NEWER METHODS AND OBJECTIVES IN NURSING EDUCATION

IX

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Bibliography

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INTRODUCTION

As an introduction to the subject matter which follows, this small piece of information, with all that it symbolizes, seems to me to be particularly appropriate; namely, that during the past ten years, we have been trying to replace the "training school" with the "school of nursing". In addition to the above is a statement that I found giving the four objectives which nursing education is striving to attain. They are as follows: To prepare the nurse to meet more fully and efficiently her technical duties; to make her socially minded; to give her a keener appreciation and knowledge of the cultural values in life; and to make schools of nursing part of the state school system and to secure public support for them. A Resume of Nursing Education Through the Ages.

As we look through the pages of history, we find, even in the most civilized parts of the world, that both the theory and the practice for the educated nurse are surprisingly recent. Apart from the midwives, who seem to have always been plentiful, there seems to be little trace of men or women corresponding to our nurses, and nursing was most probably done by slaves and women of the household.

It was not until the beginning of Christianity that nursing was lifted onto a higher plane, and what had formerly been a mere occupation of slaves or a service of necessity in any household, became a sacred vocation based upon Christ's actual command. Thenceforward, it was the avowed duty of all Christian men and women to go outside the narrow limits of their own homes and tend others in sickness and distress. But even though nursing was now done by a higher type of person, there was still no preparation back of them.

The real beginnings of education of the nurse as such began with St. Vincent de Paul in the middle of the 17th Century when, with the help of Mile. LeGras, he founded the world-famous order of the Sisters of Charity. He recognized the need of instruction for the Sisters and the necessity of freedom from vows, enclosure, hours of religious exercise and complete subordination to the clergy. He also set forth the "Service Ideal" as a very necessary part of a nurse's education.

Another great epoch in the advancement of nursing education came in the 19th Century when Pastor Fliedner and his wife, Friederike, founded the Deaconesses of Kaiserwerth in Germany. Florence Nightingale, who has been called the "Founder of Modern Nursing", received a part of her education at Kaiserwerth. She, in turn, contributed much to the advancement of nursing education. Her main innovation was in insisting that the entire control of a nursing staff should be in the hands of a woman who must, herself, be a trained and competent nurse. She also insisted that women must be trained

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for their work regardless of type or kind. Miss Nightingale also contributed much to the education of the nurse in the ideals she set forth and carried out during her lifetime.

PRELIMINARY PREPARATION FOR HOSPITAL ENTRANCE (Education and Requirements)

It has long been the goal of educators in the nursing field to have every school of nursing require high school graduation as the minimum standard of preparation for entrance. Although many have reached it, there is still a great number of schools who have not yet come up to this standard. One somehow feels that some of these schools are only following this trend because of existing forces and not through a real desire for advancement. Some, having reached this standard, have been able to go still further. Through affiliation with the state college or university and a medical school, they are offering a five-year curriculum in nursing, leading to a Bachelor of Arts or Science degree and preparing the student for nurse registration.

Looking on into the future, there are those who are hoping and working towardthe time when the education of the nurse will be on the same basis as that of the college or university student, the nurse paying her tuition and maintenance and completing her course in four years.

With these facts and objectives in mind, I am endeavoring to offer, in the ensuing material, some suggestions as to subjects offered in high schools which give a specific background, and the arrangementswhich some of the colleges and universities have made for nursing education programs.

The time of life at which a girl begins definite preparation for the life work that she has chosen to follow varies with each individual. One girl may decide early in life what she wants to do while another girl may not definitely decide until the beginning of her college career. However, with the great amount of specialization which is found today, I feel that young people should be encouraged and helped to make a selection fairly early in life so that they may take advantage of the high school curriculum in getting their specific background.

Working in conjunction with this fact, I think that there is need of some person who can aid the young high school girls in choosing their careers and helping them to arrange their programs to their own advantage so that they may secure the best possible background and preliminary instruction in the type of thing they are interested in. In my mind there is no better prepared person to do this than the school nurse or the public health nurse working in the community. Either before helping them to choose their subjects, or at the same time, she should discuss with them their ideas of nursing and their qualifications; encouraging those whom she feels are truly interested and have the ability to follow this profession, and aiding the others to make adjustments and choose some other life work. She, herself, has been one of the young women whose desire to become a nurse has materialized; she has the background and the knowledge which she should be eager to pass on to those who desire to follow in her foot steps.

