

# EFFECTIVE WARD TEACHING

by C. S. BALASUBRAHMANYAM,

R.N. Ootm (Syd.), Dip. N.A. (Syd.) F.N.S.W.C.N.

WITH the changing concept of the role of the nurse, every nurse is expected to function in the preventive, curative and teaching aspect of health. The ultimate goal in nursing education today is to make the school an independent institution, its primary purpose being that of education of the student nurse. The programme will provide opportunity for the increase in personal and professional development of the student if she is to assume the functions required of her as a professional nurse.

A review of the history of nursing brings out the fact that nursing education was for many years conducted largely under the system of apprenticeship. The student nurse learns at the bed side from a senior nurse. There is a great value in this method if there is close supervision, adequate sampling, a sufficient time for developing skills.

The student nurse of the present day has not yet acquired the full student status. She is prepared in the same way as an apprentice in other fields of work and thus is required to fulfil the dual role of a student and employee. The total subordination of the students education to the service requirements of the hospital, give the student very little time for study and the development of her capacity for reasoning and judgment. Though the preliminary training schools, block system and study day methods of nurse education, pave the way to a certain extent to introduce full student status in many of the hospitals, we ourselves are not able to achieve this object to any great extent because of personnel shortage.

Good co-ordination between theory and practice of nursing is necessary. Unless such co-operation is attained between (i) the ward and teaching staff of schools, (ii) administrators, teachers, and the members of the ward staff, (iii) registered nurses and student nurses, (iv) medical and nursing personnel, (v) the nurse and the patient, the

clinical programme cannot be successfully carried out. Nurses have problems in relationships that are common to all professional workers but most common to all is the necessity to do our work well enough to meet our basic needs. The nurse ought to be sensitively aware of her responsibilities and obligations towards other members of the profession and her co-workers.

The ward sister is appointed to her post and therefore has an implied loyalty to those above her (the matron, the hospital, the medical superintendent, the doctors and others) but the prime responsibility of the ward sister is the care of the patient. The ward sister is immediately aware of her administrative responsibilities. In order to be considered efficient (by those already mentioned) she has to ensure that her ward is run efficiently. Every day involves attention to a lot of book work, laundry lists, duty rosters, ward cleanliness, medical supplies, 'rounds', meals, charts, etc. which must be attended to. If such efficiency is overdone, it almost amounts to forgetting the patient, regarding him as impersonally as a mechanic regards a motor car in for repair.

In addition the ward sister has the responsibility for teaching nurses, for going further than the mere instruction necessary to see that treatment is carried out as ordered. The ward sister is, quite understandably, likely to defend herself by saying that there is little time to devote to teaching the nurse, that the ward is understaffed, that there is so much work of a repetitive nature that simply has to be done and done well. We all agree that the ward sister has a direct responsibility to see that the numerous routine tasks are carried out and nurses directed accordingly, but one would go further and use the same argument in support of the claim that student nurses should be taught to nurse effectively.

The majority of ward sisters feel the clinical teaching programme should be carried out by the tutorial staff since they are meant for that purpose and are paid for it. It is a pity that leaders of the nursing profession, who are carrying on the work in the wards, are often unaware of the fact that much depends upon them for the successful implementation of a clinical teaching programme for student nurses. Unless a harmonious relationship is maintained between ward sisters and tutorial staff, it is very difficult to teach the student nurses the art of nursing.

## Clinical Teaching

Student nurses learn scientific principles in the class room, but the application of these scientific principles to the actual nursing care of the patient, is not easily understood by young students. In order to make the students practise what they learn in the class room, it is imperative that it should be followed by practice in the wards under proper supervision and guidance; the ward nursing personnel are unable to devote their whole attention to this programme. To overcome obstacles, it would be ideal if the authorities appointed clinical instructors to carry on the programme of ward teaching. Since the instructor will be mainly responsible for planning, direction, supervision and evaluation of the instructional programme within one clinical area of the student's experience, she may be designed as "Clinical Instructor" or "Departmental Sister", who works in cooperation with the ward sister.

## Aims and Objectives

The aims and objects of clinical teaching in nursing are:

1. To focus attention of the students upon the medical and nursing problems of the patients to whom they are assigned, and to help them to develop an ability to adjust general plans of care to the needs of individual patients.

2. To make learning easier and more

meaningful by correlating theory and practice and by hearing, seeing and doing at the same time

3. To demonstrate skilfully the nursing procedure of special importance on the particular service.

4. To analyse the difficulties of the student learning nursing techniques and to guide them in the acquisition of the new skills.

5. To direct students in the use of library resources for the purpose of improving nursing care and to acquire additional knowledge.

6. To develop in the student an understanding of the contribution of research studies and better medical and nursing care.

