GUIDE

to the Syllabus of Training

(GENERAL)

for Admission to the

ROLL OF NURSES

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The 4 GENERAL NURSING COUNCIL for ENGLAND and WALES
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INTRODUCTION

Many changes have taken place in the training of pupil nurses since the first syllabus was published in 1949, when nursing experience was often restricted to nursing of elderly and long-stay patients. These changes have been introduced in order to prepare the pupil nurse to meet the needs of the patients she may now be called upon to nurse.

This Guide has, by expanding and explaining the items included in the syllabus of training, been prepared to assist those who are participating in the training of pupil nurses. It should be used with the syllabus of training which gives the necessary detailed items.

The Council considers that the training of pupil nurses should no longer be divided into one year of training, followed by a year of nursing experience, and with the new syllabus the full two years should be used. Pupils will enter for the assessment during the second half of the second year.

There will be opportunities for variation in the training provided suitable schemes are submitted to the Council for consideration and approval. It is envisaged that some schemes will be based on children's or chest hospitals while others may include secondment to a psychiatric hospital, or for experience of nursing in the home.
Because of the wide variety of experience which may be included in the training of pupil nurses, the syllabus has been developed on broad lines with the minimum of detail. It is hoped that this will allow training schools freedom to develop their own curricula and plans of training.

The syllabus covers all the experience which every pupil nurse should have. Nursing techniques other than those stated may, of course, be taught and included in the experience chart, but it was felt unwise to include anything which could become exclusively classroom teaching and not be put into practice.

The syllabus has been planned in three main sections. These three sections should be integrated throughout the two-year training period in such a way as to prepare the pupil nurse for the type of nursing care she will be giving to patients at each stage of the training. The training of pupil nurses should be based on a sound programme of instruction in the principles and practice of the basic nursing skills needed in the care of the sick, with such understanding of the related subjects of hygiene, anatomy and physiology as is necessary for the intelligent performance of those nursing duties.

In planning the instruction for pupil nurses there must be an introductory course at the beginning of training and before the pupils are allocated for full time nursing experience in the wards. This course must be of four weeks' duration and may be extended to cover five weeks if desired. During this introductory period the pupil nurses should spend part of the time in the wards and part in the teaching department so that on completion of the course they are prepared for their work in the wards.

Subsequent classroom teaching should be organised each week throughout training but excluding the period spent on night duty. Pupil nurses may spend up to three months on night duty in each year of training, therefore it is considered that about three hours each week is required for classroom instruction. This may be arranged in three separate hours of teaching or it may be found more convenient if the three hours are used as a study day. The study day may save travelling time and it can be more convenient for the Ward Sister or Charge Nurse if the pupil nurse is away from the ward once in each week for a longer period, rather than for a shorter period on three separate occasions. In some training schools it may be easier to arrange for instruction to be given on study days. Teaching should continue throughout the two years of training.

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 18 months' training.

Each pupil will be assessed not only on compulsory experience, but on any optional experience for which she has been signed up in her record of practical instruction and experience.

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 in both practical nursing experience and in the teaching programme, so that they are in a position to give their approval and support.

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.I.
THE INTRODUCTORY COURSE

This should be used to give a simple introduction to the overall scheme of training and to prepare the pupil nurses for their work in the wards. Because the pupil nurses need to understand about 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 not only to include relevant items from the section of the syllabus relating to Principles and Practice of Nursing, but also selected items from the section on the Human Individual and His Environment.

The plan for each day should, whenever practicable, include a period in the ward to enable pupil nurses to put into practice, under supervision, the nursing procedures which have been demonstrated in the classroom. Except on days when pupils are in the ward at 7.30 a.m. to see the early morning treatment, the school day should begin at 9.00 a.m. and usually end at 4 p.m. Classes should not normally exceed 45 minutes.

Suggestions regarding the way in which the introductory course may be arranged can be obtained from the Council’s Offices.

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 the ward, practical work in the classroom, watching a demonstration or practising a procedure. When visiting the wards, the pupils will meet others associated with the care of patients but the Matron 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.

