Modified Team Nursing

By Agnes Forrest*

A modified method of team nursing as carried out at the Christian Medical College Hospital, Vellore.

TO HAVE been hearing and reading about team nursing now for over twenty years or more, yet there are not many hospitals where this method of nursing is practised. The usual reason given against adopting the team method is that there are not enough staff nurses. The C.M.C. Hospital, Vellore, decided that without increasing our staff quota we would try out a modified type of team nursing in the medical wards. We have in these wards a limited number of staff nurses, plus nursing students at different levels. It was in order to develop to the fullest extent the potential of the staff nurses that we had, and to involve the graduate nurses more in the education of the students that we decided to give this method a trial.

In her book on Ward Administration Miss Dorothy Finkbiner states, "The assignment method should be used which will make possible the best nursing care to the patients, provide the best experience to the staff members, giving them interest and challenge, and that will keep the unit functioning smoothly and efficiently."

The first of these aims we believed was being met by the system of patient assignment which we were following. Not only does this system provide for individual care for the patient, it also allows the student to carry out the total care of the patient so far as is possible for her. Was there any way in which we could combine the method being used along with the team method so that the staff nurses would be enabled to use their skills more efficiently and effectively and also take more part in the teaching and supervision of the student nurses ?

MODIFICATION ADOPTED

It was decided to adopt a modification of the team method which retained the patient assignment method for students within a team while giving the staff as team leaders more responsibility in a smaller area. Before adopting the method they had circulated over the whole ward of 40-50 patients, helping here and there as required. Now their activities were more or less confined to the care of about 15 patients who were being nursed by their team. This would enable them to know each patient better and make a real study of his needs.

*Formerly at C.M.C. Hospital, Vellore.

ORIENTATION

The orientation of the staff nurses to the new role took a lot of the Departmental Sister's time in the beginning until the staff learned how to lead their teams. The more experienced staff nurses found it a little difficult at first to concentrate on a smaller number of patients and needed help to see that care was being given appropriate to the patient's needs. So much of the needs of the medical patient are not realised to be needs, e.g. explaining and getting the patient to understand about diet, seeing that the correct amount of fluid is taken, especially when this is restricted, giving that kind of health teaching which will be helpful to the patient when he goes home. It is so easy to feel that a patient's needs are being met if he is lying in the bed without complaining. The newly graduated staff nurses took to the new method with interest and enthusiasm.

SPLITTING THE PATIENTS INTO GROUPS

Already the patients were conveniently split into groups under the three medical units and one cardiology unit, and it was decided to use these ready-made groupings. With full staff complement three groups are possible. When there is a shortage, one staff nurse or the third year student takes over another team also.

COMPOSITION OF TEAMS

All staff and students in the ward are split into groups under a leader, A typical team might be as follows :—

Team Leader —Staff nurse
Team members—3rd year certificate student — 1
2nd year certificate students— 2
2nd Year B.Sc. students — 2
(5 hours daily)

If only one third year student was allocated to the whole ward then only one team had a third student. Usually there were two third year students. There were also at some periods of the year 4th year B.Sc. students on full duty to study advanced nursing, and Post certificate B.Sc. students posted for five hours four days per week. These alongwith first year students were incorporated into the teams.

ASSIGNMENT FOR STUDENTS

The ward sister (or staff nurse in charge) and the clinical instructor arranges the patient assignment for the students as before, but assignments are planned within one group of patients, and each student works only under one team leader. In this way the student gives continuous care to her patient for a week or longer. The team leaders make adjustments, like sending help from within the team to someone who is overloaded, but any change in assignment is done by the ward sister, who knows the requirements for the students' clinical experience.

PLANNING THE DUTY ROTA

The duty rota has to be carefully planned so that some members of each team will always be on duty. Our duty roster is divided under the names of the team leaders and it is possible to see at a glance how many members of each team are on duty at a given time.

(Contd. on page 263)