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ABSTRACT

The curriculum for the training of the entry level health workers (referred to as nursing aid, assistant, or basic health care worker) is organized with a modular approach and designed within the framework of a humanistic learning growth model. Module 1, The Health Core, provides basic education for any health care worker. Module 2, The Patient Care Assistant, specifically prepares the graduate with knowledge, skills, and attitudes for employment as a patient care assistant in clinics, family health centers, hospitals, nursing homes, and extended care facilities. The total curriculum may be covered within a six-week period. Units within Module 1 are: introduction, body mechanics, environmental safety, and orientation. Each unit follows a format of: course outline, objectives, suggested strategies, evaluation methods, references, and audiovisual aids. Unit topics covered in Module 2 are: introduction, the patient unit, patient comfort and safety, hospital admission of a patient, activities of daily living, treatments, and patient discharge from a hospital unit. The 84-page appendix contains a task frequency profile for basic nurse's aids, a compilation of teaching strategies, a variety of evaluation techniques to assess human-awareness, learning, growth/cognitive/psychomotor performance level, and a glossary.

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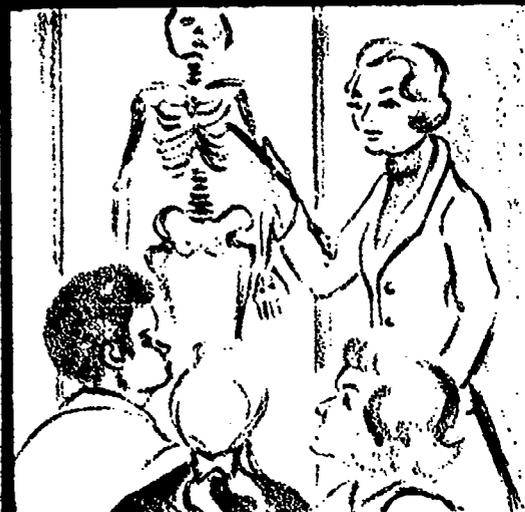
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BASIC HEALTH CARE INSTRUCTOR'S TEACHING GUIDE



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January 1974

Veterans Administration
Department of
Medicine and Surgery

Washington, D.C. 20420



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INTRODUCTION

Background

This Instructor's guide and an accompanying "Basic Health Care Study Guide" have been developed by Miami-Dade Community College (Miami, Florida) in collaboration with the Nursing Service of the Miami Veterans Administration Hospital, and in close cooperation with many other educational and health care institutions in the area. Their development and testing were financed by the Veterans Administration (VA) as part of a two-year project to enhance the "use of existing community resources for training and utilizing personnel below the professional level."

The curriculum is based on a relatively new concept in the training of the entry level health worker, variously referred to as Nursing Aide, or Assistant, or as a Basic Health Care Worker. As a part of the Miami-Dade project, training materials have also been developed which it is hoped will facilitate the worker's movement into inhalation therapy or physical therapy. These are still to be tested.

Similarly, materials have been developed for training to enable the licensed practical nurse to advance into the Associate Degree program in professional nursing without excessive repetition of theory and experiential practice. These are already in use, but require further testing.

As a first step beyond the initial project, the curriculum for the basic health worker (called nursing assistant in the VA) is to be tested in several different communities. If warranted, it will then be printed and made available for general use.

Curriculum Format

The format chosen for this curriculum is a Modular approach. The Modular concept lends itself to a delineation in terms of specific goals and objectives, with adjunct learning activities developed to fulfill specified goals.

An adaptation of the Dewey Decimal System has been utilized for the presentation of all outline material in this curriculum.

Module I, The Health Core may be used as the elementary education for any health care worker. At the conclusion of Module I, the student may opt for further education in any of the allied health fields, or he may opt for immediate employment with marketable skills readily adaptable for employment as a Patient Transport Assistant.

Module II, The Patient Care Assistant, specifically equips the graduate with knowledge, skills and attitudes necessary for his employment as a Patient Care Assistant in clinics, family health centers, hospitals, nursing homes, extended care facilities, and domiciles; or, if the student so opts, he may use the knowledge, skills and attitudes acquired in Module II as a springboard for career mobility in the nursing profession.

A suggested time frame for Module I is 40 hours, 10 of which are assigned for clinical experience. Module II is designed for 200 hours: 100 hours for class; 100 hours for clinical experience. The total curriculum may be covered within a six week period.

Curriculum Philosophy

This curriculum was designed within the framework of a humanistic-learning-growth model. The ultimate goal of this curriculum is to pro-

duce a health care worker who is aware of the patient as a person with physical, mental, emotional, social, and spiritual needs. Thus it provides learning experiences which serve as opportunities for growth in knowledge, attitudes and skills. A person so educated becomes an "affective" as well as an "effective" health care worker (Bloom, Mager, Banathy).

Instructor's Guide

To facilitate the training of the Patient Care Assistant, The Instructor's is to be used along with the student's Basic Health Care Study Guide. Unit objectives have intentionally been phrased in terms of desired learning attainment: cognitive, affective and psychomotor. A variety of teaching strategies have been presented as suggestions for use in achieving Unit Objectives. An instructor may choose among those strategies freely, utilizing those which he feels will be appropriate to the needs of his particular class.

The Appendix section of this contains a compilation of teaching strategies, many of which have been developed and successfully used by Human Relations training groups (Weiffer and Jones). Creative and appropriate use of such strategies can especially facilitate the attainment of affective objectives. An example of implementing strategy to curriculum Objective is given for strategies described in the Appendix (Appendix B.).

Evaluation techniques, likewise, provide the instructor and the students with a variety of methods with which to assess learning growth in terms of human-awareness level, as well as cognitive, or psychomotor performance level (Appendix C).

The Glossary section of this **guide** contains selected words, phrases and terms employed in the writing of this **guide** the definitions of which are necessary to establish parameters of linguistic use (Appendix D).

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MODULE I

HEALTH CARE

MODULE I
HEALTH CORE

- Goals
1. The student will experience success in meeting the objectives of Module I.
 2. The student will receive a core of knowledge and skills necessary for everyone who enters the Health Care Delivery System.
 3. The student will exhibit attitudes appropriate to a caring, productive member of the Health Care Team.
 4. The student can use the knowledge, skills and attitudes acquired in Module I as a springboard for career mobility.
 5. The student will have a set of marketable skills readily adaptable for employment as a Patient Transport Assistant.

UNIT I INTRODUCTION

COURSE OUTLINE

1. Course Overview
 - 1.1 Introduction
 - 1.2 Goals and objectives
 - 1.3 Length
 - 1.4 Attendance
 - 1.5 Instructional materials
 - 1.6 Resource center
 - 1.7 Office hours of instructors
 - 1.8 Study habits
 - 1.9 Note-taking
 - 1.01 Evaluation
 - 1.02 Certificate for successful completion

2. Identification and function of Health Care Delivery Systems
 - 2.1 National, state, local
 - 2.2 Responsibility of health agency, student, instructor

3. Health Agency Organization
 - 3.1 Organization chart
 - 3.2 Departments and related functions
 - 3.3 Administrative and supervisory personnel
 - 3.4 Lines of supervision
 - 3.5 Personnel policies

4. Basic human needs in illness and health
 - 4.1 Physical
 - 4.2 Emotional
 - 4.3 Mental
 - 4.4 Social
 - 4.5 Spiritual

5. Ethics and Attitudes
 - 5.1 Communications
 - 5.2 Interpersonal relationships
 - 5.21 Fellow employees
 - 5.22 Patients
 - 5.23 Visitors
 - 5.3 Medical-Legal aspects
 - 5.31 Patients chart

6. Terminology

UNIT I

INTRODUCTION

OBJECTIVES

At the conclusion of Unit I, the student can:

1. Meet others using communicative skills in developing a supportive and helpful relationship.
2. Discuss goals and objectives of Module I as they relate to personal growth and opportunities for career mobility within a hospital or extended care facility.
3. Follow policies of the institution as demonstrated by personal and professional behavior.
4. Discuss the role of a health agency as a part of a Health Care Delivery System in terms of one's commitment and contribution as an employee and member of the health team.
5. Exercise judgment and maintain communication through appropriate administrative channel.
6. Analyze one's own self-concept through:
 - 6.1 Discussion of how one can develop an awareness of self
 - 6.2 Description of self and cite factors of desired change
 - 6.3 Discussion of personal feelings for others with different socio-economic, racial, and ethnic backgrounds
 - 6.4 Description of influence which one's self-concept has upon ability to relate to others.
7. Verbally communicate with others in a manner which facilitates optimal transmission and retention of what is intended.
 - 7.1 Describe how listening and speaking skills affect interpersonal relations.
 - 7.2 Describe how writing and reading skills affect interpersonal relations.
 - 7.3 Discuss the influence of nonverbal communication on interpersonal relations.
 - 7.4 Describe how feelings (empathy) for the one with whom you are relating affects communication.
 - 7.5 Discuss conditions affecting interpersonal relations; such as: socio-cultural factors, an individual's personal frame of mind, the state of a patient's health, or the affects of environmental conditions.
8. Demonstrate acceptable telephone answering skills.

9. Discuss the use of the patient's chart as a confidential and legal record.
10. Demonstrate correct charting techniques using medical terminology.

Suggested Strategies and Resources

Audio Visual
Brainstorming
Feedback
Handout
Inductive Processes
Lecturette
Micro-groups
Modeling
Newsprint
Nonverbal Communication
Periods of Solitude
Question and Answer
Role Playing
Warm-up Introduction Dyad

Evaluation Methods

Conference
Peer Evaluation
Self Evaluation
Teacher Made Test

UNIT I

REFERENCES

- Anderson, Maja C. Basic Patient Care Philadelphia: W. B. Saunders Company, 1965, pp. 3-28.
- Being a Nursing Aide Hospital Research and Educational Trust.
Washington, D.C.: Robert J. Brady Company, 1969, pp. 1-1-1-10.
- Culver, Vivian M. Modern Bedside Nursing. Philadelphia: W. B. Saunders Company, 1969, pp. 5-11, 25-33, 37-45.
- Mayes, Mary E. Abdallah's Nurses Aide Study Manual, 2nd ed.
Philadelphia: W. B. Saunders Company, 1970, pp. 3-8.
- Thompson, Ella M. and Murphy, Constance. Textbook of Basic Nursing,
Philadelphia: J. B. Lippincott Company, 1966, pp. 11-51.
- Wood, Lucile A. Nursing Skills for Allied Health Services, Volume I,
Philadelphia: W. B. Saunders Company, 1972, pp. 1-26.

AUDIO VISUAL

Filmstrip - Orientation

Brady's Overlays - Fundamental Nursing Principles - Units I and II

Overlays - Hospital Organization Chart

UNIT II
BODY MECHANICS
COURSE OUTLINE

1. Definition of Posture
 - 1.1 Correct Posture
 - 1.11 Standing
 - 1.12 Sitting
 - 1.13 Lying
2. Definition of Body Mechanics
 - 2.1 Correct Body Mechanics
 - 2.11 Range of Motion of Joints
 - 2.111 Active
 - 2.112 Passive
 - 2.12 Proper Utilization of Muscles
 - 2.2 Basic Laws of Physics
 - 2.21 Gravity (work close to object)
 - 2.22 Leverage (use weight of body)
3. Operating the Bed
4. Operating the Wheelchair
5. Operating the Stretcher
6. Moving, Lifting, Turning the Patient
 - 6.1 Manual
 - 6.2 Mechanical
 - 6.21 Hoyer Lift
 - 6.22 Surgi Lift
 - 6.23 Davis Roller
7. Safety devices
 - 7.1 Siderails
 - 7.2 Soft restraints
8. Transporting the Patient
 - 8.1 Bed to chair to bed
 - 8.11 Standard chair
 - 8.12 Wheelchair
 - 8.2 Bed to Stretcher to Bed
 - 8.3 Bed to Ambulate to Bed

UNIT II
BODY MECHANICS
OBJECTIVES

At the conclusion of Unit II, the student can:

1. Assume correct posture--standing, sitting and lying in supine position as identified on the Performance Evaluation Record.
2. Retract pelvic girdle and contract gluteal muscles.
3. Dramatize the active range of motion of joints by performing
 - 3.1 Flexion
 - 3.2 Extension
 - 3.3 Hyperextension
 - 3.4 Adduction
 - 3.5 Abduction
 - 3.6 Supination
 - 3.7 Pronation
 - 3.8 Rotation
 - 3.9 Circumduction
4. Demonstrate correct application of good body mechanics by:
 - 4.1 Moving a student to the head of the bed
 - 4.2 Assisting a student to turn on the side
 - 4.3 Placing a student in a sitting position with the feet over the side of the bed
 - 4.4 Assisting a student from bed to wheelchair
 - 4.5 Assisting a student from bed to stretcher
5. Use his body in a safe and effective manner contributing to self-protection and personal satisfaction.
6. Perform the following tasks for the operation of a hospital bed:
 - 6.1 Lock wheels
 - 6.2 Raise and lower siderails
 - 6.3 Place the bed in high position
 - 6.4 Place the bed in low position
 - 6.5 Raise and lower the headrest
 - 6.6 Raise and lower the leg rest
7. Prepare wheelchair for use by:
 - 7.1 Locking and unlocking wheels
 - 7.2 Raising and lowering the footrest
8. Prepare a wheeled stretcher for use by:
 - 8.1 Locking and unlocking wheels
 - 8.2 Raising and lowering siderails
 - 8.3 Applying safety belt

9. Share personal feeling and reactions about being handled to develop empathy for the patient and grow in awareness of possible patient feelings and reactions.

Suggested Strategies and Resources

Audio Visual

Demonstration and Return Demonstration

Exploration and Examination of Equipment

Feedback

Fishbowl

Handouts

Lecturette

Modeling

Nonverbal Communication

Practice

Resource Person

Evaluation Methods

Peer Evaluation

Performance Evaluation Record

Self Evaluation

Teacher Made Test

UNIT II

REFERENCES

- Anderson, Mafa C. Basic Patient Care. Philadelphia: W. B. Saunders Company, 1965, pp. 149-180.
- Being a Nursing Aide. Hospital Research and Educational Trust, Washington, D.C.; Robert J. Brady Company, 1969, pp. 6-1-6-35.
- Boyles, Ruth M. Manual of Nursing Measures for Practical Nursing. Division of Vocational Education, Florida Department of Education, 1967, pp. 113-116.
- Leake, Mary J. A Manual of Simple Nursing Procedures. Philadelphia: W. B. Saunders Company, 1968, pp. 40-58.
- Mayes, Mary E. Abdallah's Nurses Aide Study Manual, 2nd ed. Philadelphia: W. B. Saunders Company, 1970, pp. 163-169.
- Nordmark, Madelyn I., Rohweder, Anne W. Scientific Foundations of Nursing, 2nd ed. Philadelphia: J. B. Lippincott Company, 1967, pp. 137-155.
- Wood, Lucile A. Nursing Skills for Allied Health Services, Volume I, Philadelphia: W. B. Saunders Company, 1972, pp. 53-98.