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The courses now offered in the high school curriculum which offer a specific background or give some definite preparation are: chemistry, physics, Latin, nutrition, psychology, physiology and sociology. Mathematics is also desirable as it is essential that the student have a good working knowledge of arithmetic. These are elementary in nature but give a good foundation for the secondary courses in college. In addition to these, the student should take the subjects which will make for a well-rounded course and yet meet the hospital and college requirements.

Believing that there are many opportunities in nursing for the woman who is well prepared, and as such preparation means professional education of a high order, the University of Oregon Medical School offers a five-year curriculum in nursing which leads to a Bachelor of Arts or Science degree and prepares the student for nurse registration. The first two years of this course are given in the School of Physical Education on the campus at the university or in the School of Science on the campus at the state college. Prior to entering the hospital school, one term is taken in the Department of Nursing Education at the University of Oregon Medical School, Portland, Oregon, followed by two years in a hospital school of nursing with the theoretical work given in the Department of Nursing Education. In the senior year, the student specializes in public health nursing, hospital administration, or some other special type of nursing education offered at the University of Oregon Medical School in Portland or in the School of Social Science, Eugene.

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The first two years are designed to accomplish two things. First, the courses have been selected with a view to their cultural value equal to that of the customary freshman and sophomore years. Second, they have been arranged to provide the student with that special preparation which enables her to complete her hospital education in two years instead of three, as in the usual hospital course of study leading to nurse registration.

At the present time the University of Oregon grants a 45 term hour credit for theory and practice given in a school of hursing, on a transcript of record from the hospital school signed by the Director of Nursing Education. A student to be given this credit, must be a graduate of a standard school of nursing which admits only high school graduates.

The curriculum as now offered at the university in these first two years is as follows: First year -- Animal Biology, Elementary General Chemistry, English Composition, Physical Education, Background in Nursing, French. Second year -- Elements of Sociology, Shakespeare, Physical Education, French, Continuation Chemistry, Organic Chemistry, Elective.

The State College curriculum differs in the second year in that it offers Elementary Biochemistry instead of Continuation Chemistry.

The curriculum at the Medical School for the term preceding hospital entrance includes the following: Anatomy and Physiology, Chemistry, Drugs and Solutions and Personal Hygiene. The student is not required to take chemistry if she has had it in college.

Sometime in the near future a four-year curriculum for a degree course in nursing, planned by Miss Elnora Thomson, internationally-known educator, will be introduced into the courses of study at Oregon State College and the University of Oregon as a prerequisite for the nursing education program offered at the University of Oregon Medical School and affiliated hospitals in Portland, Oregon. The complete program is as follows:

		Term hours		
		lst	2d	3d
First Year	El. Sociology	3	3	3
	Elementary General Chemistry	4	4	
	English Composition	3	3	4 3 1 3
	Physical Education	1	1	1
	Background in Nursing	3	3	
	French or German	4	4	4
		18	18	18
Second Year		3	3	3
	Zoology Shakespeare	3	3	3
	Physical Education	1	1	1
	French or German	4	4	4
	Continuation Chemistry	4		
	Organic Chemistry	-	4	4
1. 1	Elementary Psychology	3	3	3
		18	18	10

The above two years may be taken at either the University at Eugene or the State College at Corvallis.

On the following page are listed the two summer terms and the third and fourth years which are taken at the University of Oregon Medical School. This curriculum leads to the Bachelor of Art or Bachelor of Science degree.

