GUIDE
TO THE
SYLLABUS OF SUBJECTS FOR
EXAMINATION
FOR THE CERTIFICATE OF GENERAL NURSING

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The purpose of the Guide is to provide those concerned with
the training of student nurses with an indication of the ways in which
the syllabus can be built into a curriculum and to indicate the depth
and detail of teaching which is desirable for different subjects. The
Council hopes that the Guide may be useful to members of education
committees in planning the over-all policy for nurse education and
for nurse tutors and lecturers, particularly those undertaking the
teaching of nurses for the first time. Ward sisters, charge nurses
and clinical instructors may find it helpful in integrating the new
syllabus.

The syllabus of subjects for examination is of necessity based
on broad outlines with the exclusion of excessive detail since a
syllabus must be retained in use for a reasonable number of years
in order to ensure the development of schemes of training on a
sound basis without disruption until their value has been proved.
From previous experience it has been shown that a syllabus which
is too detailed has the effect of narrowing the training and places
limitations on the individual training school which is trying to plan
the training of nurses in a realistic way to meet the needs of the
patient and changes in medical practice.

It is emphasised that this syllabus is not simply a revision of
the 1952 syllabus to bring it into line with current treatment and
nursing care but is a syllabus in which it is envisaged that subjects
shall be more closely integrated throughout the training period. It
may be helpful for those responsible for planning the curriculum or
giving formal and informal instruction to student nurses to look
back on the phases through which nurse training has passed.

History

When nursing was being organised into a recognised pattern of
training the student nurse needed to be given an adequate prepara-
tion for the work she was to undertake for the patients. This
preparation given in the Preliminary Training School was to consist
mainly of the practical skills required by the nurse, together with a
simple understanding of anatomy and physiology in order to
appreciate the reasons for carrying out such simple nursing tech-
niques as bedmaking and care of the pressure areas. As the years
went by this pattern of preparation in the classroom has changed with a higher proportion of time being allocated for the teaching of scientific subjects and a tendency to reduce the practical experience in the wards.

This increased emphasis on anatomy and physiology with limited visits of observation to the wards has resulted for two main reasons. Firstly, there are some instances where the Preliminary Training School period has been regarded as a convenient time in which to complete the syllabus for the Preliminary State Examination. Unfortunately this emphasis on basic sciences in the first twelve weeks of the 3-year period of training has led to a great deal of detail being learned by student nurses; as much of this is unrelated to the practical nursing care of the patient it is quickly forgotten and the position is further aggravated by the present form of the Preliminary Examination. Secondly, the siting of Preliminary Training Schools some distance from the wards of the hospitals has created travelling problems with a consequential waste of teaching time. It has also resulted in a splitting off of the introductory course from the over-all teaching programme and the wards.

Subsequent teaching was planned in courses of lectures by members of the medical staff, for which student nurses were withdrawn from the wards for an hour 2 or 3 times each week in the early morning or evening in order to fit in with the night nurses. Later the study day and study block systems came into being which allowed the student nurse to be freed from the responsibility for the nursing care of the patient whilst undertaking courses of study and avoided the attendance of night nurses at classes either before or after a span of duty.

The 1962 Syllabus

The most striking changes in this syllabus are the absence of the two separate sections for the Preliminary and Final Examinations and the alterations in the section relating to anatomy and physiology and personal and communal health.

It will be noticed that the syllabus is divided into three main sections which should be built into the curriculum as three main streams of learning and whenever practicable they will be taught side by side. The sections relate principles and practice of nursing including first aid, the study of the human individual and concepts of the nature and causes of disease.

In the introductory period of training of 8 weeks a broad outline should be given of the normal structure and function of the body and the mind and how health is maintained. This will lead on to the geography and conditions in a hospital ward and the adaptations which must be made to these by patients admitted and how their needs may be met when health breaks down.

To meet these needs the students will be taught the principles and practice of nursing and will pay visits to the wards at different times of the day to observe and assist in nursing under supervision in the wards in which they will be working subsequently.