AUDIO VISUAL

- Filmstrip - Use of Patient Lifters
- Filmstrip - Lifting and Moving Patients
- Film - Body Mechanics
- Film - Use and Application of Posey Products
- Picture of Skeleton

UNIT III
ENVIRONMENTAL SAFETY
COURSE OUTLINE

1. Fire
 - 1.1 Prevention
 - 1.2 Primary equipment and techniques of fire control
 - 1.3 Reporting
 - 1.4 Location and identification of extinguishers and alarms
 - 1.5 Techniques and procedures in evacuation
 - 1.6 Fire drill

2. Accident Prevention - Environmental Awareness
 - 2.1 Recognizing and reporting potential hazards
 - 2.11 Elimination of potential hazards
 - 2.12 Reporting defective equipment
 - 2.2 Traffic control
 - 2.3 Recognition, primary treatment and reporting life-threatening emergencies

3. Epidemiology
 - 3.1 Identification of microorganisms
 - 3.2 Presence of disease-producing organisms in environment
 - 3.3 Relationship between man and bacteria
 - 3.4 Conditions for growth
 - 3.5 Reproduction
 - 3.6 Modes of travel and transfer
 - 3.7 Preventive measures
 - 3.71 Isolation techniques
 - 3.72 Personal hygiene

UNIT III
ENVIRONMENTAL SAFETY
OBJECTIVES

At the conclusion of Unit III the student can:

1. List five common causes of fire and the associated preventive measures in a health care agency.
2. Identify and report potential environmental fire hazards.
3. List and locate fire fighting equipment, and built-in fire prevention devices generally located in health agencies and in his assigned work area.
4. Restate in his own words the steps for initiating the fire plan in the institution.
5. Describe and interpret the application of the "fire triangle" to fire fighting.
6. Participate in fire drills.
7. In a simulated situation demonstrate his work by initiating the fire plan; evacuate a patient by the swing carry and operating portable fire extinguishing equipment.
8. Share his feelings and reactions while being transported via the Swing Carry.
9. Name, recognize and suggest corrective action for at least four different types of potential accident producing conditions and discuss personal responsibility for surveillance of the environment to prevent accidents.
10. List the steps to be taken for reporting defective equipment and accidents.

11. State the symptoms of a person requiring emergency cardio-pulmonary resuscitation.
12. Initiate and maintain cardio-pulmonary resuscitation on a manikin.
13. Demonstrate the presence of living microorganisms in the environment by making cultures of the air, floor, furnishings and his own skin and hair.
14. Review and discuss the bacterial growth of the cultures made as it relates to patient care.
15. Demonstrate the effectiveness of different disinfectant agents in destroying bacteria by sensitivity testing of a staph inoculated petri dish.
16. Review three relationships between man and microorganisms as they relate to disease.
17. Discuss five conditions for growth of microorganisms.
18. Demonstrate awareness of the modes of transmission of microorganisms by performing the following tasks as outlined on records:
 - 18.1 Handwashing
 - 18.2 Don and remove disposable mask
 - 18.3 Don and remove isolation gown
 - 18.4 Serve a tray to a patient in isolation
 - 18.5 Dispose of waste products and garbage from an isolated unit
 - 18.6 Prepare and send soiled linen from an isolated unit
 - 18.7 Prepare for terminal sterilization the nondisposable items from an isolated unit.
19. Accept responsibility for the protection of one's own health and that of others.
20. Discuss feelings and reactions of being isolated from the group.
21. Complete the terminology objectives for the Unit.

Suggested Strategies and Resources

Airing Negative Feelings

Audio Visual

Brainstorming

Crisis Behavior

Demonstration and Return Demonstration

Exploration and Examination of Equipment

Feedback

Flash Cards

Game Playing

Handouts

Inductive Processes

Isolation

Lecturette

Manikin

Modeling

Newsprint

One Word Evaluation

Placards

Practice

Pretest

Question and Answer

Resource Person

Role Playing

Worksheet

Evaluation Methods

Conference

Observation of Behavior

Peer Evaluation

Performance of Task

Self Evaluation

Teacher Made Test

UNIT III

REFERENCES

- Being a Nursing Aide. Hospital Research and Educational Trust, Washington, D.C.: Robert J. Brady Company, pp. 3-1--3-17, 4-7--4-31.
- Boyles, Ruth M. Manual of Nursing Measures for Practical Nursing. Division of Vocational Education, Florida Department of Education, 1967, pp. 73, 91-93.
- Leake, Mary J. A Manual of Simple Nursing Procedures. Philadelphia: W. B. Saunders Company, 1968, pp. 20-24.
- Mayes, Mary E. Abdallah's Nurses Aide Study Manual, 2nd ed. Philadelphia: W. B. Saunders Company, 1970, pp. 204-211, 221, 224, 230-232.
- Thompson, Ella M. and Murphy, Constance. Textbook of Basic Nursing. Philadelphia: J. B. Lippincott Company, 1966, pp. 71-80.
- Wood, Lucile A. Nursing Skills for Allied Health Services, Volume I. Philadelphia: W. B. Saunders Company, 1972, pp. 123-39.
- Pamphlet: Maintenance and Use of Portable Fire Extinguisher. Boston: National Fire Protection Association, 1972.

AUDIO VISUAL

- Filmstrip - Isolation Technique
- Film - Handwashing in Patient Care
- Film - Hospital Sepsis
- Brady's Overlay Fundamental Nursing Principles, Units I and II
- Overlay of Fire Triangle

UNIT IV
ORIENTATION
COURSE OUTLINE

1. Departments
 - 1.1 Admitting
 - 1.2 Administration
 - 1.3 Offices
 - 1.4 Dietary
 - 1.5 Engineering and Maintenance
 - 1.6 Services
 - 1.7 Laboratory
 - 1.8 Records
 - 1.9 Occupational Therapy
 - 1.01 Personnel Office
 - 1.02 Physical Therapy
 - 1.03 Respiratory Therapy
 - 1.04 X-Ray
 - 1.05 Nursing
 - 1.051 Medical
 - 1.052 Surgical
 - 1.053 Pediatric
 - 1.054 Obstetrical
 - 1.055 Newborn Nursery
 - 1.056 Delivery Room
 - 1.057 Operating Room
 - 1.058 Central Services
 - 1.059 Emergency Room
2. Orientations to Ward/Nursing Unit
 - 2.1 Nurses' Station
 - 2.2 Kitchen
 - 2.3 Water and Ice Supply
 - 2.4 Utility Room
 - 2.5 Linen Room
 - 2.6 Waste Disposal
 - 2.7 Other
3. Orientation to Patients' Units
 - 3.1 Equipment
 - 3.11 Furnishings
 - 3.12 Utensils
 - 3.13 Call System

UNIT IV
ORIENTATION
OBJECTIVES

At the conclusion of Unit IV the student can:

1. Name and locate the various departments in the institution.
2. List the functions and services of the various departments within the institution.
3. Locate and identify as to function the following areas on a Nursing Unit:
 - 3.1 Nurses' station
 - 3.2 Kitchen
 - 3.3 Water and ice supply
 - 3.4 Utility room
 - 3.5 Linen room
 - 3.6 Waste disposal
 - 3.7 Soiled linen
4. Identify by name and function the furnishings in a typical patient unit.
5. Operate the furnishings in a patient unit.
6. Identify by name and function the utensils in the bedside table.
7. Activate the patient call system in the patient unit including the bathroom.
8. Demonstrate acceptance of responsibility for internalizing the knowledge regarding location of all supplies and equipment relevant to one's job performance by locating equipment in simulated stress situations.

Suggested Strategies and Resources

Crossword Puzzle

Demonstration and Return Demonstration

Examination and Exploration of Equipment

Game Playing

Handouts

Lecturette

Modeling

Newsprint

Placards

Practice

Worksheet

Evaluation Methods

Conference

Observation of Behavior

Peer Evaluation

Performance of Task

Self Evaluation

Teacher Made Text

UNIT IV

REFERENCES

Anderson, Maja C. Basic Patient Care. Philadelphia: W. B. Saunders Company, 1965, pp. 31-35.

Being a Nursing Aide. Hospital Research and Educational Trust. Washington, D.C.: Robert J. Brady Company, 1969, 5-1-5-3.

MODULE II

PATIENT CARE ASSISTANT

- Goals
1. The student will experience success in meeting the objectives of Module II.
 2. The student will have the knowledge, skills and attitudes which will permit his ready adaptation to the special needs of the community's Health Care Delivery System as a Patient Care Assistant in clinics, family health centers, hospitals, nursing homes, extended care facilities, and domiciles.
 3. The student can use the knowledge, skills and attitudes acquired in Module II as a springboard for career mobility.

POSITION DESCRIPTION

PATIENT CARE ASSISTANT

POSITION SUMMARY

The Patient Care Assistant is a non-professional member of the Nursing team who is aware of the patient as a person with physical, mental, emotional and social needs; and assists all types of patients in the activities of daily living.

QUALIFICATIONS

EDUCATION

Graduate of a basic Patient Care Assistant training program.

EXPERIENCE

Prior experience preferred; however, new graduates may be considered.

AGE

Minimum 18

HEALTH REQUIREMENTS

Will provide evidence of good health.

ABILITIES

Will have an interest and aptitude to work with the ill.
Will be able to communicate with and through others.
Will be able to follow written and oral orders.
Will have an attitude of acceptance of the ill patient.
Will be tactful, understanding, empathic.
Will respect the innate dignity of people
Will respect the confidentiality of the patient and the agency.
Will be able to function as a member of a team.

POSITION PERFORMANCE REQUIREMENTS

PHYSICAL DEMANDS

Must be able to walk, sit, stand, stoop, bend, lift, write, read, listen, speak and observe.

MENTAL DEMANDS

Should be emotionally stable and able to make limited judgments.

SPECIAL DEMANDS

Should possess the knowledge and competency in the basic care of patients, the judgment to recognize and refer situations beyond ability or job scope to the proper resource person; flexibility and adaptability; and the initiative to serve on committees.

WORK ENVIRONMENT

The nursing unit or area where assigned; usually will be in an air-conditioned, well lighted environment.

PERSONNEL RELATIONSHIPS

Responsible to: Team leader

Supervised by: Team leader

Personnel supervised: None

Personnel-Professional-
Patient-Public Contact:

Contact with nursing personnel, patients, visitors, attending physicians, resident house doctors, other departmental staff personnel, members of volunteer services and students from affiliating agencies.

FUNCTIONS AND RESPONSIBILITIES

1. Supports the policies, objectives and standards of the agency.
 - 1.1 Utilizes policy guide and procedure books for information as necessary.
 - 1.2 Reads all official memorandums as they relate to his position.
 - 1.3 Adheres to break and meal time schedules.
 - 1.4 Attends meetings relevant to his position.

2. Communication.

- 2.1 Reports on and off duty to team leader and when leaving or returning to the nursing unit.
- 2.2 Keeps team leader informed on work progress.
- 2.3 Reports all patient observations promptly and accurately.
- 2.4 Maintains accurate and complete records according to policies.
- 2.5 Serves on committee as requested.

3. Assignments.

- 3.1 Receives daily assignment from team leader.
- 3.2 Discusses assignment with team leader, clarifying course of action.

4. Patient care duties.

- 4.1 Maintains a clean and safe environment.
- 4.2 Provides for the comfort and safety of the patient.
- 4.3 Assists with admission of patients to the hospital.
- 4.4 Assists the patient with activities of daily living.
- 4.5 Meets the special needs of patients within the scope of the job.
- 4.6 Assists with the transfer or discharge of a patient.
- 4.7 Administers selected treatments.

5. Motivation.

- 5.1 Works on committees and other projects designed to improve self and patient care.
- 5.2 Participates in in-service educational programs.
- 5.3 Cooperates in the orientation program for new personnel.
- 5.4 Promotes a favorable work climate through harmonious relationships with team members.

6. Participation in the general activities of the nursing unit.

- 6.1 Organizes own work to mesh with patient's needs and team's efforts.
 - 6.2 Contributes actively in the patient-centered team conferences; comes prepared to share knowledge and observations.
 - 6.3 Suggests revision in care plan to meet the changing needs of the patient.
 - 6.4 Maintains equipment and supplies needed by the nursing unit; utilizes them as needed and directed.
7. Demeanor.
- 7.1 Maintains acceptable standards of conduct.
 - 7.2 Conforms to established dress policy.
 - 7.3 Practices good health habits.

UNIT V

INTRODUCTION

COURSE OUTLINE

1. Course Overview
 - 1.1 Introductions
 - 1.2 Length
 - 1.3 Attendance
 - 1.4 Instructional material
 - 1.5 Resource center
 - 1.6 Office hours of instructors
 - 1.7 Evaluation
 - 1.8 Certificate upon successful completion

2. The Patient Care Assistant
 - 2.1 Personal characteristics
 - 2.11 Kind
 - 2.12 Honest
 - 2.13 Well groomed

 - 2.2 Abilities
 - 2.21 Follow verbal or written directions
 - 2.22 Communicate verbally or in writing
 - 2.221 Charting
 - 2.2211 Nurses notes
 - 2.2212 Graphic
 - 2.2213 Other

3. Description of Role
 - 3.1 Comfort and safety of the patient
 - 3.2 Care of the hospital unit
 - 3.3 Assisting the patient with activities of daily living
 - 3.4 Admission to the hospital unit
 - 3.5 Meeting the special needs of the patient within the scope of patient care assistant
 - 3.6 Treatments a patient care assistant may administer
 - 3.7 Discharge of a patient from the hospital unit

UNIT V
INTRODUCTION
OBJECTIVES

At the conclusion of Unit V the student can:

1. Meet one another using communicative skills in a helping relationship.
2. Read the goals and objectives of Module II and demonstrate comprehension through communication.
3. Follow the policies of the institution as demonstrated by personal and professional behavior.
4. Demonstrate an acceptance of cultural patterns exhibited by individual action and communication.
5. Demonstrate the ability to recognize and analyze verbal and nonverbal communication by listening to a simulated interaction.
6. Communicate more effectively and affectively to patients and others.
7. Discuss personal responsibility and dedication of service to his patients and fellow workers through identification of human needs and suffering.
8. Demonstrate the ability to follow written directions.
9. Demonstrate the ability to carry out verbal directions.
10. Explain the role of the Patient Care Assistant.
11. Express himself using the language of the medical profession with demonstrated concern for accuracy of spelling and terminology by completing the terminology objectives for the Unit V.

Suggested Strategies and Resources

Airing Negative Feelings

Brainstorming

Decision Making

Flash Cards

Handouts

Modeling

Nonverbal Communication

Placards

Question and Answer

Role Playing

Warm Up Introduction Dyad

Evaluation Methods

Conference

Peer Evaluation

Self Evaluation

Teacher Made Test

UNIT V

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UNIT VI
THE PATIENT UNIT
COURSE OUTLINE

1. Orientation
 - 1.1 Equipment and supplies
 - 1.2 Environment
 - 1.21 Lighting
 - 1.22 Temperature
 - 1.23 Ventilation
 - 1.24 Humidity
 - 1.25 Sound
 - 1.26 Odor

2. Bed Making
 - 2.1 Unoccupied
 - 2.11 Closed
 - 2.12 Opened
 - 2.13 Postoperative
 - 2.2 Occupied

3. Maintenance
 - 3.1 Concurrent - cleaning
 - 3.2 Terminal cleaning

UNIT VI

OBJECTIVES

THE PATIENT UNIT

At the conclusion of Unit VI the student can:

1. Discuss his responsibility in the selection of equipment and supplies necessary for a functional patient unit.
2. Demonstrate his awareness of the patient call system as the patient's line of communication by testing the system and responding to simulated patient calls.
3. Identify the components of a favorable environment within a patient unit.
4. Identify the patient unit as a home away from home by maintaining a safe and comfortable environment.
5. Discuss the necessity of a well-made bed as it relates to patient's comfort and well-being.
6. Perform the following tasks using the Performance Evaluation Record as a guide:
 - 6.1 Make an unoccupied closed bed
 - 6.2 Make an unoccupied open bed from a closed bed
 - 6.3 Make a postoperative bed from a closed bed
 - 6.4 Make an occupied bed
7. Discuss his role as it relates to cleanliness of a patient unit.
8. Complete the terminology objectives for the unit.