SUBSEQUENT TEACHING

During the first year of training the teaching should be undertaken mainly by the tutor, and should include a continuation of the practical nursing begun in the Introductory Course: the associated anatomy, physiology and health and certain items from Section 3 of the syllabus should be arranged to fit in with the practical experience of the pupil nurses.

In the second year of training items from all three sections of the syllabus should be studied and members of the medical staff should be invited to give lectures as required. Doctors should give lectures on some aspect of the treatment of selected patients, or on the broad outlines of the treatment in relation to the specific conditions. These lectures will usually be interspersed throughout the second year of training; one being included every two to three weeks so that the pupils gain the maximum benefit from the small number of specialist lectures included in this essentially practical training.

It is advisable for simple written tests to be given from time to time at the end of the Introductory Course, on completion of nine-months training and before the assessment.

SUGGESTIONS RELATING TO EACH SECTION OF THE SYLLABUS

SECTION 1
PRINCIPLES AND PRACTICE OF 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.

The development of nursing should include a brief introduction to the history of nursing, leading up to the present day National Health Service and the pupil’s own hospital. The subject of the nurse’s relationship to patients, relatives and other staff 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.
General Care of the Ward

It is necessary to instruct the pupil nurses in the majority of items included in this section of the syllabus in the Introductory Course.

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 about the care of linen, it is helpful to visit the ward annexe during bedmaking to see how soiled and foul linen is dealt with, 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 course the pupil nurses gain experience in the wards at varying times during the day to get familiar with the ward routine. During this time 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.

Routine Nursing 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 patients.

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

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.

Bedmaking 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 and practised in the classroom early in the introductory period, 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, observations of excreta and collection of specimens, will be taught in principle in the classroom, but it must be the responsibility of the trained nursing 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 early in relation to admitting patients, but taking blood pressure should be taught when the pupils need to use this technique.

Pupil nurses should have plenty of opportunity during the introductory course to help with the preparation and serving of meals, and after instruction can assist in feeding helpless patients. From an early stage in training the importance of accurate measurement and recording fluid intake and output should be emphasised.

Although pupil nurses may have little or no contact with verminous 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 seven 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.

Other Nursing Procedures
The teaching of subjects included in this section of the syllabus will be planned as required throughout the training period. Some training schools may need to teach some of the items early in the first year of training, whilst others with different practical experience will instruct pupil nurses about the procedures in a different order. The most important consideration is the need to link as closely as possible the teaching in the classroom with the experience in the ward.

First Aid
It is important to teach this subject in as practical a way as possible.
In order that the introductory course shall not be overloaded with new material, it will only be possible to include in the course the principles of first aid treatment.
Pupils should have practice in carrying out accepted methods of artificial respiration, in the application of digital pressure to the main superficial arterial pressure points, in the application of slings and bandages and in moving injured persons.

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 patients 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 wellbeing.

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 to 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, outbreaks of infectious diseases, or housing schemes for a city can provide a point of discussion from which to develop need for a well balanced diet, immunisation, etc. Visits in the community can be helpful, particularly if these relate to people. They might include an infant welfare centre and immunisation clinic, a school, or a factory to see the health and safety precautions taken for employees, or a visit with the District Nurse.

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 fractured femur.
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 babies, 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**

This section of the syllabus should not be dealt with in great detail but should provide the pupil nurses with sufficient knowledge of the cause, course and treatment of disease to give them an intelligent understanding of the reasons for the general and special nursing care given to the patients.

Lectures by members of the medical staff should be arranged as required when teaching this section of the syllabus, and the help of the medical staff should be sought in arranging clinical classes and including pupil nurses in the ward rounds.

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**General Medical and Surgical Conditions**

The predisposing causes of ill health, the social aspects of disease and the prevention of illness should be considered on general lines.

The common causes of disease and the methods used to prevent spread of infection can be discussed in relation to the care of patients pupil nurses are helping to look after.

The importance of observation of early signs of disease and the common investigations carried out to confirm diagnosis should be discussed generally.