After the introductory course 14 to 16 weeks should be allocated for study days or study blocks. During the first year the nature and causes of disease will be introduced with further consideration of the relevant anatomy and physiology and the principles of medical and surgical treatment. It is suggested that the heaviest part of the theoretical programme will come into the second year of training.

In planning the instruction which must be given to student nurses for them to understand and learn the art of nursing, the Council hopes that every endeavour will be made to increase the time spent in clinical teaching, group discussion, seminars and any method of teaching or use of visual aids which ensures and encourages the active participation of student nurses in their educational programme.

It is expected that formal lectures will be retained mainly for the introduction of new material by members of the medical and specialist staff and that the danger of the tutorial staff increasing formal lectures to "cover the syllabus" will be resisted.

All new work should have been introduced by the fourth month of the third year and the order in which the teaching is given will depend to some extent on the experience available but the plan should ensure that as the student's responsibilities increase and greater demands are made on her for skilled nursing she is given the necessary background knowledge. The student should know the over-all plan of training for the three years.
Section I. Principles and Practice of Nursing
Including First Aid

Principles and Practice of Nursing

In this section of the syllabus the whole of nursing is considered and includes the broad principles underlying organization of the environment in which patients are nursed, the principles of ward administration, together with the basic needs of patients on admission and during their stay in hospital and the preparation they require for their return to the community. This section includes the nursing care required to maintain the general comfort and health of the patient and the skills which the nurse must learn and in which she must become proficient so that she can carry out the special nursing care in relation to the treatment of the condition from which the patient is suffering.

For convenience and easy reference this part of the syllabus has been divided into sections, but it is emphasized that these sections are not arranged in any order of progression in relation to the teaching of the subject. It is important that the items mentioned in each section should be included in the teaching programme at the appropriate time within the training period. Most of Section II and much of Sections III and IV will come in the introductory course, with a little from Section I. It is envisaged that subjects introduced in the early months of the training will be considered in greater detail or with emphasis on some particular aspects at a later stage, after the student nurse has had experience with patients in wards and departments. Good inter-personal relationships should be discussed at a very early stage in training and should be reconsidered later when the student nurse has had the opportunity of seeing the effects of good inter-personal relationship on all people she meets in hospital. The curriculum should be planned in such a way as to enable the student nurses to give the appropriate nursing care required by the patients and to assist in carrying out the routine duties in the wards. Suitable preparation in basic nursing procedures should be given in the teaching department and practised under the supervision and guidance of the tutorial staff in order to give the student nurses confidence. This section of the syllabus should be closely related to the planned practical nursing experience of the student nurses.

(i) Introduction

Once the student nurses have settled down and seen the work of the hospital, an outline of the history of nursing with an emphasis on the development of the Health Service since 1948 will lead to an appreciation by student nurses of the responsibilities and opportunities which are inherent in nursing. In assisting the student nurse to understand the function of the hospital within the Health Service, consideration of the hospital on which the training school is based provides not only an introduction to their new environment but it can be used to explain the link with the Health Service as a whole. The interest of student nurses in the social aspects of nursing will depend largely on the skill with which the teachers integrate the preventive and curative aspects of nursing in all their teaching.

Since it is anticipated that the nursing team of the future will frequently include Registered and Enrolled nurses, student and pupil nurses and auxiliary personnel, it is important that the student nurse should understand her own function and the place of the other members of the team before she becomes a part of the team. At a later stage in the training period she will need to discuss the effect of the composition of the team on the administration of the ward and the nursing care and treatment of the patients.

The Ethics of Nursing will of necessity be introduced from the earliest stage in training and because of the nature of the subject some aspects of nursing ethics will be included almost daily in formal lectures or in general discussion.

In the hospital, the ward sisters and staff nurses will teach by example almost continuously and less frequently by direct reference to the reason for a certain action, the way in which a situation is handled or an explanation which may be given to a patient or member of the hospital staff.

It is important from time to time during the training period to assess and re-consider the whole subject in order to ensure that the student nurses understand reasons underlying ethical conduct and behaviour.
Each student nurse should be familiar with the International Code of Nursing Ethics and should have her attention specifically drawn to responsibilities relating to important aspects such as responsibilities in regard to the administration of drugs, certain medical and nursing procedures.