Suggested Strategies and Resources

Audio Visual

Decision Making

Demonstration and Return Demonstration

Exploration and Examination of Equipment

Fish Bowl with Process

Flash Cards

Modeling

Practice

Evaluation Methods

Conference

Peer Evaluation

Performance of Task

Self Evaluation

Teacher Made Test

UNIT VI

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AUDIO VISUAL

Filmstrip - Occupied Bed Making

UNIT VII

PROCEDURES FOR THE COMFORT AND SAFETY OF THE PATIENT

COURSE OUTLINE

1. General Positions
 - 1.1 Supine
 - 1.2 Prone
 - 1.3 Dorsal recumbent
 - 1.4 Fowlers
 - 1.5 Semi-fowlers
 - 1.6 Side lying

2. Special Positions
 - 2.1 Sims
 - 2.2 Cardiac sleeping
 - 2.3 Dangling
 - 2.4 Legs elevated
 - 2.5 Trendelenburg
 - 2.6 Reverse Trendelenburg

3. Supportive Devices
 - 3.1 Pillows
 - 3.2 Bedboards
 - 3.3 Footboards
 - 3.4 Sandbags
 - 3.5 Cradles
 - 3.6 Sheepskin
 - 3.7 Alternating pressure mattress

4. Restraining
 - 4.1 Siderails
 - 4.2 Soft restraints

UNIT VII

PROCEDURES FOR THE COMFORT AND SAFETY OF THE PATIENT

OBJECTIVES

At the conclusion of Unit VII the student can:

1. Demonstrate the following positions on a fellow student following the procedures as listed on the task evaluation records:
 - 1.1 Supine
 - 1.2 Prone
 - 1.3 Dorsal recumbent
 - 1.4 Fowlers
 - 1.5 Semi-fowlers
 - 1.6 Side lying
 - 1.7 Sims
 - 1.8 Cardiac sleeping
 - 1.9 Dangling
 - 1.01 Legs elevated
 - 1.02 Trondelenburg
 - 1.03 Reverse Trendelenburg
2. Demonstrate use of the following by applying to a bed:
 - 2.1 Footboard
 - 2.2 Bedboard
 - 2.3 Cradles
 - 2.4 Sheepskin
3. Share with his classmates the feeling of being placed in different positions.
4. Share his feeling about being physically restrained and discuss possible feelings of a patient in restraints.
5. Complete terminology objectives for the Unit.

Suggested Strategies and Resources

Airing Negative Feelings

Audio Visual

Demonstration and Return Demonstration

Exploration and Examination of Equipment

Feedback

Inductive Processes

Isolation

Modeling

Not Listening

One Word Evaluation

Placards

Practice

Evaluation Methods

Conference

Observation of Behavior

Peer Evaluation

Performance of Task

Self Evaluation

Teacher Made Test

UNIT VII

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UNIT VIII

ADMISSION OF A PATIENT TO THE HOSPITAL UNIT

COURSE OUTLINE

1. Meet the Patient
 - 1.1 Introduce self
 - 1.2 Introduce roommates if applicable
2. Orientation to Patient Facilities
 - 2.1 Admission kit
 - 2.2 Closets and bedside unit
 - 2.3 Bathroom
 - 2.4 Patient call system
3. Patient's Personal Belongings
 - 3.1 Fill out clothes' list
 - 3.2 Fill out valuables' list
4. Observe the Patient
 - 4.1 Look
 - 4.2 Listen
 - 4.3 Touch
 - 4.4 Smell
5. Vital Signs of Patient
 - 5.1 Temperature
 - 5.11 Oral
 - 5.12 Axillary
 - 5.13 Rectal
 - 5.2 Radial pulse
 - 5.3 Respirations
 - 5.4 Blood pressure
6. Collect Routine Urine Specimen from Patient
7. Weigh Patient
 - 7.1 Bathroom scale
 - 7.2 Balance scale

UNIT VIII

ADMISSION OF A PATIENT TO THE HOSPITAL UNIT

OBJECTIVES

At the conclusion of Unit VIII the student can:

1. Share with his class members his personal feeling and reaction to being hospitalized.
2. Practice listening to feelings and reactions of classmates as they share their personal reaction to being hospitalized.
3. Demonstrate growth in his sense of kinship with humanity by discussing possible patient reactions to being hospitalized.
4. Discuss the need for introduction and orientation of a patient to a patient unit.
5. Discuss his own senses as they relate to data gathering about the condition of a patient.
6. Define vital signs.
7. Differentiate between objective and subjective symptoms.
8. Discuss the necessity to report and record accurate information on a patient.
9. Provided with other trainees as patients, according to the evaluation performance record:
 - 9.1 Take an oral temperature three consecutive times, the reading must be accurate
 - 9.2 Take an axillary temperature, reading must be accurate
 - 9.3 Choose and prepare a thermometer and position a trainee for taking a rectal temperature
 - 9.4 Take and describe a radial pulse five consecutive times, concurrent with the instructor within + or - one count
 - 9.5 Count and describe respirations five consecutive times, concurrent with the instructor within a + or - one count
 - 9.6 Take a blood pressure five consecutive times concurrent with the instructor within a + or - two point variable
 - 9.7 Collect a routine urine specimen in a bedpan or urinal

- 9.8 Weigh and measure height one time, reading must be accurate
- 9.9 Observe and chart admission data on trainee

- 10. Accept the responsibility for a working knowledge of the following:
 - 10.1 Time a thermometer is kept in place for taking an:
 - 10.11 Oral temperature
 - 10.12 Axillary temperature
 - 10.13 Rectal temperature
 - 10.2 The normal reading for:
 - 10.21 An oral temperature
 - 10.22 An axillary temperature
 - 10.23 A rectal temperature
 - 10.3 The average range of pulse beats per minute of an adult patient at rest
 - 10.4 When a pulse should be reported
 - 10.5 The average range of respirations per minute of an adult at rest
 - 10.6 What is to be done with patient's clothing and valuables upon admission to a hospital unit
 - 10.7 What information should be given upon meeting a patient and when escorting him to the room
 - 10.8 What is the meaning of "orienting" a patient to his unit

- 11. Demonstrate by self-breathing:
 - 11.1 Shallow respiration
 - 11.2 Deep respiration
 - 11.3 Troubled respirations

- 12. Demonstrate by finger tapping:
 - 12.1 A regular pulse beat
 - 12.2 An irregular pulse beat

- 13. Complete the terminology objectives of Unit VIII.

Suggested Strategies and Resources

Audio Visual

Brainstorming

Demonstration and Return Demonstration

Estimating and Measuring

Exploration and Examination of Equipment

Greeting and Introductory Statements

Handouts

Isolation

Lecturette

Modeling

Practice

Question and Answer

Role Playing

Verbal Progression

Evaluation Methods

Conference

Observation and Behavior

Peer Evaluation

Performance of Tasks

Service Evaluation

Teacher-made Tests

UNIT VIII

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AUDIO VISUAL

Filmstrips - Admission and Discharge

Observation and Charting

Temperature, Pulse, Respiration

Blood Pressure

Brady's Overlays - Fundamental Nursing Principles (Overhead Transpar-
encies) - Units III and VII

UNIT IX
ACTIVITIES OF DAILY LIVING
COURSE OUTLINE

1. Nutrition
 - 1.1 Prepare the patient for meals
 - 1.2 Serve trays
 - 1.21 General diet
 - 1.22 Special diet
 - 1.3 Assist the patient with meals
 - 1.31 Open containers
 - 1.32 Butter bread
 - 1.33 Cut food
 - 1.4 Feed the helpless patient
 - 1.41 The patient unable to use hands
 - 1.42 The weak patient
 - 1.43 The stroke patient
 - 1.44 The blind patient
 - 1.5 Collect trays
 - 1.6 Assist with menu
 - 1.7 Serve between meal nourishment
 - 1.8 Serve water
2. Elimination
 - 2.1 Give and remove bedpan
 - 2.2 Give and remove urinal
3. Intake and Output
 - 3.1 Measure
 - 3.2 Record
4. Personal Cleanliness
 - 4.1 Care of mouth
 - 4.11 Routine
 - 4.12 Care of dentures
 - 4.13 For the helpless patient
 - 4.2 Care of the skin
 - 4.21 Complete bed bath
 - 4.22 Partial bed bath
 - 4.23 Tub bath
 - 4.231 Century bathing unit
 - 4.232 Porta-tub
 - 4.24 Shower
 - 4.25 Use of deodorants
 - 4.26 Back rubs
 - 4.3 Care of hair
 - 4.31 Comb or brush
 - 4.4 Care of nails
 - 4.41 Clean

- 4.5 A.M. (Morning) care
- 4.6 P.M. (Afternoon) care
- 4.7 H.S. (Preparation for sleep) care

UNIT IX
ACTIVITIES OF DAILY LIVING
OBJECTIVES

At the conclusion of Unit IX the student can:

1. Discuss health and its relationship to proper diet.
2. Discuss and accept differences in cultural and ethnic patterns in food selection and preparation.
3. Set a favorable climate for the acceptance of food by the patient in a simulated situation.
4. Discuss physical limitations of a patient in relation to nourishment and plan his care accordingly.
5. Practice and maintain the patient's right to privacy.
6. Discuss and demonstrate awareness of the concept of shame as it relates to one's self and the patient by developing care plans that relieve shameful experiences and maintain the dignity and self-esteem of the patient.
7. Demonstrate acceptance of individual differences in the practice of personal cleanliness and hygiene according to social, environmental, and cultural influences by personal observation and behavior.
8. Determine priorities of patient care based on individual needs and according to time schedules.
9. Discuss the relationship between a patient's physical appearance and emotional well-being.
10. Discuss the establishment of rapport to enhance a trusting relationship between patient and staff.
11. Perform the following tasks on another student according to the performance evaluation record:
 - 11.1 Prepare the trainee for a meal
 - 11.2 Serve a tray
 - 11.3 Feed a blindfolded trainee
 - 11.4 Remove the tray
 - 11.5 Measure and record the amount of liquid taken
 - 11.6 Give a bedpan or urinal and measure and record contents
 - 11.7 Give oral hygiene
 - 11.8 Give a complete bed bath
 - 11.9 Give a back rub
 - 11.01 Comb hair
 - 11.02 Clean nails

12. Complete the terminology objectives for Unit IX.

Suggested Strategies and Resources

Airing Negative Feelings

Audio Visual

Brainstorming

Demonstration and Return Demonstration

Estimating and Measuring

Exploration and Examination of Equipment

Lecturette

Modeling

Nonverbal Communication

Not Listening

Practice

Psycho-Drama

Resource Person

Evaluation Methods

Conference

Observation of Behavior

Peer Evaluation

Performance of Task

Self Evaluation

Teacher Made Test

UNIT IX

REFERENCES

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AUDIO VISUAL

- Filmstrips - Feeding the Patient
- Intake and Output
 - Bed Bath
- Film - General Care

UNIT X

MEETING SPECIAL NEEDS OF THE PATIENT

COURSE OUTLINE

1. Care of the Patient with Tubes
 - 1.1 General
 - 1.11 Inserted:
 - 1.111 Through any natural body opening
 - 1.112 Through surgical procedures
 - 1.113 Through the skin by needle
 - 1.12 Connected:
 - 1.121 To extra tubing
 - 1.122 To equipment
 - 1.2 Safety precautions
 - 1.21 To prevent pull:
 - 1.211 Tape inserted tube to patient's skin
 - 1.212 Secure the extra tubing slack to the bed
 - 1.213 To move a patient or change linen, free extra tubing slack from bed
 - 1.22 For effective operation check:
 - 1.221 Connection - to be airtight
 - 1.222 Tubing - to be kink free
 - 1.223 Equipment - to be working
 - 1.3 Care of a patient with a naso-gastric tube connected to an electric suction machine
 - 1.31 Care of the mouth and nose
 - 1.32 Operation of the machine (Gomco)
 - 1.33 Emptying the drainage bottle
 - 1.34 Measure and record contents
 - 1.4 Care of a patient with an indwelling urinary catheter
 - 1.41 Cleanse around area of insertion
 - 1.42 Position of the drainage bag
 - 1.43 Disconnecting the catheter from drainage tubing
 - 1.431 To collect a specimen
 - 1.432 To clamp
 - 1.44 Emptying the drainage bag
 - 1.45 Measure and record
 - 1.46 Care of leg drainage bag
 - 1.47 Application of an external catheter
 - 1.5 Care of the patient with an I.V.
 - 1.51 Changing the gown
 - 1.52 Observe and report
 - 1.521 Signs of swelling or redness around needle insertion site
 - 1.522 If solution does not drip
 - 1.523 When bottle is near empty
 - 1.524 If the patient has a rash or chills
 - 1.6 Care of the patient receiving oxygen by nasal catheter
 - 1.61 Care of the mouth and nose
 - 1.62 Safety measures

- 1.621 No smoking
 - 1.622 Use of grounded electrical equipment
 - 1.623 No oily substances
 - 1.624 Use of cotton blankets only
2. Care of the Patient in, on, or using Orthopedic Alliances
- 2.1 Care of a patient in traction (skin or skeletal)
 - 2.11 Moving a patient in bed
 - 2.12 Observation of skin
 - 2.13 Making the bed
 - 2.14 Maintaining a good body alignment
 - 2.15 Maintaining traction
 - 2.151 Constant traction
 - 2.1511 Do not lift weights
 - 2.1512 Weights hang free and off the floor
 - 2.152 Counter traction
 - 2.153 Correct body alignment
 - 2.2 Care of a patient in a cast
 - 2.21 Positioning
 - 2.22 Turning a patient in a cast
 - 2.23 Observe the parts of the body extending from the cast
 - 2.231 Color of skin
 - 2.232 Temperature of skin
 - 2.233 Motion of part
 - 2.3 Use of mechanical walking aids
 - 2.31 Crutches
 - 2.32 Crane
 - 2.33 Walker
 - 2.34 Brace
3. Care of the Surgical Patient
- 3.1 Pre Operative Care
 - 3.11 Evening before surgery
 - 3.111 Remove water
 - 3.112 Post appropriate sign (NPO)
 - 3.12 Morning of surgery
 - 3.121 A.M. Care and clean gown
 - 3.122 Report any elevation of temperature, sign of cold, or patient complaints
 - 3.123 Help put patient on the surgical cart
 - 3.2 Postoperative care
 - 3.21 Prepare the unit
 - 3.211 Make a surgical bed
 - 3.212 Place curved basin and wipes on bedside stand
 - 3.213 Obtain special equipment if needed
 - 3.2131 I.V. Standard
 - 3.2132 Suction machine
 - 3.2133 Drainage bottle or bag
 - 3.22 Help transfer patient from stretcher to bed

4. Aspects of Care for the Patient with the Following Conditions
 - 4.1 The patient with a stroke
 - 4.2 The incontinent patient
 - 4.3 The unconscious patient
 - 4.4 The patient with cancer
 - 4.5 The patient with a colostomy (other than a new surgical)
 - 4.6 The geriatric patient
 - 4.7 The patient with a decubitus
 - 4.8 The patient with diabetes
 - 4.9 The dying patient

UNIT X

MEETING SPECIAL NEEDS OF THE PATIENT

OBJECTIVES

At the conclusion of Unit X the student can:

1. Discuss illness that may bring about behavior changes.
2. Discuss the cost and proper use of specialized equipment.
3. Demonstrate an acceptance of the patient's expression of fear and dejection in a structural role playing situation.
4. Identify from a group of objects:
 - 4.1 Oxygen flow meter, humidifier, mask or catheter
 - 4.2 Intermittent vacuum regulator and drainage collection container, to be used with wall vacuum
 - 4.3 Suction regulator and drainage container to be used with wall vacuum
5. Prepare a postoperative unit:
 - 5.1 Make a postoperative bed
 - 5.2 Place emesis basin and wipes on bedside stand
 - 5.3 Attach an I.V. standard to bed
6. State the role of the patient care assistant in preparing a patient the evening before surgery per the agency used for clinical experience.
7. State the role of the patient care assistant in preparing a patient the morning of surgery per the agency used for clinical experience.
8. Provided with a model to which a foley catheter has been inserted:
 - 8.1 Tape the inserted tube to the skin
 - 8.2 Attach catheter to urine collection bag
 - 8.3 Secure extra tubing slack to the bed
 - 8.4 Free extra tubing slack from the bed
 - 8.5 Check the tubing for:
 - 8.51 Airtight connections
 - 8.52 Freedom from kinks
 - 8.6 Attach the urine collection bag to the bed
 - 8.7 Demonstrate by proper handling, safety measures pertinent to the urine collection bag
9. Provided with a model, apply an external catheter.
10. Provided with a model in which a naso-gastric tube has been inserted and attached to suction equipment:
 - 10.1 Describe special nursing measures associated with morning care

