# A COMPARATIVE ANALYSIS OF TWO TEACHING METHODOLOGIES IN THE ACQUISITION OF KNOWLEDGE IN A NEW NURSING EMPLOYEE ORIENTATION PROGRAM

#### A THESIS

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## DEDICATION

To my parents for giving me a sound basis for my life;

To my sons, Thomas and Brian, for their love;
To my husband, Bill, for his understanding
and love.

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#### CHAPTER 1

#### INTRODUCTION

Many programs are offered by hospitals for the purpose of furthering the educational background of nursing personnel. None is more important than that of the orientation process. This program serves to present the institution to the new employee and serves as a basis for all of the future experiences that employee will have in that agency.

Orientation programs vary from institution to institution and from department to department within an institution. The methodology for the program is based upon the perceived needs of the particular group of new employees. Most of these programs do focus on presenting the policies, procedures, and goals of the agency. Many of them present the new person with his/her job description. Many of them do little more than have the employee sign the necessary papers and then have that person begin to work.

Whatever the program there are times when evaluations of effectiveness are deemed necessary. How well the information is being disseminated to new personnel is of concern. Assessments may be undertaken in several ways. One way is to administer a test. Another might be a personal

interview. Still another method is by observation of the employee in the actual work setting. Whatever the method, the ongoing evaluation is important.

Instructors need to constantly be seeking new and better ways to present course content. This is especially important in the orientation process. This information is often the same for long periods of time and is presented at frequent intervals. There is the danger that the presentation will become rote and lacking stimulation both for the instructor and for the new employee.

Literature offers several different choices of tools, materials, and teaching models which are considered as innovative. Often, newer methods are not adopted due to several factors. They may require extra preparation time, and therefore, are not considered as cost effective. Instructors may not be comfortable with the newer methods and will not try them. Time to present a certain body of knowledge may be limited, and thus limits the choice of presentation methods.

Institutions need to evaluate educational programs and seek these new methods. Evaluation of the results will demonstrate whether or not the added cost and time are worth the effort. Better results in a more knowledgable nursing staff will help to sell the idea of utilizing creative teaching.

It was the aim of this study to develop and present an educational program through a different technique and to evaluate the results in the acquisition of knowledge.

## Problem of Study

The problem in this experimental design was:

What effect, if any, does a self-directed learning module have on the acquisition of knowledge in a new nursing employee orientation program?

## Statement of Purposes

The purposes of this study were:

- To develop a self-directed learning module
   based on the content of a current new nursing
   employee orientation program in a health care
   institution;
- To implement the learning module with a group of new nursing employees;
- To test for acquisition of knowledge the group completing the self-directed module and a group being oriented utilizing the present methodology;

4. To compare the two groups as to acquisition of knowledge immediately following the completion of the orientation.

## Justification of Problem

The presentation of orientation programs is a major function of institutions. The Joint Commission on Accreditation of Hospitals lists orientation as one of its requirements. Standard V under "Nursing Services" reads as follows, "There shall be continuing training programs and educational opportunities for the development of nursing personnel." (Joint Commission on Accreditation of Hospitals, 1978, p. 106)

Interpretation of this standard states that "the program for staff education and training must include orientation, inservice, and a program for continuing education." (Joint Commission on Accreditation of Hospitals, 1978, p. 106) The interpretation further states that:

Orientation programs should be planned in advance and should include at least a written outline designed to ensure thorough orientation for each new nursing employee. All new personnel should be made aware of the policies, goals, objectives, and procedures of the nursing service and of the hospital, as well as their job descriptions, duties, and work areas. (Joint Commission on Accreditation of Hospitals, 1978, p. 107)

Many writers on nursing management express the importance of the inclusion of orientation in an educational program. DiVincenti (1972, p. 158) states that "orientation is essential for all new employees in a hospital regardless of the position to be filled or the educational background and experience of the individual." Swansburg (1976, p. 346) tells us that "it is the employer's responsibility to orient newly employed nurses."

We are told by Thora Kron (1976, p. 154) that "orientation must precede assignment of duties and that any orientation must include information concerning not only the physical set-up of the station and the hospital, but also what the person's specific duties and responsibilities are."

Gerould in an address before the AORN Congress in Houston, Texas, states that:

Orientation is the first step in any staff development or inservice education program. It's got to be. Orientation is a tool--a tool for getting the individual started on the job just as quickly as possible by acquainting him with his surroundings.