An outline of the treatment of patients with medical and surgical conditions commonly nursed in general wards of the hospital should be included with emphasis on the nursing care the pupil nurse may be required to give.

**Nursing of Babies and Children**

All pupil nurses will gain practical nursing experience in the care of children, but it may be arranged at varying times during the training. Some general introduction to the care of children should be given before allocation to the children’s ward, and pupils should understand the general principles of feeding, routine care, play and visiting by the parents (see Section 1).

Further instruction relating to common ailments in children and the nursing care and treatment required will be included in the teaching during the second half of the training period, and it may be helpful for the Paediatrician to give one or two lectures.

The Sister in the Children’s Ward will also be giving practical instruction which the tutor may wish to augment in the classroom or when teaching the pupils in the ward.

If the Training School is based on a Children’s Hospital the teaching relating to general medical and surgical conditions set out in the previous sub-section can be taught in relation to children, the tutor linking some aspects to the nursing of adults.

**Nursing of Patients with Chronic Conditions**

The majority of pupil nurses will gain this experience with elderly patients although in a few instances it may be with the younger age groups.

When the Training School is based on a long stay or geriatric hospital a number of items from this section should be included in the teaching programme early in the training. It is essential to create and maintain
the interest of the pupil nurses in this branch of nursing and for this
reason it is helpful to include some of the reasons underlying chronic
conditions when discussing routine nursing care of the patient. The
Geriatrician should give one or two lectures on the aims and scope of
this type of nursing during the first year of training.

Where nursing experience is gained primarily with patients who are
helpless and bedridden, visits to the physiotherapy department, the
hostel will help the pupils to appreciate the more active aspects of

The nurses who in the early days of their training care for patients who
are acutely ill will need a careful introduction to the different approach
dealing with their particular problems. Attention should be drawn
that a number of patients will be admitted with acute conditions and
pupils realise the support and encouragement they can give to the
patients and are familiar with the special equipment available to assist
conditions. Pupils should be informed of the facilities available to
in increasing the patients' health and well being.

The special needs of the younger chronic sick patient should be
explained. Emphasis should be laid on the importance of observing
and reporting signs of physical or mental improvement or deterioration.

APPENDIX 1

The following examples indicate the type of hospital which could be
considered for approval as a Training School for pupil nurses with
suggested secondment:

Training School                          Secondment
1. General hospital providing acute surgery and medicine,
   departmental experience and children.
   Geriatric hospital.
   Infectious diseases hospital.

2. Infectious diseases hospital
   providing infectious diseases,
   general medical, (geriatric)
   children's experience.
   General hospital for acute
   surgery, casualty or operating
   theatre experience.

3. General hospital providing long stay and medical experience.
   General hospital for acute
   surgical children and depart-
   mental experience.

4. Chest hospital providing acute surgery, medicine and depart-
   mental experience.
   General or Children's hospitals
   for children’s experience.
   Geriatric hospital for long stay
   experience.

5. Children's hospital providing acute surgery, and medicine,
   departmental experience and
   children.
   General hospital for adult
   experience.
   Geriatric hospital for long stay
   geriatric experience.
APPENDIX 2

The following Suggested Plans of Theoretical Training are included for guidance.

1. Preliminary Training School 4 weeks.
   1st year.
   20 study $\frac{1}{2}$ days one each week.
   Break of 2-3 months for night duty.
   8 study $\frac{1}{2}$ days one each week.

2nd year.
   12 study $\frac{1}{2}$ days one each week.
   Break for two weeks.
   12 study $\frac{1}{2}$ days to include lectures by medical staff.
   Break for night duty.
   6 study $\frac{1}{2}$ days to complete training.

2. Preliminary Training School 4 weeks.
   1st year.
   8 study days one every other week.
   Break 2-3 months for night duty.
   6 study days one every other week.

2nd year.
   6 study days every other week.
   Break 2-3 months for night duty.
   8 study days one every other week to include lectures by medical staff.
   2 study days to complete and consolidate.