- 10.2 Check tubing according to outline
- 10.3 Empty suction drainage collection container and record contents

11. Provided with a model in which an I.V. is inserted:
 - 11.1 State four points to observe and report on a patient receiving I.V. therapy
 - 11.2 Change the model's gown

12. Collect and test a urine specimen for sugar and acetone
 - 12.1 Voided
 - 12.2 Indwelling catheter

13. State within specified percentage of accuracy:
 - 13.1 Three points necessary for maintaining traction
 - 13.2 Correct body alignment in the standing position
 - 13.3 Four things to observe in parts extending from a cast
 - 13.4 A safety measure used on crutches, canes and walkers
 - 13.5 Use of braces
 - 13.6 From which side to approach a stroke patient
 - 13.7 At least two means of communication other than verbal
 - 13.8 Two nursing measures related specifically to the incontinent patient
 - 13.9 Three levels of consciousness and the patient's response at each level
 - 13.01 The responsibility of the patient care assistant for giving care to a patient with a colostomy

14. Discuss the unspoken needs of the patient and the patient's family.

15. Discuss his reaction to the hopelessness of the plight of some patients.

16. Identify and discuss the needs of the terminally ill.

17. Discuss his own feelings related to dying and death.

18. Discuss physical and behavioral changes of the aged.

19. Complete the terminology objectives of the Unit.

Suggested Strategies

Airing Negative Feelings

Audio Visual

Crossword Puzzle

Decision Making

Demonstration and Return Demonstration

Exploration and Examination of Equipment

Flash Cards

Game Playing

Lecturette

Manikin

Modeling

Newsprint

Practice

Psycho-Drama

Resource Person

Role Playing

Site Visitation

Worksheet

Evaluation Methods

Conference

Observation of Behavior

Peer Evaluation

Performance of Task

Self Evaluation

Teacher Made Test

UNIT X

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AUDIO VISUAL

- Filmstrips - Cleaning and Assembling Supplies and Equipment
- Collecting and Receiving Equipment and Supplies
 - Gastric and Gastrointestinal Decompression
 - Oxygen Therapy
 - Female Foley Catheterization
 - Nursing Care During I.V. Therapy
 - Care of the Patient in Traction
 - Care of the Orthopedic Patient

- Care of the Patient in a Cast

- Care of the Dying Patient

Film

- Inner World of Aphasia

- General Care

- Strokes

UNIT XI
TREATMENTS
COURSE OUTLINE

1. Rectal tube
2. Suppositories
3. Enemas
 - 3.1 Cleansing
 - 3.2 Retention
 - 3.3 Harris flush
4. Application of Binders and Bandage Supports
 - 4.1 Straight binder
 - 4.2 Scultetus binder
 - 4.3 T or split T binders
 - 4.4 Sling
 - 4.5 Ace bandage (elastic)
5. Application of Heat and Cold
 - 5.1 Dry
 - 5.11 Hot water bag
 - 5.12 Ice bag, collar, glove
 - 5.13 Aquamatic K pad
 - 5.14 Heat cradle, lamp
 - 5.2 Moist
 - 5.21 Alcohol sponge bath
 - 5.22 Sitz bath
 - 5.23 Soaks
 - 5.24 Compress

UNIT XI
TREATMENTS
OBJECTIVES

At the conclusion of Unit XI the student can:

1. Discuss fears that a patient may experience while undergoing treatments.
2. Discuss the embarrassment that a patient may experience while undergoing treatments.
3. Discuss the importance of developing care plans that relieve embarrassing painful experiences and maintain the self-esteem and dignity of the patient.
4. State in his own words:
 - 4.1 The purpose of a rectal tube Rx and the maximum time for treatment
 - 4.2 Four nursing measures relating to the insertion of suppositories
 - 4.3 The maximum amount of solution to be given as an enema
 - 4.4 The maximum temperature of solution to be given as an enema
 - 4.5 The maximum number of inches a rectal tube should be inserted
 - 4.6 The range of height at which the enema solution container is held above the anus
 - 4.7 The position of choice for the patient who is to receive an enema
 - 4.8 The purpose and principle of the application of various binders and bandages
 - 4.9 The effect of the application of heat upon the blood vessels
 - 4.01 The effect of the application of cold upon the blood vessels
 - 4.02 The maximum temperature of water used for application of heat unless otherwise ordered
5. Provided with a model prepare and administer according to the performance evaluation record:
 - 5.1 A cleansing enema
 - 5.2 Hot water bag
 - 5.3 Aquamatic K Pad
 - 5.4 Ice bag
6. Provided with a model apply according to the performance evaluation record:
 - 6.1 A scultetus binder
 - 6.2 Sling to an arm
 - 6.3 An elastic bandage
7. Complete the terminology objectives of the Unit.

Suggested Strategies

Audio Visual

Crossword Puzzle

Demonstration and Return Demonstration

Exploration and Examination of Equipment

Flash Cards

Game Playing

Handouts

Lecturette

Manikin

Modeling

Newsprint

Periods of Solitude

Practice

Psycho-Drama

Role Playing

Verbal Progression

Worksheet

Evaluation Methods

Conference

Observation of Behavior

Peer Evaluation

Performance of Task

Self Evaluation

Teacher Made Test

UNIT XI

REFERENCES

- Anderson, Ma'ia C. Basic Patient Care. Philadelphia: W. B. Saunders Company, 1965, pp. 94-109.
- Being a Nursing Aide. Hospital Research and Educational Trust. Washington, D. C.: Robert J. Brady Company, 1969, pp. 9-29-9-40, 13-1-13-21.
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AUDIO VISUAL

- Filmstrips - Cleansing Enema
- Application of Binders and Bandages
 - Local Applications of Heat and Cold

UNIT XII

PROCEDURES FOR DISCHARGE OF A PATIENT FROM A HOSPITAL UNIT

COURSE OUTLINE

1. Inter-Agency Transfer
 - 1.1 Personal belongings
 - 1.11 Clothes list
 - 1.12 Valuables list
 - 1.13 Other
 - 1.2 Supplies
 - 1.3 Means of transport

2. To the Mortuary
 - 2.1 Post mortem care
 - 2.2 Personal belongings
 - 2.21 Clothes' list
 - 2.22 Valuables' list
 - 2.3 Transfer to the hospital morgue

3. The Hospital
 - 3.1 Personal belongings
 - 3.11 Clothes' list
 - 3.12 Valuables' list
 - 3.13 Other
 - 3.2 Supplies
 - 3.3 Assist patient to dress
 - 3.4 Means of transport
 - 3.5 Accompany patient to car

UNIT XII

PROCEDURES FOR DISCHARGE OF A PATIENT FROM A HOSPITAL UNIT

OBJECTIVES

At the conclusion of Unit XII the student can:

1. Discuss responsibility and necessity for giving emotional support to the patient who is being transferred from a familiar to an unfamiliar setting.
2. Discuss the four stages of dying as outlined by Dr. Kutler-Ross.
3. Share with classmates personal feeling about death.
4. Discuss the need for a period of grief and mourning for the patient's family.
5. Discuss variations in expression of grief and mourning.
6. Define post mortem care.
7. State the procedure for post mortem care.
8. Identify and discuss some fear and anxiety that a patient may have in relation to his discharge.
9. State in his own words the responsibility of the Patient Care Assistant in the discharge of a patient.
10. Complete the terminology objectives for the Unit.

Suggested Strategies and Resources

Airing Negative Feelings

Audio Visual

Decision Making

Isolation

Lecturette

Modeling

Newsprint

One Word Evaluation

Periods of Solitude

Psycho-Drama

Question and Answer

Resource Person

Site Visitation

Verbal Progression

Evaluation Methods

Conference

Observation of Behavior

Peer Evaluation

Self Evaluation

Teacher Made Test

UNIT XII

REFERENCES

- Being a Nursing Aide. Hospital Research and Educational Trust.
Washington, D.C.: Robert J. Brady Company, 1969, pp. 11-7—11-14,
17-6—17-9.
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Philadelphia: W. B. Saunders Company, 1972, pp. 571-580.

AUDIO VISUAL

Filmstrip - Admission and Discharge

63/64

A. TASK FREQUENCY PROFILE

C. EVALUATION METHODS

B. TEACHING STRATEGIES

D. GLOSSARY

BASIC NURSE'S AIDE

TASKS RANKED ACCORDING TO FREQUENCY OF MENTION

AS TAKEN DIRECTLY FROM JOB DESCRIPTIONS

OF TWENTY-ONE HOSPITALS SURVEYED IN MIAMI, FLORIDA

JANUARY 10, 1972

ITEM NO.	TASK	FREQUENCY	ITEM NO.	TASK	FREQUENCY
1	Keep patient's unit clean and orderly daily	21	24	Make post-operative beds	13
2	Measure intake and output	18	25	Assist patient to and from stretcher	13
3	Admissions	18	26	Assist patient to and from wheelchair	13
4	Discharge	18	27	Take blood pressure	13
5	Give and remove bedpan	18	28	Apply icebag, glove, collar	12
6	Feed patients	18	29	Give partial bed baths	12
7	Take temperatures	18	30	Position patients	12
8	Count pulse	18	31	Collect sputum specimens	12
9	Count respirations	18			
10	Give complete bed bath	17	32	Keep utility and linen room clean and orderly	11
11	Oral hygiene	17	33	Collect food trays	11
12	Collect routine urine specimens	17	34	Give back rubs	11
13	Collect stool specimens	17	35	Weigh patients	11
14	Give and remove urinal	17	36	Care of patient in isolation	10
15	Make occupied bed	15	37	Perform errands	10
16	Serve trays	15	38	Assist patient with shower	10
17	Serve fresh water	15	39	Assist patient with tub bath	10
18	Post Mortem care	15	40	Use of cradle	10
19	Answer lights	14	41	Administer enemas	10
20	Make unoccupied bed	14	42	Perform clinic test and acid test	9
21	Care of equipment	14	43	Traction (equipment)	9
22	Serve mid-meal nourishments	14	44	Apply hot water bags	9
23	Use of siderails	14	45	Daily care of hair	9

ITEM NO.	TASK	FREQUENCY	ITEM NO.	TASK	FREQUENCY
46	Use of footboards	9	77	Insert Foley catheter male (orderly, with special training)	5
47	Application of restraints	9	78	Give SS cleansing enemas	5
48	Assist patient in and out of bed	9	79	Assists with bedside commode	5
49	Give sitz bath	8	80	Care of patient on special mattress	4
50	Prepare patient for tray	8	81	Administer vaginal douche	4
51	Assist patient with menus	8	82	Apply breast binders	4
52	Give care of fingernails	8	83	Apply scultetus binders	4
53	Report to nurse	8	84	Apply T binders	4
54	Use rubber ring	8	85	Apply ace bandages	4
55	Assist patients to walk	8	86	Apply non-sterile warm, moist dressing	4
56	Pre-operative care	7	87	Count apical pulse	4
57	Transfer patients	7	88	Basic Nursing Care	4
58	Male catheterization (orderly with special training)	7	89	Charting on work sheet	4
59	Male surgical shave (orderly)	7	90	Application of heat cradle	4
60	Administer soaks	7	91	Application of elastic stocking	4
61	Use of sheepskin	7	92	AM Care	3
62	Transports	7	93	PM Care	3
63	Checks valuables	6	94	Make up clothes list	3
64	Post-operative care	6	95	Charting/task performed without comment	3
65	Application of abdominal binders	6	96	Precautionary care (patients on)	3
66	Inserts rectal tubes, R _x for flatus	6	97	Assist with examinations	3
67	Escorts visitors	6	98	Care of dentures	3
68	Use of bed boards	6	99	Care of patient with cast	3
69	Give perineal care (female aides)	6	100	Care of patient with oxygen	3
70	Assists patient with BRP	5	101	Care of patient in oxygen tent	3
71	Assists with physical examinations	5	102	Care of patient with nasal oxygen	3
72	Takes care of flowers	5	103	Administration fleets packaged enema	3
73	Terminal cleaning of patients unit	5	104	Application of heating pad (electric)	3
74	Gives shampoos to patients	5			
75	Use of medical terminology	5			
76	Gives alcohol sponge baths	5			

ITEM NO.	TASK	FREQUENCY	ITEM NO.	TASK	FREQUENCY
105	Application non-sterile, cold, moist dressings	3	135	Assist with personal hygiene of patient	1
106	Application of V pads and tucks	3	136	Skin care	1
107	Make up bassinet	2	137	Collection of specimens	1
108	Make up crib	2	138	Collection of 24 hour specimens	1
109	Chart on graphic sheet	2	139	Collection clean catch specimen	1
110	Chart on patients chart	2	140	Set up oxygen equipment	1
111	Diabetic care	2	141	Use transfer forceps	1
112	Assist with vaginal exam	2	142	Operate water sterilizer	1
113	Assist with rectal exam	2	143	Assist patient with crutch walking	1
114	Fire extinguisher location	2	144	Assist patient with cane walking	1
115	Use of fire extinguisher	2	145	Prepare for communion	1
116	Care of patient with braces	2	146	Administer (established) colostomy irrigations	1
117	Use of electric bed	2	147	Application of slings	1
118	Care of patient with oxygen mask	2	148	Administration of Harris Flush	1
119	Transport patient in bed	2	149	Application of heat	1
120	Assist patient with use of walker	2	150	R _x Application of cold	1
121	Administer retention enemas	2	151	R _x Empty urinary drainage bags	1
122	Application of Peri (perineal) lamp	2	152	Take temperatures, oral, axillary, rectal, child	1
123	Administer vaporizer steam treatment	2			
124	Application of binders	2			
125	Bedmaking	1			
126	Make open bed	1			
127	Clean thermometers	1			
128	Distribute mail	1			
129	Handwashing technique	1			
130	Measure height of patients	1			
131	Use hydrolift	1			
132	Care of infant or child, bath, feed, take temperature, change diaper, weigh	1			
133	Change mattress	1			
134	Nutrition of patient	1			

Airing Negative Feelings

- Goals**
1. To provide the opportunity for the participant to express negative feelings.
 2. To provide the opportunity for the participant to acknowledge and accept feelings as they relate to patient care.
- Time** Variable, one hour suggested
- Material** Paper and pencil for each participant
- Process**
1. The facilitator requests that each participant list in writing what makes him feel embarrassed, repulsed, disgusted, or uneasy about interacting with the ill.
 2. The participant will not sign his list.
 3. The participant will place his list in the basket.
 4. The facilitator will read each slip, followed by group discussion.
 5. The group will react to the data.
- Examples** Emptying a bedpan, caring for an incontinent patient, alcoholic patient, drug addict, etc.

Audio Visual Aids

Goal	To expand the knowledge of the participant, incorporating the use of visual and auditory senses.
Time	Variable
Materials	Films, slides, filmstrips, transparencies, records, video tape, appropriate projectors and records, screens
Process	Before using audio visual aids, consider: <ol style="list-style-type: none">1. Title, year made, color, black or white, length, main subject, organization of film, filmstrip, -- slide tape.2. The use of the aid (i.e., introductory or summary to some specific content unit or procedure; and its appropriateness to the objectives for that class session).3. Use of handout as guide in viewing the aid.4. Assignment of task to demonstrate the main content of the aid.5. Sufficient time for class reaction to the aid.6. Sufficient time for class evaluation.7. Other resources available which reinforce aid used (i.e., text material, clinical experience, student experience).