(ii) General care of the patient

It is important for time to be allowed for discussion in the classroom following visits to the wards in order to answer questions and explain reasons for certain routine or procedures which student nurses are considering for the first time and in which they are intensely interested and about which they are sometimes anxious.

These visits to the wards on some occasions may be mainly for the ward sister to explain ward routine and nursing care and on others it may be that the sister tutor or clinical instructor will work with a group of student nurses who are gaining experience in feeding helpless patients, helping patients to get up or undertaking simple routine nursing care of patients confined to bed. This section of the syllabus is of vital importance in giving the student nurse the best possible introduction to the work she will later be undertaking in the wards. There are many ways of implementing and teaching this section of the syllabus but the most important consideration when planning the curriculum is the relationship between the initial presentation of new material in the demonstration room and opportunities available for the student nurse to observe and participate in the practice of what she has seen in the wards.

(iii) Human behaviour in relation to illness

In this section of the syllabus the student nurse is introduced to the effect of illness, both physical and mental, on the behaviour of the patients she is caring for in the wards and departments of the hospital.

In Section II of the syllabus the student nurse has considered the development of the individual from infancy to old age and the relationship of the individual with those with whom she has to live and work. In this section of the syllabus the student nurse studies the effect of illness on the individual and learns to recognise certain behaviour associated with illness, admission to hospital and the anxiety associated with this.

It is anticipated that this subject will be introduced in a simple practical manner using examples of behaviour which student nurses have observed, to illustrate the subject in a realistic way. During the first year of training student nurses frequently ask for advice and want to know the reason for certain behaviour in patients and how best they can help them. It may be wise to conduct these classes in the form of group discussions thus giving the student nurses opportunity to raise questions about individual patients, and avoiding the necessity at this stage for formal classes.

During the second and third year of training more information relating to the psychological and physiological processes underlying anxiety, and the reasons for certain behaviour can be discussed, again using the student nurses' own experience with patients as far as is practicable.

(iv) Nursing Procedures

The major portion of this part of the syllabus relates to the practical nursing skills in which student nurses should become proficient during their training. Those responsible for planning the curriculum are urged to approach this section realistically adding skills and procedures which are needed to meet change in medical and nursing practice and omitting or restricting to a brief outline, procedures which are in less frequent use. It may be that one procedure included in this syllabus is replaced by a more modern one and it will be necessary to refer briefly to the older method and reason for the change in procedure before or during consideration of the newer method.

Certain of the more specialised procedures may be taught by the ward sister or charge nurse in the ward or department or in the teaching department, or these may be the responsibility of the tutorial staff. Whichever method is adopted there should be the closest co-operation between ward and classroom as to the method which should be used. Nursing procedure meetings held regularly
between members of the tutorial and ward staff are essential in ensuring that the teaching given in the classroom is put into practice in the wards.

(v) First Aid Treatment in Emergencies

The need for a satisfactory knowledge of first aid and the treatment of emergency conditions becomes daily more important with the increasing hazards from accidents in the home and the rising figures for road traffic accidents. In addition emergencies may arise in the ward.

With the inclusion of anatomy and physiology and first aid in the Final Examination the need for teaching first aid throughout the training period is stressed.

The principles of first aid should be given in the introductory period, stressing the importance of life saving measures such as the maintenance of an airway and the control of haemorrhage.

One of the most important life saving measures is the care of the unconscious patient which may include maintenance of a clear airway, artificial respiration, and a satisfactory position for patients during transport. Opportunity should be given to student nurses to practise methods of artificial respiration in the classroom and the use of films can be most helpful. Fire precautions and the method to be adopted in the individual hospital in the rescue of patients in case of fire should be included.

Towards the end of the training period when the syllabus has been completed one or two talks on first aid in disasters which involve radiation hazards and the general precautions required for the protection from atomic radiation should be given. These must be general in outline but should ensure that the nurse understands the main precautions which can be taken to minimise exposure to ionizing radiation and the emergency treatment of patients exposed to radiation.