7. To develop as far as possible the potentialities of each student.

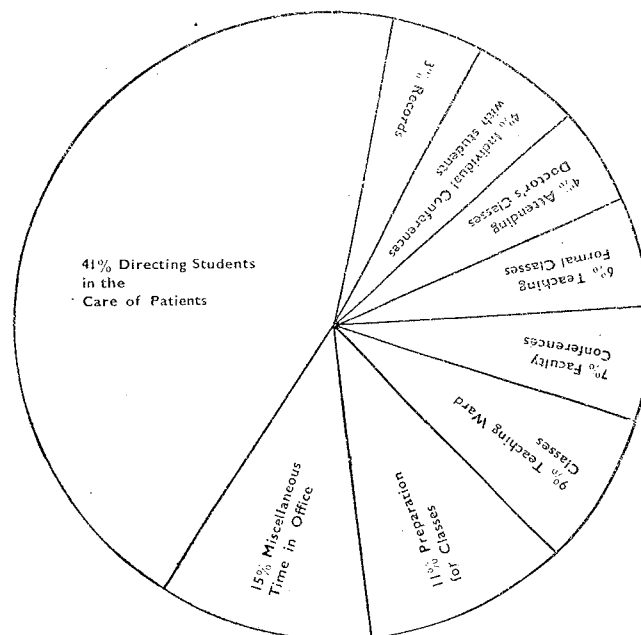
8. To inspire in students the ideals of fine nursing

### Plan for Clinical Instruction

Before planning a course of clinical instruction, it would be an asset if an analysis of the organisation of the school and hospital, and the relationship of the instructor with various other members of the hospital and the tutorial staff, is made. The organisation plan of some of the personnel in an institution which separates education from service is shown in the chart : Figure 1.

In this organisational chart it is shown that the training schools should be quite independent from that of hospital administration, which fact has been universally recognised, and adopted in some of the advanced countries. While making provision for the clinical instructor, policies should be for-

Fig. 2



How a full time instructor in clinical teaching spends her time. Under miscellaneous time in the office, there were included conference with visitors to the School, the grading of papers, the planning of clinical rotation and other office activities not listed in the other categories in the above chart.

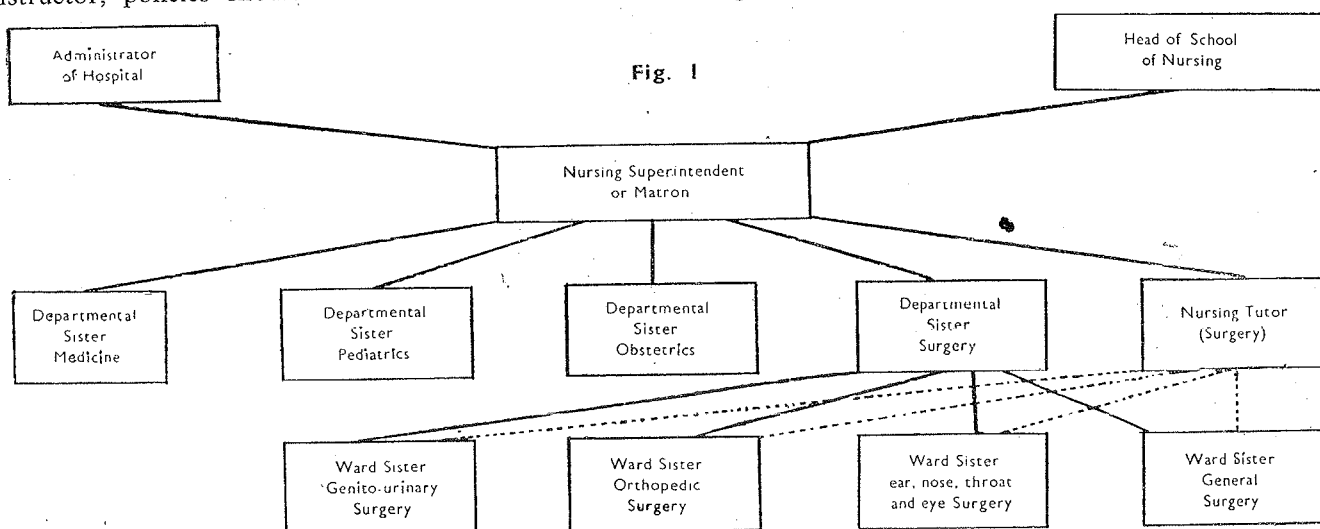
mulated for creating an environment in which instruction can be successfully promoted. Good ward teaching can be done only on the careful division of the ward work to ensure that patients receive good nursing care.

Figure 1 also indicates the relationship of the Instructor in the clinical area to the administrative supervisors, head nurses, the head of the school of nursing and to the

Nursing Superintendent of the Hospital. By a study of such a table, the Instructor can see clearly the channels through which requests or recommendations can be made and so plan her clinical programme.