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First Summer	(between first and second years)	Ten weeks.	
	Elementary Nursing Procedures Drugs and Solutions Bacteriology	10 hours 2 " 4 " 16 "	
Second Summer	(between second and third years)	Eleven weeks.	
	Review former course. Elementary Nursing Procedures Anatomy and Physiology Personal Hygiene	5 hours 6 <u>3</u> 15	
Fall Term (Th	irty-Six Hour Week)		
	Physiology of Nutrition Physiology of Disease Case Work Materia Medica	3 2 4 <u>2</u> 11	
Winter Term (Forty-Four Hour Week)		
Opening Topper	Emergency Nursing Clinics in Medical Diseases Medical Diseases Public Health Com. Diseases: TB, VD, etc.	2 5 2 2 2 13	
Spring Term (Forty-Four Hour Week)		
	Adv. Nursing Procedures Surgical Diseases Special Surgery: Eye,Ear,Nose and Throat Orthopedic Surgery	3 2 2	
	Clinics in Surgical Diseases Month Vacation	<u>5</u> 12	
Fall Term (Fo	rty-Four Hour Week)		
	Adv. Nursing Procedures Obstetrics Clinics in Obstetrics	4 2 <u>5</u> 11	
Winter Term (Forty-Four Hour Week)		
Spring Term (Child Psychology Adv. Nursing Procedures Pediatrics Clinics in Pediatrics Forty-Four Hour Week)	3 3 2 5 13	
	Psychiatric Nursing Clinics in Psychiatry Survey of Field Seminar	2 5 2 <u>3</u> 12	

In addition to the subjects offered, I keenly feel that there should be some course or means of orientating the young woman who is entering the hospital, rather than to let her plunge directly into the maze of hospital life, and once there, left to find her own way out as best she can. There is such a vast difference in comparison with the life that most of them have been living and there is so much to accustom ones self to all at once that I think many times a student becomes hopelessly lost and discouraged and forms a great dislike for the work. But, having started, she feels she must keep on, and it is from the attitudes of such nurses that many people receive a bad opinion of nurses and the nursing profession in general. While, if they had been able to receive some first-hand information and experience within the hospital before actually entering on their career there, many would not start and others could adapt themselves in a much better manner to hospital life.

As yet I have no definite suggestions or plan to give except for this. As the course of study is now arranged, the hospitals could offer a one-hour a week course, given by the superintendent or supervisor of nurses, in the term immediately preceding hospital entrance, to those students who are their applicants. The hour should be divided into two parts, the first half of which should be given to discussion of duties and possible situations in the ward, and the second half to observation of ward work. This will give them the opportunity to see what actually goes on in a hospital, stimulate them to ask questions and clear up many vague ideas that they have concerning nursing.

Some such course might very profitably be offered by other universities than our own.

Following are the curriculums as offered by some of the

leading colleges and universities throughout the United States.

Stanford University, which is affiliated with the Stanford School of Nursing, San Francisco, offers a pre-nursing curriculum consisting of three year's work at Stanford University, and two year's work at the Stanford School of Nursing, the degree of Bachelor of Arts and the Nursing Diploma being conferred at the close of the five years. The completion of 135 units of University work of an average grade of C is necessary before the student may enter the School of Nursing. The requirements for admission are the same as for other courses in the University.

Pre-Nursing students entering with advanced standing from other universities are required to take a minimum of 45 units of resident work at Stanford University. This minimum of 45 units presupposes a residence of three University quarters. The completion of the collegiate part of the Pre-Nursing Course in this minimum of time before entering the School of Nursing is possible for only those students who, before transferring to the University, have fulfilled the requirements of the first six quarters of the curriculum, including those of the Lower Division.

Graduates of schools of nursing affiliated with an institution of collegiate rank may be granted, on recommendation of the Pre-Nursing Committee, a maximum advanced credit of 45 units, provided they have also fulfilled the requirements for admission to the University. To qualify for the degree of Bachelor of Arts, graduates of schools of nursing admitted to advanced standing will be required to fulfill both the Lower Division requirements and those of the major department in which they ultimately register. The degree of Bachelor of Arts in Pre-Nursing is given only for the five year's combined University and Nursing course.

Students wishing to take the degree of Bachelor of Arts

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before transferring to the School of Nursing should register in one of the major departments of the University. By careful planning, it is possible to fulfill both the requirements for the Bachelor's degree in the major department, and those of the Pre-Nursing curriculum.

The following subjects are required in the course as it is given at Stanford University:

First Year

Citizenship, Chemistry, Language, Electives.

Second Year

Language or Literature, History Biology, English, Bacteriology, Electives.

