

## For SNA Members

# How the Study of Psychology can help us do Better Nursing (Contd)

By

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### Making the patient feel at home on admission

#### 1. What the term 'hospital' means to the patient :

Let us pause and think what the term 'hospital' suggests to the vast majority of people. They have passed the great building and thought it looked like a prison ; they have seen the ambulance swing through the gates and caught a glimpse of red-blanketed figures on stretchers. Now it is their turn and the very thought of it conjures up a whole host of worries and fears of the unknown. What will be expected of me ? Shall I do the right thing ? What will happen to me ? This is especially true of patients who come from small homes, or the village. They are easily overwhelmed by the size and strangeness of the ward, by the uniforms and by the starched efficiency of nurses.

#### 2. Admitting the patient

How can we help the patient to settle down ? We know that first impressions are the most lasting. So the first thing we should do is to greet the patient with a friendly smile, and make some encouraging remark.

One of the most frightening things about going to a new place is one's ignorance of the special customs. Therefore we should explain the hospital routine to the new patient.

#### 3. Factors producing change in behaviour.

Another important point to know is what conditions may produce disturbing

reactions or responses and try to eliminate them.

(a) *Noise* : Noise is one of the most distressing conditions in a hospital ward. When one is sick, the slightest sound seems to be exaggerated. The rattling of trolleys and their contents, the noise in the corridors—of hurrying feet and chatter cause irritation to the patient.

(b) *Odours* : A healthy individual may enjoy the aroma of cigarette smoke or be indifferent to ether fumes coming from the operating room, but a sick patient may be upset by any strong odour. Perfumes, the fragrance of strongly scented flowers may be disagreeable to patients. Therefore every effort should be made to prevent strong or offensive odours from penetrating to the patients' room.

(c) *Food Service* : In some diseases there is loss of appetite. These patients will be repelled by untidy trays or by dishes laden with much food. On the other hand they will be tempted to eat if the servings are small, dainty and attractively served, and if the ward is fresh and pleasant.

(d) *Bed Making* : Bed-making is another activity which may cause considerable distress to the victim of illness. Some over-zealous nurses want to finish making beds at express speed. The patient gets an impression of banging, thumping, pushing and pulling. He feels that he is the centre of a whirlwind circulating around. It is possible to make a bed efficiently, quickly and at the same time to be gentle and even leisurely.

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# The Quiet Hour

## The Dependable Nurse

By

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The dependable nurse must first be dependant. Dependence means to be subject to the direction of those in authority; in short, obedience. When she was at home she relied upon and was obedient to her parents. In them she saw the hand of authority and to them she paid every respect. When she joined the nursing staff the same obedience and respect were required in a different way. In the hospital she belongs to the staff whose whole purpose is to work together for the good of the patient. To have the staff function successfully there must be team work. And that follows when every member carries out orders strictly. This is the meaning of dependence for the nurse.

In the world today we live in an atmosphere which runs counter to dependence: let every one do what he or she thinks best, regardless of authority. This spirit should not exist in a hospital. From the time the nurse begins her training she is under direction. And those who direct her, teach her to follow, not to take the lead. Time and time again trained nurses vouch for the necessity of carrying out orders as given, otherwise there may be a mishap. The nurse, therefore, when finishing her training is not left free to follow the modern trend. She is dependent because a member of a team. Unless she is obedient and has respect for authority she cannot be relied

on; she cannot be dependable.

I once knew a nurse who realized at the outset of her training the meaning of obedience. When orders were given she carried them out minutely; if she thought a better way possible, she asked whether such a way was feasible. If her way was discountenanced, she would promptly do as she was told. Later on, when she went to another hospital, the technique was entirely different from what she had learnt. She did not insist on the technique she knew; with a sharp eye and a keen ear she fell into the technique routine without difficulty. She became adaptable, and dependable.

A nice story, you may say. Should it not be true of every nurse? Is such a trait hard to achieve? Yes, very hard, because everybody likes to have his or her own way. That is natural. But a nurse must go against this tendency as a member of a team. A team has to be reliable, dependable. So does every member of it. In it the dependable nurse is irreplaceable, in it she is the crowning jewel.

Before God and in your profession, be ever reliable, dependable. Be an inspiration to your team. Your team will respond by putting full confidence in you. How efficient a hospital staff can be when inspired by a dependable nurse!

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(e) *X-Rays*: Patients are frightened very often of having an X-Ray taken. They think they will get burnt or injured by it, and should be reassured. I remember an old man admitted for a suspected fracture of femur, who was very restless in his bed. When asked what was the matter, he

said that his leg was X-Rayed in the morning, and that he was afraid that the X-Ray had burnt the tissues. When the nurse reassured him that it was not so, the old man became calm and fell asleep.

(To be continued)