Filmstrips with sound:

Admission and Discharge

Application of Binders and Bandages

Bed Bath

Blood Pressure

Care of the Dying Patient

Care of the Orthopedic Patient

Cleaning and Assembling Supplies and Equipment

Cleansing Enema

Collecting and Receiving Equipment and Supplies

Feeding the Patient

Female Foley Catheterization

Gastric and Gastrointestinal Decompression

Intake and Output

Isolation Techniques

Lifting and Moving

Local Application of Heat and Cold

Male Foley Catheterization

Nurse Patient Interaction (set of six filmstrips)

Nursing Care During I.V. Therapy

Observation and Charting

Occupied Bed Making

Orientation

Oxygen Therapy

Pre and Post Operative Care

Safety in Medical Facilities

Temperature, Pulse, Respiration

Use of Patient Lifters

Movies

Body Mechanics

General Care

Handwashing in Patient Care

Hospital Sepsis

Inner World of Aphasia

Strokes

Resources:

Robert J. Brody Company
A Subsidiary of Prentice Hall, Inc.
130 Que Street N.E.
Washington, D.C. 20002

General Services Administration
National Archives and Records Service
National Audio Visual Center
Washington, D.C. 20409

Ro-Com Division of
Hoffman-La Roche Inc.
Nutley, New Jersey 07110

Train-Aide
Glendale, California 91201

Trainex Corporation
Garden Grove, California 92642

Brainstorming

- Goals**
1. To generate an extensive number of ideas or solutions to a problem by suspending criticism and evaluation until a later processing time.
 2. To process the results of the brainstorming.
- Time** Approximately one hour for example illustrated.
- Materials** Pen and paper for each group, chalkboard, chalk, or newspaper and felt markers, movable chairs.
- Process**
1. The facilitator asks the participants to form small groups of approximately six. Each small group is asked to select a secretary.
 2. The facilitator asks the groups to form circles with their chairs. He provides pencil and paper for each secretary and asks him to record every idea generated by the group.
 3. When the groups are ready to begin, the facilitator explains the ground rules as follows: "There will be no criticism during the brainstorming phase; all ideas are encouraged as they may trigger other, more practical ideas for someone else; quantity is desired."
- Phase I** 4. The facilitator announces the problem to be solved.
- Phase II** 5. When the generating phase is completed, the facili-

tator notifies the groups that the ban on criticism is over and asks them to evaluate their ideas and select their best ones.

Phase III 6. The facilitator then asks participants to return to one large group. Secretaries will act as spokesmen and will take turns listing their ideas on newsprint or chalkboard. Participants are asked to pyramid or combine ideas that might be used together.

Phase IV 7. The facilitator writes the final list of ideas on chalkboard or newsprint, and the group is asked to rank order them.

Example Potential accident producing conditions.

Crisis Behavior

Goals	<ol style="list-style-type: none">1. To observe the behavior of participants in a crisis situation.2. To evaluate the effectiveness of a unit of study.
Time	Variable
Materials	None
Process	<ol style="list-style-type: none">1. The group will simulate a crisis situation.2. The group will also observe its own behavior.3. Group discussion will follow, regarding the effectiveness of the entire group and of its individual members.4. The group will explore ways to achieve a desired effectiveness.
Examples	Fire drill and cardiac arrest.

Crossword Puzzle

- Goal** To demonstrate cognitive familiarity with terminology.
- Time** Variable, depending on complexity of puzzle.
- Materials** Overhead projector, acetate, marker, screen, chalkboard, newsprint, handout sheet.
- Process**
1. The instructor designs the crossword puzzle, using essential terminology employed within the unit.
 2. The crossword puzzle is typed, duplicated, and handed out to group members.
 3. The instructor or a volunteer may reproduce the puzzle on acetate, chalkboard or newsprint for easy viewing.
 4. Group members participate in filling in the puzzle.
 5. Variations
 - 5.1 Individuals may complete the puzzle as an outside class assignment.
 - 5.2 Individuals may develop their own puzzles to share with the group.
- Examples** Terminology, identification of departments or function of equipment.

Crossword
Puzzle

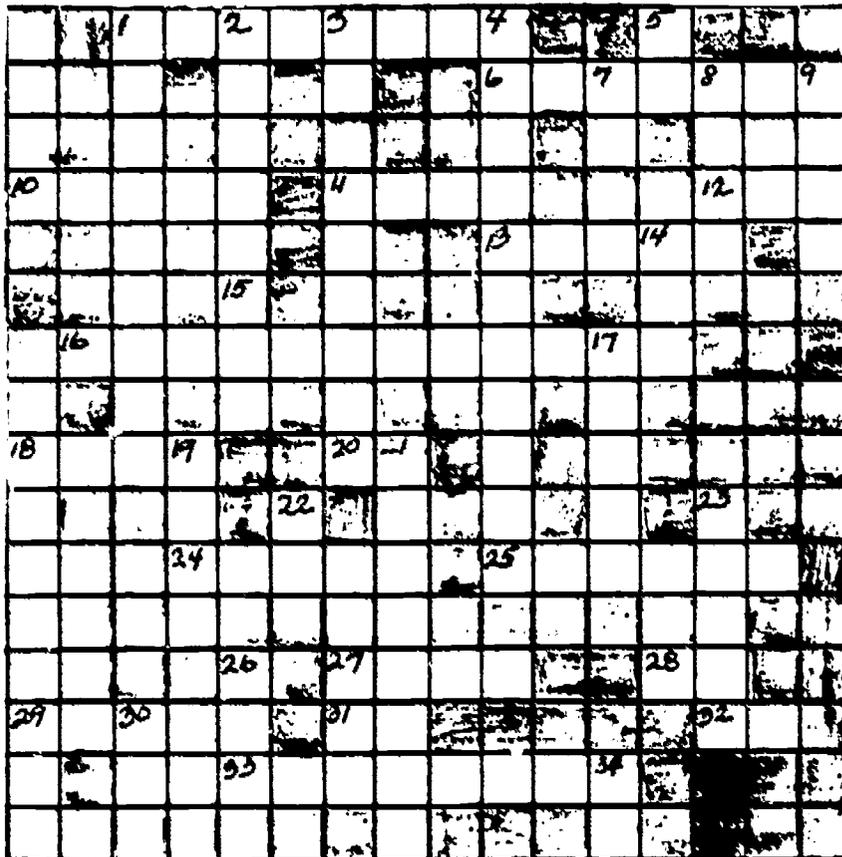
ACROSS

- 1 Inflammation of the heart muscle
- 6 Windpipe
- 10 Expansion and contraction of arteries caused by beating of the heart
- 11 To make hot
- 12 To tangle together in a thick mass
- 13 Combining form for liver
- 16 High blood pressure
- 18 Combining form for suffering of disease
- 20 Abbreviation for Registered Nurse
- 24 To fold sheet at a 45° angle to form a corner on a mattress
- 25 Vomiting
- 27 Abnormal deep stupor occurring in illness
- 28 Abbreviation for operating room
- 29 Abbreviation for out of bed
- 31 Latin for mouth
- 32 Abbreviation for occupational therapy
- 33 To remove by suctioning

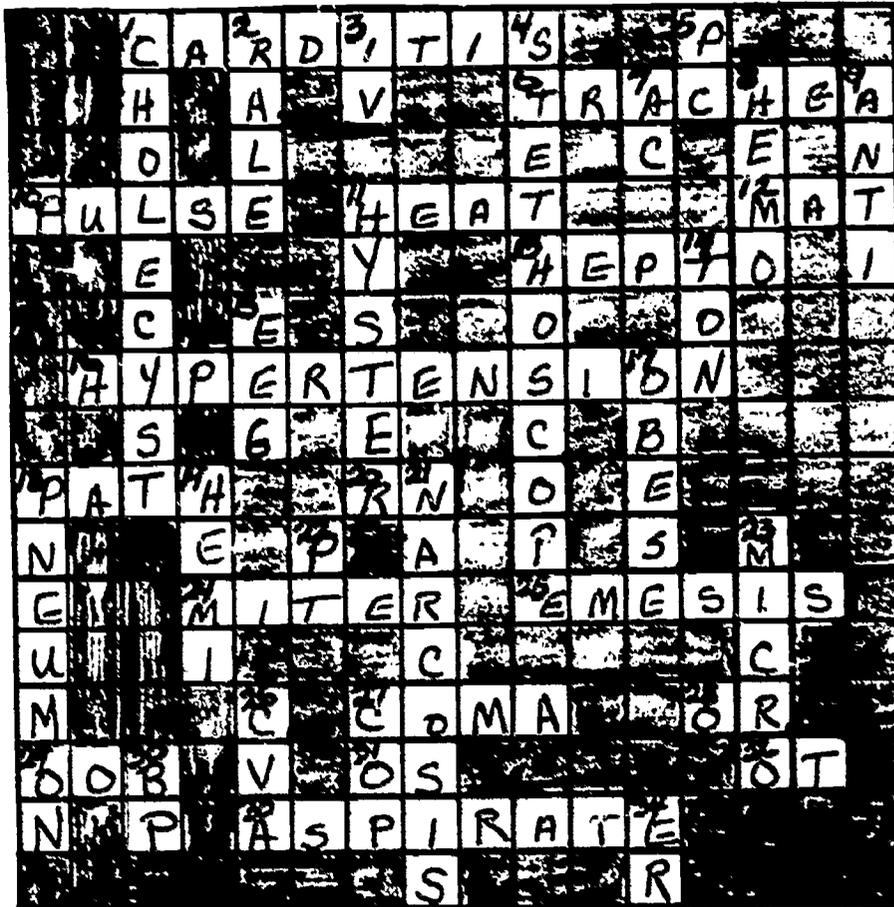
- 3 Abbreviation for intravenous
- 4 Instrument used to listen to sounds within a body
- 5 Abbreviation for after a meal
- 7 Abbreviation for before a meal
- 8 Combining form meaning blood
- 9 Prefix meaning against
- 11 Combining form meaning uterus, womb
- 14 2000 pounds
- 15 Abbreviation for electroencephalogram
- 17 Very fat
- 18 Combining form meaning lung or lungs
- 19 Prefix meaning half
- 21 Condition of deep sleep or stupor caused by an overdose of certain drugs
- 22 Abbreviation for physical therapy
- 23 Combining form meaning small
- 26 Abbreviation for cardiovascular accident
- 27 Policeman
- 30 Abbreviation for blood pressure
- 34 Abbreviation for emergency room

DOWN

- 1 Combining form for all gall bladder
- 2 An abnormal sound accompanying breathing



Solution
to puzzle



Decision Making

Goals	<ol style="list-style-type: none">1. To explore a problem.2. To provide for positive involvement of all participants in a group.3. To identify and separate the important from the non-important; the relevant from the non-relevant within a body of information.4. To arrive at a consensus.
Time	Variable
Materials	Newsprint, chalkboard, felt marker
Process	<ol style="list-style-type: none">1. The group is instructed to decide what facts, examples, statistics, instances, comparisons, contrasts, etc., are necessary for their study of a specified topic.2. The group members then engage in open discussion, genuinely exploring the specified topic.3. Group members may test their ideas for acceptance or opposition.4. Opposing and accepting viewpoints are expressed.5. The group decides if it can come to a consensus.6. The consensus is stated.
Example	Arrive at group agreement on a list of basic human needs.

Demonstration and Return Demonstration

- Goals**
1. To provide correct methodology for an operational procedure or task, to be followed by a repeat of that same procedure or task, by those heretofore unfamiliar with the procedure or task.
 2. To provide supervised practice for an operational procedure or task.
- Time** Variable
- Materials** Variable
- Process**
1. The instructor (or peer teacher demonstrates the procedure or task in front of the group).
 2. As her performs the procedure or task he explains the methodology step by step.
 3. In demonstrating the use of equipment the instructor (or peer teacher) will perform the function so that the entire group sees the correct procedure.
 4. Group members then perform the identical task or procedure in a "return" demonstration with supervision and assistance from the instructor (or peer teacher).
 5. Return demonstration may be employed as a practice.
 6. Return demonstration may be used as an evaluation.

Examples

**Bed making, changing the gown of a patient receiving
an I.V., bed bath, etc.**

Estimating and Measuring

- Goals**
1. To learn the use of measures.
 2. To identify the need for accuracy in task performance requiring measurement.
- Time** Variable
- Materials** For examples given: graduates — scale, tape measure, approximate measurement form.
- Process**
1. The facilitator will ask the group members to estimate a measure.
 2. Group members will then perform the measurement.
 3. Group members will compare their estimate with the exact measurement.
- Example**
1. Participants individually view containers with varied amounts of fluid, estimating their contents.
 2. Participants then measure contents from containers.
 3. Participants then compare their estimates with exact measurements.
- Example**
1. Participants fill containers listed on approximate measurement form.
 2. Participants measure contents of containers.
 3. Participants then compare their measurement with the approximate measurement form for accuracy.
- Example**
1. Participants estimate weight of group members.

2. Participants weigh group members.
3. Participants then compare estimates with weights.

Exploration and Examination
of Equipment

- Goal** To become acquainted with equipment.
- Time** Variable, depending upon complexity of equipment and ability of group.
- Materials** Equipment under discussion in sufficient supply for each member to actively participate during the presentation.
- Process** 1. The instructor requests that each member of the group carefully examine the object or equipment.
2. After an examination period feedback is elicited about possible use, purpose, and care of equipment.

Example I Sphygmomanometer

- Materials** 1. Sphygmomanometer for each student, or one for every two students.
2. Diagrammatic drawing, or picture of a sphygmomanometer.
- 2.1 Slide — projector and screen
- 2.2 Transparency — overhead projector
- 2.3 Chart
- Process** 1. Each student is given a sphygmomanometer.
2. The instructor points out the location of each component part.
3. The student locates the part on the instrument.

4. The instructor verbally explains the operation of each part.
5. The student activates or operates each part.

Example II **Electric hospital bed.**

Materials 1. Electric hospital bed.

2. Printed guide or operators manual.

Process 1. The participant examines and explores the bed following the guide of operators manual.

Flash Cards

Goal To learn (or memorize) symbols, definitions, codes, messages, abbreviations, stems, prefixes, suffixes.

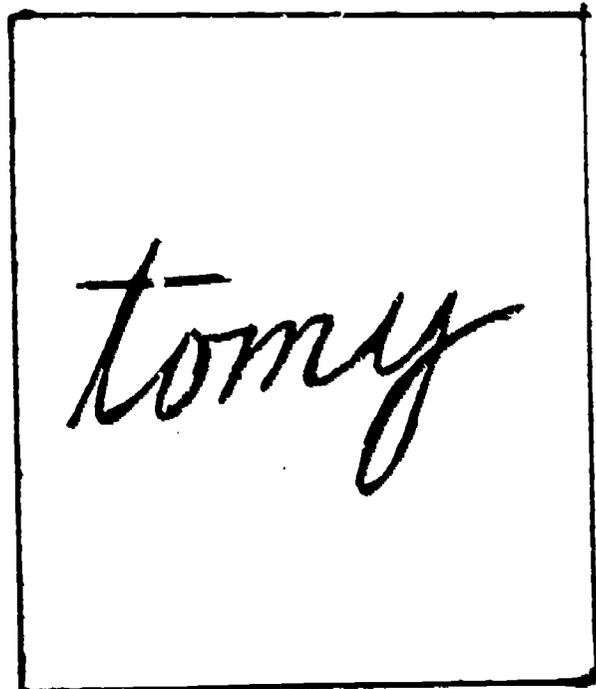
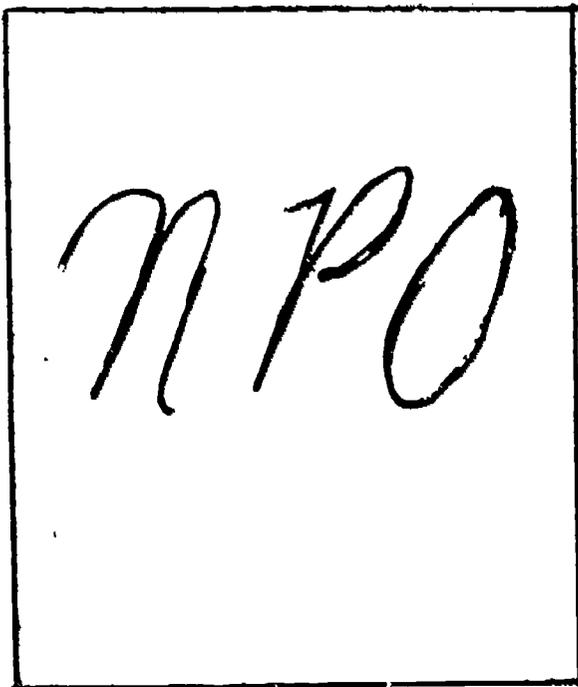
Time Fifteen minutes

Materials Cards with symbols, etc.