Third Year

Physiology, Psychology, Anatomy, Electives.

This schedule presupposes entrance credit of 2 units in a foreign language, 1 unit in Chemistry and 1 unit in History.

The curriculum at the School of Nursing covers a period of thirty-six months, divided into nine terms of four months each. Six weeks of the total course is assigned to vacation.

During the first term the student completes the fundamental science courses not covered in college. She receives an introduction to nursing through a study of elementary nursing procedures and allied subjects. Procedures are first practiced in the nursing demonstration room, and when the student acquires sufficient skill, she then carries them out in the ward environment.

In the second and third terms the students, in two groups, are assigned to medical and surgical services, and receive class instruction concurrently in each service.

From the fourth to seventh terms, inclusive, the student progresses through the maternity, pediatric, psychiatry, and private services. She also returns to the medical and surgical wards for a second assignment.

The eighth and ninth terms are devoted to elective courses from which may be selected courses in communicable disease nursing, visiting nursing, medical nursing, surgical nursing, pediatric nursing, maternity nursing, and psychiatric nursing. Class instruction is given concurrently in each service and out-patient experience as stated subsequently.

The University of Minnesota has a school of Nursing and Department of Preventive Medicine and Public Health which is only open to graduate nurses. Forty-five credits represent approximately the adverage advanced standing granted for a satisfactory course of study in a School of Nursing. The amount and type of college work to be required of each individual is to be decided in consultation with her major advisor and will be determined in the light of the candidate's general education and experience.

Applicants who are unable to present adequate high school credentials for university matriculation are required to take the following examination:

a--College Aptitude test
b--Test of proficiency in English
c--Special examinations required of all students in College of Education

Students must conform to the regulations of the College of Education in which they register.

The following courses are arranged so as to indicate the minimum requirement for students wishing to secure a Bachelor of Science degree with a major in Public Health Nursing and at the same time earn a Certificate in Public Health Nursing. They are planned to prepare the student for such public health nursing positions as a visiting nurse, a school nurse and health teacher, an infant welfare nurse, a rural or industrial nurse. Those who choose proper subjects in the College of Education may qualify for a high school teacher's certificate.

The subjects listed below make up the curriculum leading to a Certificate in Public Health Nursing. Fifteen credits is considered an average term's work.

Elementary Psychology, Introduction to Sociology, The Socially Inadequate, Elementary Case Work, Social Protection of the Child or Child Training, Elementary Field Training in Case Work, Introduction to Secondary School Teaching, Elements of Preventive Medicine, Maternal and Child Hygiene, Tuberculosis and its Control, Mental Hygiene, Principles of Public Health Nursing and Special Fields in Public Health Nursing.

In the Field they receive practice in Infant Welfare, School Nursing, Rural Nursing and Visiting Nursing, and for those students who have not had previous experience or instruction in the care of the tuberculous, an affiliation of two weeks is arranged at Glen Lake Sanatorium. Field practice covers a period of 15 weeks, and the Practice work is available through affiliation with the following local organizations:

> Minneapolis Visiting Nursing Association Infant Welfare Society Public Schools of Minneapolis and St. Paul County Services, including Hennepin and other selected counties within the state.

In addition to the aforementioned credits which may be applied toward a degree, the following are required:

> English 4-5-6 or Exemption History (Modern World) Physiology (Physiologic Chemistry) Physiology (Physiology for Nurses) Home Economics (Nutrition) Supervision in Public Health Nursing Sanitary Surveys

Upon consultation with the advisor, electives are selected to complete the degree requirements. To secure the High School Teacher's certificate for secondary education, students must include the following courses in their programs:

> Education 51-52-53. This must be completed before the course in Special Methods and Practice Teaching is begun. Prerequisite course in Major Field. Special Methods and Practice Teaching course in Major Field. Electives chosen to complete the professional requirement of 26 quarter credits for the teacher's certificate.

It is possible to earn credits both in the School of Nursing and in the Public Health Nursing Courses during the summer.

Yale University and Western Reserve, which are both endowed institutions, offer a curriculum in nursing education with a Baccalaureate degree as a requisite for entrance.

Columbia University is not affiliated with any hospital, but gives a degree in nursing education.

