.

Night duty.

Practical experience periods may need to vary but the usual length should be from 8 to 12 weeks' duration.