Figure 2. It has been diagrammatically shown how a full time clinical instructor utilises her time in the various aspects of the clinical programme, which should be planned in accordance with the

Fig. 1



Organisation of some of the personnel in the institution which separates education from service. Note that the Ward Sister is directly responsible to the Departmental Sister. The relationship between the instructor and the ward sister is co-operative as shown by the dotted lines. Hence the success of the instructor must depend upon a clear differentiation of functions.

materials available. The standardisation of nursing procedures and compilation of nursing procedures manual for use throughout the clinical field will facilitate the conduct of teaching programme. As depicted in Figure 2, the instructor spends a considerable amount of time in directing the students in the care of the patients. During the course of her teaching, she should impress upon students that the patient should be treated as an individual, to know the conditions which lead to that particular disease, to see the illness as the patient sees it, and finally to recognise the further adjustments which may be necessitated by the illness. She should encourage the students to converse with the patients and to try to understand the emotional factors which play a large part in the development, progress and cure of the disease.

#### **Progress Notes and Laboratory**

##### **Findings**

There are several ways by which students can be made to interpret the progress, or otherwise, of a disease. History of the patient's illness, progress notes recorded on the case charts, laboratory findings and X-ray films, aid students towards proper nursing care of the patients.

##### **Ability to Observe**

The stress is already made in the class room about the need to develop habits of observation. However, this must be put into practice in their clinical studies. It is through clinical instruction and experience in handling patients that the nurse learns to recognise the needs of individual patients. The students are helped in developing this quality by making rounds in the wards with the ward sister. A good nurse is able to observe the needs of patients without having to ask the patient.

If there is no clinical demonstration room, an empty room may be used or the patient may be wheeled to the corner of the verandah for the time being. The patient is encouraged to participate in the clinic. It is usually best to have some preliminary discussion before the students see the patient and after the patient goes back to his

bed, for the purpose of discussion of such facts which could not be mentioned in his presence.

Effective teaching demands certain learning materials in addition to the provision of the student activities in a ward. The evaluation of text books and reference materials constitute an important problem both to the clinical instructor and to the student who is expected to use discrimination in her reading. In addition to the library maintained in the classroom, a ward library is valuable in providing reference materials when needed. The ward library should consist in addition to the books pertaining to that unit, a good dictionary, leaflets, periodicals and such other printed materials pertaining to the clinical area.

##### **Evaluation**

The effectiveness of a clinical teaching programme depends on continuous evaluation and planning in the light of changing needs and resources. Co-ordination of all teaching given throughout the various areas of the clinical field is essential. This is implemented by planning meetings at which all participants in teaching arrive at decisions with regard to the total plan of operation, content, methods, schedules, and day to day communications. There are many means of evaluating a student such as :

- (i) The use of orientation procedure.
- (ii) Case assignment and studies,
- (iii) Individual and group conferences,
- (iv) Demonstrations.

##### **Orientation Procedure**

The plans for the orientation to the department must be planned by each instructor according to the ability of the students, paying attention to the peculiarities of the particular department. The programme should provide for (i) a discussion of the purpose of the experience the student should have, (ii) a discussion of the kind of experience which is selected for achieving the purpose, (iii) explanation of aids the students may use, and the steps they may take to facilitate the planning and execution of the nursing responsibilities.

##### **Case assignment and studies**

There are advantages and disadvantages between functional assignment and patient care assignment. If we want to introduce the patient-care method, there should be one nurse for every patient which means a very heavy expenditure in providing the adequate number of nurses. Functional assignment in our country is necessary until more nurses are available.

##### **Individual and Group Conferences**

For the purpose of evaluation of a particular procedure or experience, the clinical instructor should have group conferences with the students. If she has to correct the performance of a student, she should have a conference with the individual student alone in her office and discuss her performance.

##### **Demonstrations**

If a clinical instructor desires that a particular procedure is to be imitated, the demonstration as a method of teaching, will be very effective. It is useful for individual teaching but, if economy of time of the clinical instructor has to be considered, group teaching may be followed. Procedures taught in the class room have to be revised or adjusted to special situations and conditions in the ward.

If the demonstration is a review of a procedure previously taught in the class room, students may bring, or study before hand, the instruction sheets used in the class room. If the procedure is taught for the first time, the use of mimeographed directions save continuous note taking on the part of the students, as well as dictation and repetition of explanations on the part of the instructor. It would be very helpful if these sheets are distributed sufficiently early before actually conducting the demonstration so that the students may be well prepared to receive the procedure. When a patient is used for the demonstration, students should be cautioned in regard to the nature of discussion and proper preparation should be made especially to the physical and psychological environments, the subject, the selection and

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