Concerning the electives which the students are allowed to take, it is my suggestion that, in those schools where they are not included in curriculum as required courses, students should be urged to take elementary psychology and some type of social case work, preferably family case work. The case work will tend to make them "family conscious", while the psychology will give them a broader and better understanding of human nature and its failings, making them more truly sympathetic and tolerant.

Some educational work is also desirable as it aids the nurses inteaching her patient prevention and other information.

HOSPITAL EDUCATION

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Hoping that in the near future only those young women who have completed two years of college will be allowed to enter the hospitals as candidates for nursing education, those who are unfit having been eliminated by the high standards of entrance requirements, many of us feel that the hospitals which conduct schools of nursing should be primarily for education of the nurse, realizing at the same time it is very necessary that the nurse have actual experience with the patient. This, in order to bring before and impress upon her the fact that service to the patient is the real reason for her existence. St. Vincent de Paul stressed these ideas of education and service as did also Florence Nightingale. She put them into practice when she founded St. Thomas Hospital in London in the 19th Century.

The other alternative would be the hospital, having a full realization that their job is two-fold -- caring for the sick and teaching the nurse and doctor --, would have a sufficiently large graduate staff so that they would not sacrifice the education of the student nurse.

In order to meet today's need of a broad and adequate education for the nurse, the school of nursing, in addition to offering professional vocational education which is its specific function, should also fulfill the moral obligation which devolves upon any educational institution -- that of preparing the student for good citizenship, health and a complete life.

In view of the present economic conditions, it will be some time before such a thing as endowed hospitals, primarily for education of the nurse, can be hoped for. In the meantime, those in the field of nursing education will have to do the best they can, and continuously strive toward a better program for the future.

Taking up the period of probation, the first impressions and experiences in the hospital and on the wards have a great deal of influence on the attitudes and ideas which the probationer forms and may go far in helping her to adjust herself. The older nurses can help the young student in many ways, but if their attitudes are of a viscious nature, they can do much harm. These attitudes may or may not reach back into their probationary period. Nevertheless, a good beginning means much to young women entering upon their hospital careers.

The amount of time which should be spent on wards during this period is a much-discussed subject, and the time actually spent varies in many hospitals. Some educators and leaders in the nursing field feel that the entering student should not be sent on the ward until the second or third week, the student attending procedure and other classes and accustoming herself to hospital life during this period. Others feel that she should spend some time on the wards from the first in addition to her classes.

In line with other professions, a forty-four hour week on the wards has been adopted by the National League of Nursing Education as a standard for the student nurse. During the first three months she spends two hours per day on the wards and four hours per day for the second three months. For the remainder of her training, she spends approximately seven and one-third hours per day, allowing one full day each week free from duty. She also has a vacation during the summer months, the length of which varies in the different hospitals.

Supervision and instruction of the best type are of utmost importance to the probationer, probably more so than at any other period, though I do not mean to minimize the need for it at any time as it is during this period that she acquires the foundation and basis for most of her nursing technique. Now, too, she should definitely formulate her service ideal.

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At the present time, the length of the probationary period varies in different locations and in different hospitals, usually ranging from three to six months -- six months probably being most satisfactory. This period of time gives the student sufficient time to fully adapt herself and overcome any wrong impressions which she might have left, if she is really able to carry on this type of work. Also, at the end of a six month's period, the one in charge is more capable of judging who is truly fitted for her work and eliminating those who are not. At this point I would like to stress the matter of eliminating those who are not capable of adapting themselves to and attaining a fairly high standard in this type of work. This girl, and also the girl who is physically unable to carry on, should be dealt with kindly and sympathetically, being urged and helped to find some other kind of work. This is the only fair thing to do.

Before going any further, I would like to quote a few principles from Miss Pfefferkorn's book on "Clinical Education in Nursing", some of which might be applied to any type of education.

- 1. "Simpler assignments and those considered fundamental should precede those of greater difficulty.
- 2. There should be perfect correlation of nursing practice and theory.
- 3. Assignments must be complete in point of time.
- 4. Too many students should not be introduced into a service at one time.
- 5. All students should have assignments equal in time and clinical experience, and in correlated instructions.
- 6. There should be a sound system of supervision."