- Process I**
1. The group sits in a semi-circle.
 2. The facilitator determines which end of the group will start.
 3. The facilitator holds cards up for all to see.
 4. Participants take turns responding to flash cards.
 5. The facilitator continues in relay fashion with cards and participants.

Process II Dyads

1. One participant flashes cards for another.
2. Reverse roles.



Game Playing

- Goals**
1. To experience a learning situation.
 2. To make learning fun.
 3. To involve all group members in a shared learning situation.
- Time**
- Variable, depending on Unit Objective. If the game is to be combined with site visitation, a longer period should be allowed. If the game is a strategy to learn terminology, it might be timed.
- Materials**
- Any or all of the following: Handouts containing clues; labels with tape or strings; chalkboard or newsprint; map of an area; clock
- Process**
1. The facilitator explains the goal of the game.
 2. The facilitator explains the rules of the game. These vary according to the Unit objective; the learning needs of the group; the level of spontaneity present in the group.
 3. The group then proceeds to play the game.
 4. Upon completion of the game the facilitator may wish to review the entire process.
 5. He may prefer to have the group review (give feedback) on the entire process.
 6. He may wish to reinforce the learning process with a follow-up procedure (i.e., lecturette, evaluation, etc.)

- Examples**
1. "Twenty Questions"; "I've Got a Secret": To identify through question and answer names of objects, equipment, places, etc.
 2. "Pinning the Label On": To match terminology and object by actually attaching the proper labels.
 3. "Charades": To dramatize a procedure by silent acting out.
 4. "Seek and Find": To identify and locate objects, equipment, places within a given area.

Time Twenty to thirty minutes

Materials Worksheet

- Process**
1. The facilitator distributes a worksheet to each participant.
 2. The facilitator instructs each participant to return to his assigned work area to locate the fire safety equipment and devices in his work area, and list them on the worksheet provided.
 3. At a specified time all participants return to the classroom for discussion. As an alternate procedure worksheets may be assigned as homework.

Seek and Find

Goal Know the location of fire safety equipment and devices in your work area.

Rules Find, identify, and list the location of the following equipment and devices in your work area.

AREA	FIRE EXTINGUISHER AND TYPE	SMOKE DOORS	FIRE ALARM	SHUT-OFF VALVES FOR PIPED IN GASES

Greeting and Introductory

Statements

- Goals**
1. To develop communication skills.
 2. To value feelings of self and others.
 3. To discover the impact a greeting has on others.
- Time** Fifteen minutes.
- Material** Tape recorder (optional)
- Process**
1. The facilitator requests that each person approach each member with an opening greeting or statement he might make upon entering a patient's room. (This encounter can be taped).
 2. The facilitator initiates follow-up discussion and sharing of feelings.
 3. The group draws some conclusions about appropriate and non-appropriate greetings.
- Examples**
1. "Good morning, Mr. Appleby."
 2. "What do you want?"
 3. "May I help you, honey?"
 4. "How are you feeling, dearie?"
 5. "Hi, there."
 6. "Is there anything I can do for you?"

Handouts

Goals 1. To provide group members with selected information.
 2. To reinforce a learning experience.

Time Variable

Materials *Handouts for distribution

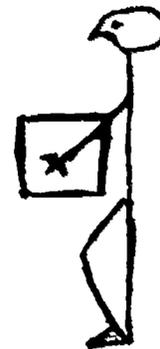
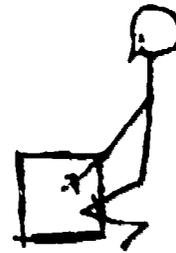
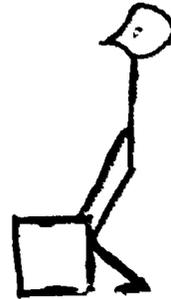
Process 1. The instructor may distribute handouts to group members before, during, or after a lecturette.
 2. The instructor will call attention to the clearly stated information, as reinforcement for the learning experience.
 3. Ideas and reactions will be shared by group members.

Example How to Lift (see next page)

***Note:** Pharmaceutical Companies and Hospital Supply Companies are resources for free handout material.

HOW TO LIFT

When it comes to lifting objects,
Whether heavy ones or light,
You must always be quite certain
That it's done exactly right;
For you never make a movement
Without muscles being tense,
And to keep them lined up properly
Is all that makes good sense.
Now, your back is made of muscles
That are flat and wide — but thin,
And they mustn't pull at angles
Or they'll really hurt like sin.
So you keep your back as upright
As a soldier on parade,
And you let your legs do all the work,
Because that's how they're made.
Your legs, you see, are round and thick,
With muscles shaped the same,
So they will do the heavy work
And never wind up lame.
You merely squat to grasp the load
And keep your back up straight;
You lift by standing upright
And your legs take all the weight.
But remember, when you're lifting,
That the best thing you can do
Is examine what you're lifting
And think the whole thing through.
So you don't find out it's heavy
When it's halfway in the air,
Or you need some good assistance
But it simply isn't there.
No, you look it over closely
And decide before you start
Whether more than your capacity
Is sitting on that cart.
And if it is too heavy,
Or too bulky for just you,
Why, get a hoist! Or get some help!
Be healthy when you're through



Inductive Processes

- Goals**
1. To arrive at reasoned concepts through discussion, consideration, and examination of ideas.
 2. To experience and describe situations before labeling them.
 3. To reason out a sequence of steps in a given procedure.
- Time** Twenty to thirty minutes.
- Materials** Newsprint, felt marker, chalkboard, paper and pencils.
- Process**
1. The facilitator asks the group to arrange their chairs in a circle.
 2. Group members begin a general discussion of a topic or behavioral situation.
 3. The facilitator helps concretize ideas which are generated by group members.
 4. As recognized concepts are generated, the facilitator aids the group in applying labels.
 5. The facilitator or volunteer participant records these concepts on newsprint or chalkboard.
- Example** Becoming aware of human needs.
- Process**
1. The facilitator will ask the group to consider human needs.
 2. The facilitator or a volunteer participant will list those needs expressed by the group.
 3. The group will discuss those stated needs.

4. The group will consider rearranging the list to reflect a rank order.
5. The facilitator will compare the group list with another (e.g., Maslow, Rogers, etc.).

Isolation

- Goals**
1. To become aware of feelings of fear, loneliness, rejection, abandonment.
 2. To empathize with patients who are experiencing these feelings.
- Material**
- A chair, bed or stool, apart from the group.
- Process**
1. The facilitator asks one person in the group to be a volunteer isolate.
 2. This self-selected person then places himself outside of the group, either sitting in a corner of the room, or lying in bed with curtains drawn.
 3. The group proceeds with its regular learning schedule, never referring to the isolated individual.
 4. After the session is completed the isolated individual is asked to rejoin the group.
 5. This individual then may share feedback of his feelings and reactions about being separated from the group.
 6. The group reacts to his feedback.
 7. The group then shares its feelings about having proceeded without the isolate.
 8. General group discussion may follow.
- Example**
- Simulating the feelings of a patient in an isolate unit.

Lecturette

- Goals**
1. To highlight the main points in a unit presentation.
 2. To distill out all extraneous information.
- Time**
- A fifteen minute time frame is ideal before loss of attention occurs.
- Materials**
- A lecturette may be accompanied by the use of chalkboard, newsprint, handouts, worksheets, placards, or any visual aid.
- Process**
1. The instructor prepares a very short pertinent lecture which highlights the most important points of the topic.
 2. The instructor explains to the group that he will spend 15 minutes in presenting his lecture . He emphasizes the necessity for student concentration and absorption for that length of time.
 3. The instructor presents his lecturette pinpointing key words or concepts on chalkboard, newsprint, handouts, worksheets, or placards.
 4. A question and answer session may follow.

Example Lecturette on Fire Safety

FIRE SAFETY

INTRODUCTION: Review objectives as listed in study guide.

ANALOGY: A hospital is like a city. It has under one

roof, conditions that could cause each class of fire. Wood, paper, material, flammable liquids, electrical equipment.

BUILT IN FIRE SAFETY FEATURES:

1. Smoke doors and fire divisions
2. Sprinklers in certain areas
3. Use of flame resistant materials
4. Emergency fire fighting equipment Extirsher every 75 feet.

OTHER PREVENTIVE MEASURES:

1. Fire drills
2. Posted evacuation routes
3. Posted warning signs
4. Most important: alert, aware, concerned employees .
. YOU.

CAUSES OF FIRE:

<u>CAUSE</u>	<u>AREA</u>	<u>PREVENTION</u>
matches-smoking	throughout, esp. patient areas	use caution
misuse of electricity	throughout	no overloading
defective electrical equipment	wherever used	detect and report
oxygen use and equipment	where used or stored	no smoke signs, proper ventilation, dust free
flammable liquids	wherever used	cautionary uses

<u>CAUSE</u>	<u>AREA</u>	<u>PREVENTION</u>
anesthetic gases	where used	cautionary uses, grounding, static free environment

WHAT IS FIRE: Active principle of burning, characterized by the heat and light of combustion.

ELEMENTS FOR FIRE:

Use overlay of the Fire Triangle

CLASSES OF FIRE:

Remember, in the introduction it was stated that under this one roof is housed the elements to produce all classes of fire.

<u>CLASS</u>	<u>WHERE FOUND</u>
A. (Ash) anything that burns and leaves an ash	Throughout, especially in patient area
B. (Boom) flammable liquids, paints, oils, gasoline, alcohol	Maintenance shop, paint shop, kitchen, pharmacy, laboratory
C. (Current) electrical equipment	Throughout
D. (Combustible metals)	Machine shop

<u>TYPE OF EXTINGUISHER</u>	<u>CLASS OF FIRE</u>
A. Water Soda acid Under pressure	A
B. CO ₂	B
C. Dry chemical	C

ABC All purpose. Not available for demonstration.

1973 all fire extinguishers will be red or at least on a red background.

STEPS TO BE FOLLOWED IN THE EVENT OF A FIRE

1. Patient safety
2. Close doors and windows
3. Sound alarm
4. Use portable fire equipment

PATIENT EVACUATION

Method of choice: horizontal in bed. Reasons: ease, safety, place to stay in new area, etc.

Carry: Swing.

Manikins

Goals	<ol style="list-style-type: none">1. To demonstrate a procedure.2. To provide the participant with a model upon which to practice a procedure.3. To develop the self-confidence of a participant in a protected atmosphere.
Time	Variable
Materials	Mr. Chase, Mrs. Chase, Ressusi Annie
Process	<ol style="list-style-type: none">1. The instructor demonstrates a procedure using the manikin.2. Participants, either one at a time, or in dyads or triads, practice the procedure under supervision, until each feels comfortable in carrying out the task successfully.
Examples	<ol style="list-style-type: none">1. Instructor applies an external catheter to Mr. Chase.2. Participants apply an external catheter to Mr. Chase.

Micro Groups - Process Observation -

Feedback and Fishbowling

- Goals**
1. To provide opportunities for sharing feelings, attitudes and reactions.
 2. To provide opportunities for intercommunication within a small group or team.
 3. To grow in awareness of one's affective behavior within a group.
 4. To become aware of one's standard of performance.
 5. To provide opportunities for development of team behavior.
 6. To value development of team behavior.
 7. To develop and practice observation techniques.
- Time** Variable, depending on Unit Objective
- Materials** Newsprint, felt marker, paper, pencil
- Process** The facilitator instructs the large group to divide into 2 (or more) small groups (maximum 5 people).
- Process** Phase I Microgroups with process observation
1. Each group will separately perform a specified task or discuss a specified topic.
 2. One person in each group will be a process observer and will not participate in the group procedures.
 3. The process observer will record his impressions using pre-established criteria (see pre-established

criteria for reporting group process).*

4. Each process observer will report to the members of his small group on his process observation.
5. Process observers may then present their process reports to the entire large group at the end of the session.

Phase II Microgroups with individual feedback

- Process**
1. Each group separately performs or discusses specified task or topic.
 2. Each person records his reactions, feelings and attitudes about the group interaction (see pre-established criteria for reporting group process or collecting feedback).*
 3. His recorded data then becomes his feedback which is shared with group members.
 4. Each member shares his feedback.

Phase III Microgroups with group fishbowl

1. Form an inner and outer circle.
2. Inner circle completes task or interacts.
3. Outer circle process observes members of inner circle.
4. Outer circle shares feedback on how inner circle functioned. (See suggested criteria for reporting group process or collecting feedback).*
5. Reverse positions and repeat.

*Suggested criteria for reporting group process or collecting feedback.

1. Interpersonal communication skills
 - 1.1 Expressing
 - 1.2 Listening
 - 1.3 Responding
2. Communication pattern
 - 2.1 Content (cognitive, affective)
 - 2.2 Direction of communication
 - 2.3 Nonverbal cues
3. Climate
 - 3.1 Feeling tone of group meeting
 - 3.2 Cohesiveness
4. Goals
 - 4.1 Explicitness
 - 4.2 Commitment to agree upon goals
5. Group development
 - 5.1 State of development
 - 5.2 Rate of development
6. Observer reaction

Phase IV Personal feelings about "being handled" i.e., lifted, turned, carried

- Process
1. The facilitator asks for a formation of an inner and outer circle.
 2. The inner circle performs procedures of lifting, handling, turning and carrying each other.
 3. The outer circle process observes members of inner circle.

4. Outer circle shares feedback on inner circle's performance.
5. Circles are reversed.

Modeling

- Goal** 1. To characterize those traits and attitudes which are deemed exemplary.
- Time** This is an ongoing strategy.
- Process** 1. The instructor's behavior exemplifies and characterizes that which he wishes to see his students embody.
2. Behavioral objectives are characterized and communicated by the instructor.

Newsprint

Goal To provide visual dimension.

Time Variable.

Materials *Newsprint, felt marker, masking or scotch tape.

Process

1. Facilitator and/or participant tapes newsprint to wall.
2. Facilitator and/or participant uses felt marker to record feedback or to illustrate data.

Example Recording feedback from group decision-making sessions, fishbowling, inductive processes, brainstorming, etc.

*Note: Newsprint is inexpensive, easily disposed of or retained.
Caution: A two-sheet thickness is advisable when writing with a felt marker.

Nonverbal Communication

Trust-caring; Entry Trust; Contact;

Trust Relaxation*

- Goals
1. To become aware of expressing feelings independent of one's vocabulary.
 2. To express feeling authentically, using nonverbal symbolism.
 3. To focus on nonverbal cues which are often unconscious.

Time Ten minutes

Materials None

Process Facilitator requests nonverbal physical contact among group members.

Phase I In dyads

Example 1 Trust fall

- Process
1. Partners are asked to stand, one with his back turned.
 2. With his arms extended sideways, one falls backwards and is caught by his partner.
 3. Reverse roles.
 4. Share feedback.

Example 2 Trust walk

1. One partner closes his eyes and is led around blind — through and over things.

2. Reverse roles and repeat.
3. Share feedback.

Example 3 Contact

1. With eyes closed, partners stand face-to-face, exploring each other's face very gently with their hands.
2. Share feelings.