Section II. Study of the Human Individual

In planning this section of the syllabus much careful thought and consideration have been given to the need for information, essential to the understanding of the care and treatment of patients, to be presented to student nurses as a whole rather than as separate clearly defined subjects which tend to become too theoretical and unrelated to nursing. The value of a knowledge of anatomy and physiology and personal and communal health is to provide the student nurse with an understanding of the reasons underlying the nursing care and treatment of her patients, to provide an understanding of the factors necessary for the maintenance of health and prevention of disease and to ensure that the student nurse understands the normal functioning of the body. Detailed items have been omitted intentionally in order to allow those responsible for planning the curriculum freedom to develop a straightforward approach to these subjects which student nurses tend to find difficult.

In order to interest student nurses in the study of personal and communal health and anatomy and physiology, the introduction should be planned in such a way as to make use of the student nurse's previous knowledge and to relate new material as closely as possible to the care of the patient in the hospital and the needs of the community in general. This approach should create interest in these subjects in the early stages of training and provide a sound basis on which to build the necessary additional knowledge which will be applied to the nursing care and treatments and health teaching of patients at all stages of training.

In planning the teaching of this section of the syllabus, emphasis should be placed on the integration of the subjects as a whole and on the need to include in the introductory course a simple introduction of the whole subject matter and not to omit any one system, such as the nervous system, which, although difficult for student nurses to understand in the early months of training, can be elaborated on at a later stage.

In presenting this section of the syllabus a variety of teaching methods will be needed. In addition to formal lectures, the use
of seminars and group discussions will be included to give student nurses an opportunity to say what they have gained from visits to departments of the hospital, to the health field, to schools and exhibitions, or from other sources. The use of films with adequate preparation and guidance followed by discussion may replace some of the time consuming visits, such as those to sewage disposal or water works, so releasing time for other visits such as to a large store or factory where the student nurse can note, for example, precautions taken to prevent accidents to workers, to protect food from contamination, and to ensure that the product manufactured is of a satisfactory standard for sale to the public.

It is not considered desirable to include lectures by specialist members of the medical staff in the introductory period since emphasis at this stage should be on the introduction to the work the student nurse will be undertaking in the wards. It is hoped, however, that opportunities will be made for a few talks to be given by specialists and members of the medical staff to help the student nurse to appreciate the many people working for the most satisfactory care and treatment of patients. A talk by a doctor, matron, the almoner, health visitor, a general practitioner, a psychologist or psychiatrist, a chaplain and others can be helpful, although the main teaching in this introductory course will be the responsibility of the tutorial staff. Subsequent teaching of anatomy and physiology should be linked as closely as possible with the study of treatments of certain conditions: for example, the anatomy and physiology of the stomach should be considered in relation to lectures by a surgeon and physician on this subject and followed by teaching by the pharmacist and dietician. It is appreciated that teaching on these lines may be difficult to arrange and it may not be possible to have the teaching on applied anatomy and physiology given immediately prior to a discussion of a specific condition, or even on the same day, but these subjects should be given within the same course of instruction.

How mind and personality develop

Study of this subject can be most helpful to student nurses in the initial period of adaptation to hospital life and nurse training, and can help the student nurses understand her own needs in relation to study, learning, memory and other aspects of training as a nurse.

This subject is perhaps one of the most difficult to approach, partly due to the scope of the subject and partly to the different stages of development of the members of the group. Probably the most successful way of introducing the subject is to integrate it with certain aspects of the nursing syllabus and nursing ethics. In most training schools the introductory classes are given by members of the tutorial staff, unless there is a psychologist or psychiatrist who is particularly interested in the simple practical approach to the subject.

The student nurse should understand mental health, and the development of the individual from infancy to old age and that behaviour may be modified by health and environment factors including the family, the community and by education.
Section III. Concepts of the Nature and Cause of Disease and Principles of Prevention and Treatment

In this, the largest section of the syllabus, the plan has been to present in a concise yet comprehensive way the conditions for which the nurses should know the nursing care and treatment. Under the heading “Nature and cause of disease” there is scope for including adequate consideration of the main underlying causes of disease and opportunity to bring in not only items under the appropriate headings but also the relevant sections of bacteriology, anatomy and physiology and preventive medicine.