In addition, I would like to add that there should be a wellprepared and competent staff of instructors and supervisors.

At the present time, even though a great deal of progress has and is being made, there are many things which prevent our schools of nursing from giving the type of instruction which they feel they should, for instance:

- 1. Failure of the nursing profession to emerge from the apprenticeship type of education.
- 2. The two-fold function of the hospital carrying on a school of nursing and medical school affiliation with insufficient financial support.
- 3. Lack of teaching rooms and equipment.
- 4. Inadequately and poorly prepared instructors and instructoresses.
- 5. Lack of clinical material in some of the smaller schools.
- 6. Failure to correlate theory and practice.
- 7. An insufficient number of supervisors and head nurses.

Repeating that principle of Miss Pfefferkorn's which states that simpler assignments and <u>those considered fundamental</u> should precede those of greater difficulty, emphasizes the point which I want to bring out here, namely, that those subjects which are fundamental to a nurse's education should be studied first and not at the end or the middle of her course. Consequently, in those schools where such subjects as Anatomy and Physiology, Bacteriology and Materia Medica cannot be offered except at the beginning of the year; beginning classes should not enter at any other time.

In nursing schools which require a pre-nursing course, including as I stated before, Anatomy and Physiology, Drugs and Solutions, Personal Hygiene and Chemistry, if not had at college, the following is a fairly logical arrangement of subjects as nearly as possible in order of need:

Bacteriology 1. Materia Medica 2. 3. Case work studies Communicable Disease Nursing 4. Medical Diseases 5. Psychiatric Nursing 6. 7. Physiotherapy Public Health Nursing 8. Eye, Ear, Nose and Throat Surgical Diseases 9. 10. 11. Obstetrics 12. Orthepedics 13. Pediatrics

14. Any other advanced courses

As to which should come first -- surgery or obstetrics -- there is much disagreement, and each exponent has his just argument. Concerning the whole arrangement, there is varied opinion but, whatever arrangement is followed, it is an established fact that theory should be definitely correlated with clinical and ward experience and offered at the same time. To make this close correlation possible, it is necessary that the instructress in procedures and the supervisor have frequent conferences, and both should check to see that they are correlating with the theory being taught. This necessity for close correlation brings out the absolute need for good coordination and cooperation of those in charge, and need for supervisors to be teachers as well as instructoresses.

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In some schools the theory is taught by nurses and doctors on the hospital staff while in others it is given by the professors and doctors on the staff of a medical school where there is one in close proximity. The last is probably the best method because in most instances the instructors are better prepared, and as the classes are usually given in the same rooms which the medical students use, the equipment is far superior to that which most hospitals can afford for teaching purposes.

In the teaching of principles and practices of nursing, ethics, and nursing procedures, many teachers feel that there is sufficient motivation implied by the fact that a girl has chosen nursing as her life's work and so she should have correct mind set and readiness already established. However, one feels that they should not rely on this idea too much; that they should explain and motivate course as they go along.

The "Service Ideal" first set forth by St. Vincent de Paul should be the true ideal for which every nurse strives and, in order that such may be the case, every instructor and instructoress should place it before their students, not just once, but many times, disguised in different ways so that the student does not become annoyed at being told often.

In making assignments, the teacher should not fail to make clear what she wants, discussing any part that is not understood, going over method of procedure and results to be obtained if procedure or treatment is successful. In those procedures and treatments where it is desirable, the teacher should give a demonstration. The student should then have an opportunity for supervised study. In the next class period, each student should be required to demonstrate, as we learn to do by doing. Failing time for each individual to demonstrate, two or three may work together. Following this, the student should be allowed to criticize her own work and then the class should be given time for class discussion, questions and criticism.

As soon as possible after the student has given classroom demonstration, she should carry it out on the ward with supervisor present to suggest, check and judge work done. May I again stress the need for the supervisor to be a teacher as well.

The amount of time to be allowed for each service should be judged according to the degree of difficulty and importance in relation to remainder of course. I have mentioned before the poor preparation of instructoresses and supervisors. The facts in relation to this revealed by the grading committee study, were rather discouraging. However, many are trying to remedy their deficiencies by taking high school and university classes. Also, as new teachers, supervisors, and superintendents are being appointed, they have to pass a much higher rating, so the outlook is much more hopeful than formerly.