Phase II In groups

Example 1 Roll

1. Group participants stand in a tight circle.
2. A volunteer, or a participant who wants to develop additional trust in the group, is rolled around inside the circle. He may be thrown from side to side.
3. Share feelings

Example 2 Milling

1. Participants mill about the room aimlessly, eyes closed, encountering each other without using words.
2. Variations: Eyes open, do not shake hands; or locate your partner, eyes closed.
3. Share feelings.

*Note: Caution is to be employed with all Trust strategies.

Not Listening

- Goals**
1. To allow participants to maximally experience the frustration of not being listened to.
 2. To demonstrate the necessity to listen.
- Time** Approximately thirty minutes
- Materials** Chalkboard, copies of roles to be played
- Process**
1. This exercise is designed specifically as an introductory experience in communications. The facilitator makes a few preliminary remarks about the communications process, highlighting the fact that very few of us really ever listen.
 2. The facilitator asks the group to break into dyads.
 3. The facilitator gives each dyad a copy of each role.
 4. The dyads are given approximately five minutes to assume their respective roles.
 5. When all participants are ready, the role play begins. All dyads should begin the exercise at the same time.
 6. The facilitator goes from dyad to dyad to make sure that participants are not listening to each other.
 7. Where he finds individuals trying to come to accord, he confronts them.
 8. When the facilitator feels that the dyads are experiencing maximal frustration (usually indicated by a sharp sustained increase in the noise level

in the room) he halts the exercise.

9. The remaining time is spent listing and discussing individual responses to the frustration created by this exercise.

The following sets of roles are included as examples; however, it is expected that a facilitator will develop roles which are relevant to the group with which he is working.

Examples Roles

Person I - Patient Care Assistant

You have just graduated from the Patient Care Assistant Program. You are reporting to work on your first assignment, the Extended Care Ward. You have successfully performed all of the procedures taught in the classroom but you have not had the opportunity to develop your skills to the point that you have acquired good organization and speed.

It is the first time you will be "alone" on the ward without your Clinical Instructor. You feel that you are competent and capable but are apprehensive. You have heard that the Charge Nurse is really strict and very demanding. You have a list of questions you feel must be answered before you can start your assignment. You ask her some of these questions.

Person II - Charge Nurse

You have been employed as the Charge Nurse of the Extended Care Ward for ten years. You pride yourself upon the superior care your

patients receive as evidenced by the absence of bed sores and urine or fecal odors. You feel that because you insist upon "going by the book" and running a tight ship the Nursing Office considers your ward as a post graduate course for all graduating Patient Care Assistants. This morning two of your regular Patient Care Assistants called in ill. The Nursing Office is sending one new and inexperienced Patient Care Assistant as replacement. You know from past experience he will be unable to function effectively. You do not have time to answer any questions.

One Word Evaluation

- Goals**
1. To capsule feelings into succinct expressions.
 2. To provide opportunities for spontaneity.
- Process**
1. The facilitator calls an end to the group process of the day.
 2. He asks the group members to think back over the group session and to try to characterize it with a short one or two word evaluation.
 3. Each group member takes a turn speaking (or acting out) his word.
- Examples**
- Wow!
- Interesting
- Frustrating
- Yippee!
- Dehumanizing
- Embarrassing

Periods of Solitude

- Goals**
1. To become aware of self.
 2. To become aware of human problems.
 3. To grow in empathy with problems of others.
- Time** Ten to fifteen minutes
- Materials** Newsprint, felt markers
- Process**
1. A period of silence, to afford the participants an opportunity for contemplation of a problem.
 2. A discussion and sharing of feelings follow.
- Example** Feel the range of emotions if you were to be hospitalized today.
- Process**
1. Period of silence followed by sharing of feelings.
 2. Sharing of feelings.

Placards

Goals

1. To illustrate.
2. To label.
3. To define.

Time Variable.

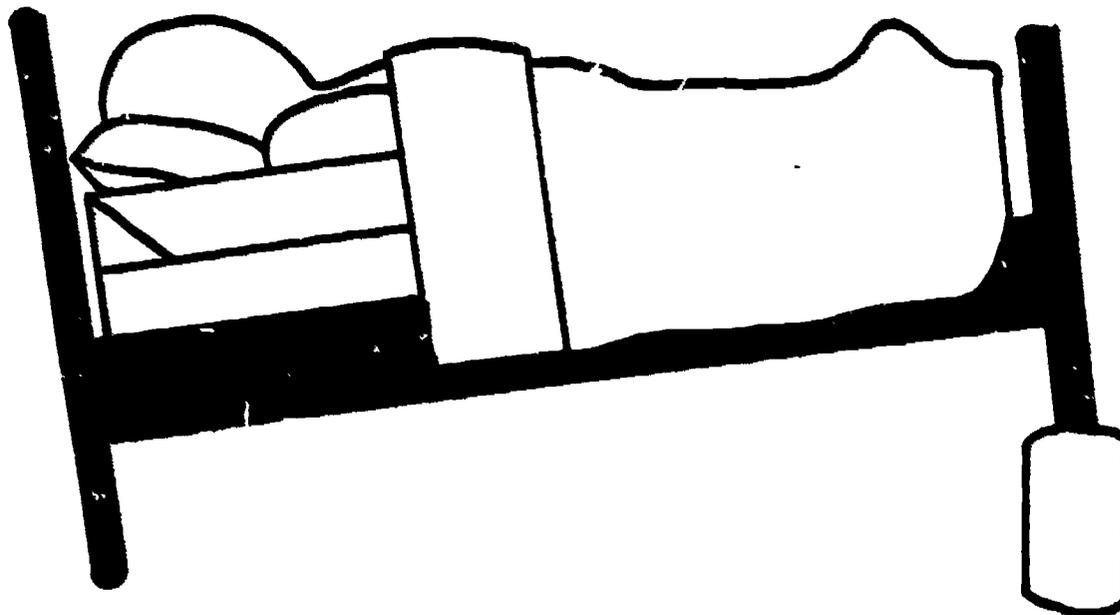
Materials Placards, folders, cards, posters, signs with words and/or pictures or diagrams.

Process

1. Prepare appropriate placard(s).
2. Utilize placard(s) to fulfill objective.
3. Save placards for resources.

Example

SHOCK POSITION



Practice

- Goals**
1. To provide group members with supervised opportunities for trial, error, and success behaviors.
 2. To reinforce the learning of a task.
 3. To reinforce awareness of the importance of a methodology.
 4. To develop competency in task-performance.
 5. To develop self-confidence in task, methodology, and and performance.

Materials Variable, depending on Unit Objective. Materials may include objects necessary for psychomotor performance (e.g., fire extinguishers, thermometers, etc.) and or people (e.g., as in role-play, dyad, or return demonstration situations.)

Time Variable, depending on Unit Objective and degree of correct functioning expected.

- Process.**
1. By use of demonstration, lecture, task analysis, etc. group members are familiarized with the correct performance of a task.
 2. Opportunities are provided for complete psychomotor and cognitive familiarization with the task.
 3. The instructor or peer teacher may demonstrate correct performance.
 4. The instructor as a resource person may answer

questions about methodology of task performance.

Group members may also answer questions for each other.

5. Group members will receive feedback on their performance as they practice a task. Feedback may come from the entire group, from a dyad member, from the instructor or peer teacher, depending on the milieu in which it is used.

Example Any psycho-motor task, i.e., bed making.

II. Make the symbol for either.

Man _____ or Woman _____

III. Write the abbreviation for any three of the following:

1. Laboratory _____

2. Nursery _____

3. Surgery _____

4. Pharmacy _____

IV. Using any two (2) of the following combining forms make a word.

1. ante _____

2. micro _____

3. ology _____

V. Match any seven (7) of the following words to their correct definition. Place the letter of your choice in the space provided.

1. _____ Radiology

2. _____ Urinal

3. _____ Infection

4. _____ Sterile

5. _____ Bacteria

6. _____ Contaminate

7. _____ Antisepsis

8. _____ Cardiac

9. _____ Vomitus

A. Matter ejected from the stomach through the mouth

B. Pertaining to the heart

C. Free from all living organisms

D. Against infection

E. One-celled microorganisms

F. A portable container used for urination, especially males

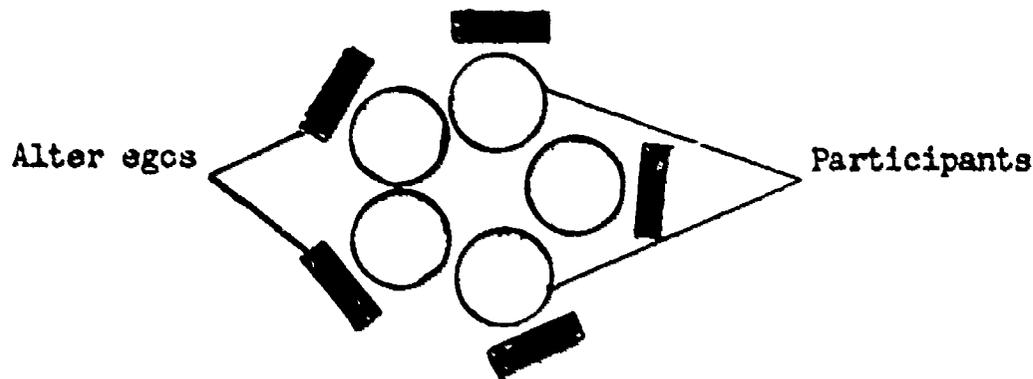
G. Presence of disease in the body produced by microorganism

H. The science dealing with X-Ray

I. To make impure; to infect

Psycho-Drama

- Goal** To become aware of an individual by focusing on him and empathizing with him.
- Group Size** Two groups of four to five participants each. More than one pair of groups may be directed simultaneously.
- Time** Approximately one hour
- Physical Setting** The two groups sit in concentric circles facing inward. Alter egos (observers of individual participants in the inner circle) sit directly across from participants, but in the outer circle, as shown in the diagram:



- Process**
1. The facilitator instructs participants to choose a partner from the outer group. The persons chosen will be the alter egos. The facilitator explains that the alter egos will also have an opportunity to be in the inner circle, and that they will have new partners as alter egos.
 2. Participants who are not alter egos will sit in the inner circle and alter egos will sit in the outer circle directly across from their partners.

3. The facilitator instructs the alter egos to observe their partners and be ready to give them feedback on their behavior in the group. Two dimensions alter egos should emphasize in their feedback will be the partner's effect on the entire group interaction, and the partner's effect on task accomplishment.
4. The inner-circle group will participate in any structured activity chosen by the facilitator.
5. After approximately ten minutes of group interaction, the facilitator will ask the participants in the inner circle to form dyads with their alter egos.
6. Alter egos will give their partners the feedback which they gathered during their observation.
7. The process is then reversed, so that alter egos now become inner-group participants, and former group participants become alter egos.
8. When the process is reversed, new dyads must be formed so that participants are not defensive when giving feedback to their original partners. New dyads also provide an opportunity to establish new relationships.

Example

The inner group is told to play the part of a family confronted with the need to admit their aged parent to a nursing home.

Question and Answer

- Goals**
1. To clarify information
 2. To gain additional information
 3. To evaluate
- Time** Ten to fifteen minutes
- Materials** Chalkboard, newsprint, handouts, worksheets, resources
- Process**
- Phase I**
1. Participant asks question
 2. Instructor or peer answers question
- Phase II**
1. Instructor asks question
 2. Participants answer question
- Phase III**
1. Participant or instructor asks question
 2. Participants find answer in appropriate resource
- Example**
- (Phase III) Participant: "What is the normal range of the heartbeat of a newborn?"
- Instructor: "It has been so long since I've worked with infants, I'm not certain. Let's find the answer in the Obstetrics book."

Resource Person

- Goals**
1. To provide a guest expert to present material relevant to his expertise.
 2. To provide a group with the opportunity of meeting, listening to, and interacting with a person (or persons) who has a particular expertise.
- Time** Variable, depending on Unit, and amount of time the resource person is able to spend.
- Materials** Variable
- Process**
1. In anticipation of a particular unit, the instructor will issue an invitation to a particular resource person to attend a group session, for the purpose of interacting with the group members in a way that is appropriate to the group, the topic, and to the resource person.
 2. The group is informed of the visit, and is told of the credentials of the resource person.
 3. The instructor will introduce the resource person to the group.
- Examples** Strategy implementation
1. Invitation to epidemiologist.
 2. Invitation to members of the clergy.

Role Playing

- Goals**
1. To illustrate and dramatize various aspects of an interpersonal problem.
 2. To encourage understanding of viewpoints and feelings of others.
 3. To discover how people might act under certain conditions.
 4. To stimulate insight.

Time Variable

Materials Variable

Process Personnel involved:

1. The leader is the person who structures roles and directs the entire learning experience.
2. The role players are members from the group who volunteer to play roles.
3. The audience is the remainder of the group who observes the role play. They actively participate in the discussion that follows.

Example Feeding a blind patient

Materials Complete meal on a tray, patient unit or any facility conducive to meal service, blindfold, two players

- Process**
1. The leader structures roles and discusses objectives.
 2. The "patient" is blindfolded and situated for the

meal service (bed or chair).

3. The "Patient Care Assistant" serves the tray and feeds the "patient".
4. The audience observes.
5. After the meal the participants discuss the procedure, stressing feelings and attitudes.

Site Visitation

Goal	To enhance the learning process by experiential observation.
Time	Variable
Materials	Handout structuring the visit
Process	<ol style="list-style-type: none">1. The facilitator makes prior arrangements with the ward or agency for the visit.2. The facilitator conducts the tour, or arranges for a resource person to do so.3. After the tour, the group reassembles for discussion.4. As an alternate or additional strategy, each member may write an essay incorporating highlights of the tour.
Example	Orthopedic ward walk. (see next page)

Orthopedic Ward Site Visitation

- Goals**
1. To observe orthopedic appliances and supplies.
 2. To observe patients in, on, or using orthopedic appliances.
- Objectives** Please:
1. Identify Balkan Frames, Trapezes, skin traction, skeletal traction, casts, braces, slings, crutches and walkers, Stryker Frame, circo-electric bed.
 2. Describe compare and contrast the orthopedic ward with other wards providing patient care.
 3. Recognize the need for diversional activity for the orthopedic patient.
 4. Evaluate the site visitation as a learning experience.
- Time** One hour

Verbal Progression

- Goals**
1. To make distinctions between thoughts and feelings.
 2. To learn to link feeling-feedback to observable behavior.
 3. To practice empathizing with others.
- Time** Thirty minutes
- Materials** Chalkboard or newsprint, felt-tip marker
- Process**
1. The facilitator discusses the objectives of the experience. He asks for small groups to be formed. (Count the number of participants and divide by 3, 4, or 5 to find the number of groups. Participants count off by this number to form relatively heterogeneous groups.)
 2. The facilitator explains that there will be four rounds of communication, and that he will be interrupting each.
 3. Round 1. The facilitator writes on the chalkboard (or on newsprint) the phrase, "Now I see." He indicates that during this round participants are to describe the nonverbal behavior of the other members of their group by statements that begin with the phrase, "Now I see." He illustrates briefly by describing the movements of some nearby participants. Round 1 is five minutes. The facilitator may have to interrupt if participants begin to move away from

have description and start discussions. (A few minutes of processing within the small groups follows each round.)

4. Round 2. The facilitator writes the phrase, "Now I think" on the chalkboard and instructs participants to continue their conversation, beginning each sentence with the phrase, "Now I think." He may wish to give an example. Round 2 is five minutes, with two minutes added for processing.

5. Round 3. The third phrase that participants are to use is "Now I feel." After about two minutes of interaction, the facilitator interrupts to explain that a common behavior in groups that focus on feeling data is for members to confuse thoughts and feelings. He suggests two phrases to avoid in the remainder of this round:

I feel that

I feel like

He indicates that in the next three minutes members are to use the phrase, "Now I feel" followed by an adjective. They are to be alert to the tendency to center on the other person, rather than to express how they are feeling themselves. Round 3 takes approximately ten minutes, followed by three minutes for processing.