The tutorial staff carry the responsibility for the integration of all aspects of the nursing care and treatment of patients in such a way as to keep before the student the patient as a whole and his treatment in its entirety. In presenting this over-all picture the student nurses themselves have much to offer by drawing on their previous practical nursing experience. In all learning situations active class participation is essential. It may well be that presentation to the class of the total care of the patient by small groups of two, three or four student nurses can be most helpful. These small groups can discuss or demonstrate for seven to ten minutes particular aspects of the nursing care so that it may be possible to present a complete picture to the whole class within the normal period of 50 to 60 minutes. The tutor will have the important role of guiding the discussion, supplementing the information and clarifying points and the student nurses will retain knowledge gained by this method.

It will often be helpful to seek the aid of the ward sister who may be willing to explain or demonstrate a special nursing procedure. The ward sister may come to the classroom or she may find it more helpful to have groups of student nurses in the ward.

It has already been stated that it is advisable to divide the total number of lectures in medicine and surgery into two groups, one relating to the more common conditions given early in the training and a second on the more special conditions at a later stage in training. The same principle may be helpful in arranging the teaching of subjects such as pharmacology and dietetics.

A great deal of planning will be required as to the most satisfactory way of applying anatomy and physiology throughout the training and it may be that the surgeon and physician or specialised lecturer will wish to include this in the introduction to the subject under discussion or this may well be done by the tutor. It would appear that there is great scope for experimentation as to the most satisfactory way of presenting applied anatomy and physiology.

Maintenance of health and prevention of disease

This aspect of the care of the patient has been stressed throughout the syllabus and should be taught as part of the general care of the patient rather than as a separate subject. It is envisaged, however, that all training schools will continue to invite appropriate members of the local health authority, medical and nursing staff to participate in some of the formal teaching. All student nurses should be given the opportunity of undertaking home visits of observation with the district nurse and health visitor, and also visits to clinics such as those for ante-natal care, infant welfare, and to schools for the deaf, blind or spastic children, and homes and day hospitals for the aged. It is not possible to lay down a minimum period of time to be allocated for such visits which may well be included at different stages in the training. One of the most important aspects of such experience is that the student nurse should be given suitable preparation for each visit. All visits should be followed by a report and general discussion. This discussion not only gives an opportunity to clarify points by the experts who will have been invited to be present but allows the student nurses who may have undertaken different visits to share the experience with their colleagues.

Under the heading “Principles of general medicine and surgery” the sections are divided for convenience into disorders of the main systems which should include the nursing care and treatment of all general and specialised conditions. This general outline with little detail again follows the general pattern which leaves the training schools free to plan the curriculum in a realistic manner to include the study of conditions for which patients are most frequently admitted to hospital, and omitting from the curriculum those conditions which with advances in medical science tend to occur less frequently and may be so well controlled that they only require treatment in the out-patient department.
It will be noted that no special age groups have been mentioned in the syllabus. This plan has been followed in order to simplify the syllabus, bearing in mind that it is a requirement of the Council that all student nurses gain experience in the nursing of children and have lectures by a paediatrician in addition to nursing adults. Geriatric nursing has been recommended as an optional experience and although it is appreciated that not all student nurses will gain experience in this type of nursing it is usual for a number of elderly patients to be admitted to general wards and it is reasonable to expect that all student nurses will gain some experience with this age group.

Secondment of student nurses will vary and may include psychiatric experience which is valuable in helping student nurses to understand their patients or experience in the nursing of infectious diseases gives an overall picture relating to the control of infection and allows the student nurse to put into practice isolation techniques.

Attention is drawn to the fact that when student nurses are seconded to another hospital for special experience it is necessary for arrangements to be made for additional instruction to be given during the period of secondment and additional information about this is available in the pamphlet relating to secondment for special experience.