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Besides having good academic preparation and being teachers of good quality, I feel that the people holding these positions as supervisors and instructors, should be broadminded, have a good understanding of human nature, be progressive and have a desire to work with people. Also, there should be a sufficient number so each can do his, or her, job efficiently and adequately.

In 1932, the Committee on Education of the National League of Nursing Education made a study of the types of post-graduate courses required to meet the needs of different groups of graduate nurses, and as a result of this study, the Committee decided that at least three different types of clinical courses must be prepared to meet their needs. Quoting them as given by this Committee, they are as follows:

- 1. "Supplemental courses -- for the nurses who wish to make up deficiencies in the basic course of their professional preparation.
- 2. The orientation or review type of course -- designed for the nurse who wishes to 'brush up' on courses in which she is especially interested.
- 3. The specialization course -- which is being prepared for the graduate nurse of sound general and professional education who has demonstrated her ability and is prepared to make a thorough study of some clinical subject, for example, psychiatric nursing."

In order to meet these needs, some hospitals are offering review courses, institutes and classes in clinical education. In writing a conclusion to my paper, I trust that I may be allowed to philosophize a small bit.

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Nursing, perhaps the oldest of the professions, is one of the latest to discard the apprenticeship type of education. Like a butterfly slowly emerging from its cocoon and carefully trying its wings before starting, nursing education has gradually been freeing itself from the paternalism of the apprentice system. The paternalistic attitude which the hospitals have had, and some still do have, has been one of the biggest reasons for the low grade type of education offered by them. The hospitals have long resisted a change in the type of education and curriculum for the nurse, probably feeling that they were justified in having the student carry on most of the work as she was being paid a small amount and was receiving her maintenance and education; but they have refused to face the fact, it seems to me, that in the end they have sacrificed the best type of care for the patient in sacrificing the education of the nurse. They have clung to the old type of curriculum in which the nurse had to learn much by the trial and error method rather than by applying the knowledge gained from a well-planned and organized curriculum which gives her the background and the fundamentals of nursing before she actually enters her hospital career.

Another reason for the hospitals' resistance to change has been because of the economic aspect. Like an ostrich, feeling that he is hidden because his head is out of sight, they have felt that it was much cheaper to carry on with student nurses because they did not have to pay them such large salaries. They did not consider the cost of the loss of time and material on account of the lack of education and experience of the student, and many other things which have to be taken into consideration. If the hospitals are to become true educational institutions, there are standards which must be attained. They must have an affiliation with an educational institution and discard their attitude of paternalism. As in any other school of higher education, the nurse should be expected to pay her own tuition, for her own books and supplies, and for her own maintenance in the nursing school dormitory -- not be maintained in a nurses' home. The courses should be so arranged that she may complete her preparation for a degree over the same period of time as is required in other educational institutions.

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The young woman who has not sufficient funds to pay for her education, should be given an opportunity to aid herself by working for her board and room on the basis of so many hours per day and, at the same time, taking a lightened course.

The clinical education should be strengthened and, under the above plan, the money spent to pay the nurse to be educated, could be used for this purpose. The opportunity for laboratory work is given in the care of the patients, and preventive medicine must take a much more important place in hospital instruction.

In summarizing, it becomes apparent that we have in the past expected students in schools of nursing to carry a large percentage of the labor load caused by the illness in our communities. We are unique in this inasmuch as no other profession expects of its student body more than the merest hint of a contribution to the actual work load that that profession carries in the world's work. With our attention for years fixed on our responsibility to the sick, it has been difficult to see clearly. May we not learn from other professions that in order to carry on an educational program, the actual labor load must be shifted to some other group, leaving the education of student nurses to those institutions that are abundantly equipped to offer a well balanced practical experience coupled with a theoretical program patterned after the best that has been visioned in nursing education?

As a final remark, I would like to say that it should be the goal of every school of nursing to so educate the nurse that she may be truly sympathetic, have a well-rounded and wholesome personality, be efficient and capable of adjusting herself to everchanging environment.