6. Round 4. The facilitator posts the fourth phrase, "Now I think you feel." He instructs participants to use this phrase to begin each of their communications to other members during this round. Since this round focuses on

empathic understanding, the conversations will be two-way, to check out the accuracy of the members' perceptions of each others' feelings. Round 4 takes ten minutes, with about three minutes processing.

7. Total group processing. The facilitator chairs a discussion of the results of the experience, focusing on the learning goals specified beforehand.

Warm-Up Introduction Dyad

Goal To facilitate the involvement of individuals in a newly formed group.

Time Fifteen minutes

Materials Pen, paper, file folders

- Process**
1. The facilitator asks the group to select partners.
 2. The partners interview one another for three minutes each, asking
 - 2.1 Name
 - 2.2 Title
 - 2.3 Marital status
 - 2.4 Home town
 - 2.5 "Reason for being here?"
 - 2.6 "Anything else you care to tell?"
 - 2.7 "How do you feel right now?"
 3. Each dyad is asked to join another dyad.
 4. Dyads then introduce each other.
 5. Dyads then merge into one group.
 6. Each dyad member then introduces his partner to the whole group.
 7. The information elicited may be recorded on file folders, which when saved become a permanent resource for the facilitator.

Worksheets

- Goals**
1. To stimulate active participation of the learner.
 2. To promote process memorization.
 3. To act as guide for information necessary to meet objectives.
 4. To identify awareness levels.

Materials Worksheet with pertinent data.

- Process**
1. The worksheet is distributed.
 2. The participant looks up the answers, fills in the blanks, completes the sentences, etc.
 3. The worksheet may be completed during class time or outside of class time.
 4. The completed worksheet becomes a reference or resource.

Example Worksheet for Identification of Awareness

I. Sentence Completion.

1. Other people usually _____.
2. Anybody will work hard if _____.
3. People will think of me as _____.
4. Nothing is so frustrating as _____.
5. My body is _____.
6. Ten years from now, I _____.
7. Terminally ill people make me feel _____
_____.
8. Old people make me feel _____.

9. When I am under pressure, I _____.
10. When I see a young child who is ill, I _____.

II. Record your feelings and reactions in one of two sentences to the following:

(These ten items will later be used as discussion topics).

1. Establishing eye contact with patients.
2. Interrupting patients when there is something important to communicate.
3. Allowing the patient to complain about his/her illness to me.
4. Getting annoyed with patients who students regard as prejudiced people.
5. Whispering to a fellow worker in the presence of a patient.
6. Suggesting that a patient make a trip to the bathroom.
7. Explaining to the patient that beds are made only once a day.
8. Giving an enema to an embarrassed patient.
9. Listening to a patient's "life story".
10. Reassuring a frightened patient.

PATIENT CARE ASSISTANT PROGRAM

CLINICAL EVALUATION SHEET

Student Name _____

Clinical Affiliation _____

Clinical Instructor _____

OVERALL OBJECTIVE:

Given lecture, laboratory experience, supervised clinical instruction, adhering to the Task Identification Evaluation Record, the student will complete the following functions:

Function:	Satisfactory	Unsatisfactory	Dates Performed	Total Times Performed
UNIT II BODY MECHANICS				
1. Move the patient to the head of the bed with co-worker's assistance.				
2. Move the patient to the head of the bed with patient's assistance.				
3. Assist and/or turn a patient on his side.				
4. Place the patient in a sitting position with legs over the side of the bed.				
5. Assist a patient into a wheelchair.				
6. Assist a patient onto a stretcher.				
7. Assist with moving a helpless patient to a stretcher using a lift sheet.				
Comments:				

CLINICAL EVALUATION

Function:	Satisfactory	Unsatisfactory	Dates Performed	Total Times Performed
UNIT III ENVIRONMENTAL SAFETY				
1. Wash hands.				
2. Don and remove isolation apparel.				
3. Serve a tray to a patient in isolation.				
4. Remove contaminated material from isolated unit.				
Comments:				
UNIT IV ORIENTATION				
1. Operate furniture in the patient's unit.				
2. Operate the patient's call system.				
Comments:				

CLINICAL EVALUATION

Function:	Satisfactory	Unsatisfactory	Dates Performed	Total Times Performed
UNIT VI THE PATIENT UNIT				
1. Make an unoccupied bed.				
1.1 Closed				
1.2 Open				
1.3 Postoperative				
Comments:				
UNIT VII PROCEDURES FOR THE COMFORT AND SAFETY OF A PATIENT				
1. Positions				
1.1 Supine				
1.2 Fowlers				
1.3 Semi-Fowlers				
1.4 Side lying				
2. Special Positions				
2.1 Sims				
2.2 Cardiac Sleeping				
2.3 Dangling				
2.4 Legs elevated				

CLINICAL EVALUATION

Function:	Satisfactory	Unsatisfactory	Dates Performed	Total Times Performed
2.5 Trendelenburg				
2.6 Reverse Trendelenburg				
3. Correct placement and usage of:				
3.1 Pillows				
3.2 Bed boards				
3.3 Foot boards				
3.4 Sandbags				
3.5 Cradles				
3.6 Sheep skins				
3.7 Alternating pressure mattress				
3.8 Siderails				
3.9 Posey restraints and supports				
Comments:				

CLINICAL EVALUATION

Function:	Satisfactory	Unsatisfactory	Dates Performed	Total Times Performed
UNIT VIII ADMISSION OF A PATIENT				
1. Proper Procedure for Introducing Self to New Patient				
2. Orientation of New Patient to His Surroundings.				
2.1 Admission kit				
2.2 Room location and number				
2.3 Closet				
2.4 Bathroom				
2.5 Call signal				
2.6 Bed controls (if applicable)				
2.7 Meal time				
3. Fill Out Form and Process				
3.1 Valuables				
3.2 Clothing				
4. Observation of Patient				
4.1 General condition				
4.2 Skin				
4.3 Color				
4.4 Nutrition				
4.5 Unusual odor				
4.6 Emotional state				

CLINICAL EVALUATION

Function:	Satisfactory	Unsatisfactory	Dates Performed	Total Times Performed
4.7 Orientation as to time, place and name				
4.8 Unusual sounds				
5. Vital Signs				
5.1 Temperature				
5.11 Oral				
5.12 Rectal				
5.13 Axilla				
5.2 Pulse (radial only)				
5.3 Respiration				
5.4 Blood pressure				
6. Collect routine urine specimen.				
7. Weigh patient				
7.1 Bathroom scale				
7.2 Balance scales				
8. Recording				
Comments:				

CLINICAL EVALUATION

Function:	Satisfactory	Unsatisfactory	Dates Performed	Total Times Performed
UNIT IX ACTIVITIES OF DAILY LIVING				
1. Prepare patient for meals.				
2. Serve tray.				
3. Assist a patient with meals.				
4. Feed a helpless patient.				
5. Give and remove a bedpan.				
6. Give and remove a urinal.				
7. Measure and record intakes and outputs.				
8. Collect intake and output records at end of the shift and process per agency routine.				
9. Give oral hygiene.				
9.1 Routine				
9.2 To a patient with dentures				
9.3 To a helpless patient				
10. Give the following				
10.1 Complete bed bath				
10.2 Tub bath				
10.21 Porta-tub				
10.22 Century bathing unit				
10.3 Shower bath				
11. Give a back rub.				
12. Care for a patient's hair				

CLINICAL EVALUATION

Function:	Satisfactory	Unsatisfactory	Dates Performed	Total Times Performed
<p>Note: All of the above care is to include, whenever possible, patients with:</p>				
<p>1. Urinary drainage catheters</p>				
<p>1.1 Indwelling</p>				
<p>1.2 External</p>				
<p>2. Gastrointestinal decompression</p>				
<p>3. Oxygen therapy</p>				
<p>4. I.V. therapy</p>				
<p>5. C.V.A.</p>				
<p>6. Diabetes</p>				
<p>6.1 Test urine for S and A</p>				
<p>Comments:</p>				
<p>UNIT XI TREATMENTS</p>				
<p>1. Insert a rectal tube.</p>				
<p>2. Insert suppository.</p>				
<p>3. Give an enema.</p>				
<p>3.1 Cleansing</p>				
<p>3.2 Retention</p>				
<p>3.3 Harris flush</p>				

CLINICAL EVALUATION

Function:	Satisfactory	Unsatisfactory	Dates Performed	Total Times Performed
4. Apply binders and bandages				
4.1 Straight				
4.2 Scultetus				
4.3 T or split				
4.4 Sling				
4.5 Elastic				
5. Application of heat and cold				
5.1 Dry				
5.11 Hot water bag				
5.12 Ice bag, collar, glove				
5.13 Aquamatic K-Pad				
5.14 Heat cradle — lamp				
5.2 Moist				
5.21 Alcohol sponge				
5.22 Sitz bath				
5.23 Soaks				
5.24 Compress				
Comments:				

CLINICAL EVALUATION

Function:	Satisfactory	Unsatisfactory	Dates Performed	Total Times Performed
UNIT XII PROCEDURES FOR DISCHARGE OF A PATIENT FROM A HOSPITAL UNIT				
1. Discharge of a patient from the hospital				
1.1 Care of personal belongings				
1.2 Disposition of supplies				
1.3 Assist the patient to dress				
1.4 Means of transport				
1.5 Accompany patient to car				
2. Give post mortem care according to hospital procedure. See procedure manual.				

SAMPLE EVALUATION RECORD

DEPARTMENT OR PROGRAM: _____ COURSE: _____

STUDENT: _____ CLINICAL AFFILIATION: _____

EVALUATION PERIOD: _____

PLEASE CHECK WHERE APPLICABLE

- | | |
|--|---|
| <p>I GROOMING
Good
Needs improvement
Unacceptable</p> | <p>V INTEREST
High
Low
Fluctuates</p> |
| <p>II INTERPERSONAL RELATIONS
Works well with others
Does not work well with others
Prefers to work alone</p> | <p>VI ADAPTABILITY
Perceptive
Flexible to changing situations
Seldom uses own judgment
Indecisive</p> |
| <p>III INITIATIVE
Industrious
Willing
Indifferent
Indolent</p> | <p>VII ABILITY FOR LEARNING
Above average
Average
Below average</p> |
| <p>IV RETENTION AND APPLICATION OF INSTRUCTION
Carries out procedures as taught
Follows most procedures as taught
Seldom does procedures as taught</p> | <p>VIII ACHIEVEMENT
Satisfactory
Unsatisfactory
Inconsistent</p> |
- IX HABITS OF WORK
- | | | | |
|---------------------------------|-------|---------|-------|
| | Above | Average | Below |
| <u>Regular, punctual</u> | | | |
| <u>Organized</u> | | | |
| <u>Thorough, neat</u> | | | |
| <u>Economical with supplies</u> | | | |
| <u>Careful with equipment</u> | | | |
| <u>Safe working habits</u> | | | |

Please write comments on separate sheet.

Supervisor's Signature

STUDENT SELF EVALUATION

UNIT I

INTRODUCTION

Please circle the number which describes the way you feel about each statement: 5 — Strongly agree

4 — Agree

3 — No opinion

2 — Disagree

1 — Strongly disagree

1. I value myself as a member of the health care team.

5 4 3 2 1

2. I recognize my own needs and attitudes.

5 4 3 2 1

3. I have shared my personal feelings with my classmates.

5 4 3 2 1

4. I have an effect on others.

5 4 3 2 1

5. My facial expressions, my posture, my moods affect others.

5 4 3 2 1

6. I feel comfortable in this group.

5 4 3 2 1

7. I can learn from my classmates.

5 4 3 2 1

8. I can learn from my instructor.

5 4 3 2 1

STUDENT'S EVALUATION OF THE COURSE

YES	NO	SOMETIMES	
—	—	—	1. Did you know what was expected of you by reading the objectives for each unit?
—	—	—	2. Were you aware of how your performance would be evaluated?
—	—	—	3. a) Were the instructions and information presented too fast?
—	—	—	b) Too slow?
—	—	—	4. Were you evaluated on what you were taught?
—	—	—	5. Did you feel free to ask questions?
—	—	—	6. Were your questions answered to your satisfaction?
—	—	—	7. Do you feel that you knew how you were progressing at all times?
—	—	—	8. Were any aspects of the class embarrassing or humiliating to you?
—	—	—	9. Was the material presented in an interesting manner?
—	—	—	10. Did the instructor(s) have personal mannerisms that were distracting to you? If so, please list in space provided for your comments.
—	—	—	11. Do you feel that responses you made in the class were considered important?
—	—	—	12. Do you feel that you were treated as an individual with individual needs?
—	—	—	13. Do you feel that the teaching methods used were varied enough to attract and hold your attention?
—	—	—	14. Do you feel that the instructor(s) were really interested in your progress?
—	—	—	15. Did the instructors make sure that you had mastered a task as outlined?

Student's Evaluation of the Course

YES NO SOMETIMES

- | | | | |
|---|---|---|---|
| — | — | — | 16. Do you feel that you have developed an additional measure of self-confidence in your ability to work at your job as the results of this course? |
| — | — | — | 17. Did the instructor(s) display interest and enthusiasm in the class? |
| — | — | — | 18. Has this course met your expectations? |
| — | — | — | 19. Did you leave some class periods wondering why certain teaching methods were used? |
| — | — | — | 20. Were the instructor(s) available for assistance when needed? |
| — | — | — | 21. Check each of the words that tell how you feel about the course. |

interesting	boring	worthless	dull
cool	fun	useless	square
easy	groovy	exciting	very important
useful	too hard	uptight	

GLOSSARY*

Acceptance of a Value. Belief in the phenomenon, behavior or object.

Acquiescence in Responding. The learner makes the response, but he has not fully internalized the necessity to do so.

Affective Objective. Those objectives which describe changes in interest, attitudes, values; the development of appreciation and adequate adjustment.

Awareness. The learner merely is conscious of the phenomenon.

Behavior. Refers to any visible activity displayed by a learner.

Behavioral Objective. Describes what the learner will be doing; the conditions under which he will be performing; and the criterion for acceptable behavior.

Cognitive Objective. Those objectives which deal with the recall or recognition of knowledge and the development of intellectual abilities or skills.

Commitment to Values. Implies ideas of conviction and deep personal involvement.

Criterion. A standard or test by which terminal behavior is evaluated.

Dyad. Working in pairs.

Facilitator. The leader — the term is used interchangeably with instructor.

Feedback. A process of sharing feelings.

Micro-group. A small group so divided to accomplish a certain task or learning activity.

Modeling. Learning by imitation — or "practice what you preach".

Module. A set of learning activities developed to fulfill a specified purpose or goal.

Newsprint. Large sheets of paper used for recording data.

Objective. An intent communicated by a statement describing a proposed change in a learner.

Peer Evaluation. Evaluation by classmate or co-worker.

Peer Teaching. One classmate teaching others.

Preference for a Value. This behavior implies acceptance and willingness to be identified with a phenomenon; activity seeking or pursuing it.

Psychomotor Domain. Refers to the manipulation of motor-skill task area.

Responding. Doing something to, or with the phenomenon besides mere perception of it.

Satisfaction in Response. A voluntary response is accompanied by a feeling of satisfaction.

Self Evaluation. Evaluation of self against an established criteria; or a reflective internalization.

Student. The term is used interchangeably with participant.

Terminal Behavior. Refers to the end behavior the student should be able to demonstrate at the conclusion of the learning situation.

Valuing. Perceiving the worth of a thing, a phenomenon, or a behavior.

Willingness to Receive. Refers to the positive toleration of a given stimulus; opposite of avoidance.

Willingness to Respond. Implies the capacity for voluntary action.

*Paraphrased from: Bloom et al.; Mager et al.; Pfeiffer and Jones.

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