Orientation is a process. It's a process by which new employees are provided the opportunity to meet their fellow workers and be introduced to the history, philosophy, purposes, and policies of the institution. It's also a process by which they are made aware of their responsibilities to their co-workers, to their patients, to the institution, and surely to themselves. (1972, p. 37)

Agreement seems to exist as to the importance of presenting an orientation program as part of the overall educational program for nursing personnel. What about the methods of presentation? Stopera and Scully (1974, p. 390) think that "most hospitals orient most nursing personnel in the same standard and traditional way."

Stopera and Scully (1974, p. 390) describe two approaches to orientation. One assumes that the nurses need to know very little, and so they are brought on the job and given a minimum amount of time to prepare for their new roles. The other method assumes that the nurse knows nothing and is, therefore, given a review of everything in grand style. Both programs overlook the capabilities of the individual and assume certain things. These programs are set up based upon the needs of the "average" practitioner, and the nurse with more or less ability is overlooked.

The new graduate is particularly susceptible to the negative effects of efforts to develop one program for all.

Variations within the three types of basic nursing programs make it even more difficult to identify common learning needs of new graduates that a centralized program can meet. These factors affect registered nurses' attitudes toward learning and should influence the approach to teaching. (Tobin and Wengerd, 1971, p. 940)

Tobin (1976, p. 35) further tells us that the new graduate needs more than minimal orientation to be able to function on the job. She also says that:

Articles about orientation, internships, and other special programs are becoming more prevalent. There is indication in the literature that service agencies are more accepting of the fact that the new graduate preparation is theoretical rather than practice-oriented and that regardless of the programs they graduated from, a period of time is needed to develop their practice skills. Some agencies, however, continue to place them in situations they are unable to cope with and educators continue to disregard that there is a discrepancy and refuse to consider the problem one of mutual concern (1976, p. 35).

A review of nursing literature indicates that brief orientation programs were developed to meet nursing service needs in maintaining adequate staffing. Typical orientation programs for new staff nurses now attempt to bridge the gap between nursing education and nursing service. (Fitzhugh, Kiernan, Morissey, and Waugh, 1974, p. 72)

Orientation programs have taken on new forms in some institutions. These programs have been internships of varying lengths with varied results. Other programs continue as in the past, presenting policies, procedures, etc., in methods that best suit the instructor. This study was undertaken to address the possibility of a better learning climate with more involvement by the new nursing employee.

## Theoretical Framework

The basis for the development and presentation of a self-directed learning module was that of the theory of the adult learner by Malcolm Knowles. Knowles is a proponent of a theory of adult learning that takes into account the unique characteristics of the adult learner.

The theory of the adult learner is also called the "andragogical theory." This theory is based upon four assumptions. The first of these is that as a person grows and matures, his self-concept moves from one of total dependency to one of increasing self-directedness. second assumption is that as an individual matures he accumulates an expanding reservoir of experience that causes him to become an increasingly rich resource for learning and at the same time provides him with a broadening base to which to relate new learnings. The third assumption is that as an individual matures, his readiness to learn is decreasingly the product of his biological development and academic pressure and is increasingly the product of the developmental tasks required for the performance of his evolving social roles. The fourth assumption is that children have been conditioned to have a subject-centered orientation to most learning, whereas adults tend to have a problem-centered orientation to learning (Knowles, 1973, pp. 45-49).

Knowles presents an adult educational program based on the aforementioned assumptions. The andragogical model is a process model which is contrasted to the content model most frequently used by traditional educators. Differences exist in that, traditionally, the teacher or trainer decides in advance what knowledge or skills will be presented, sets the content into units, selects the resources for presenting the material and develops a plan as to what sequence the units will be presented. This is the content model (Knowles, 1973, p. 102).

In the contrasting andragogical model, the teacher prepares a set of procedures to involve the learner in a process made up of the following elements: 1) establishing a climate conducive to learning; 2) creating a mechanism for mutual planning; 3) diagnosing the needs for learning; 4) formulating program objectives (which is the content) that will satisfy these needs; 5) designing a pattern of learning experiences with suitable techniques and materials; and 6) evaluating the learning outcomes and re-diagnosing learning needs. This is the process model (Knowles, 1973, p. 102).

The difference is not that one deals with content and the other does not; the difference is that the content model is concerned with transmitting information and skills,

whereas the process model is concerned with providing procedures and resources for helping learners acquire information and skills (Knowles, 1973, pp. 102-103).

The table on the following page shows the comparison of the two models and their underlying assumptions (Knowles, 1975). (Figure 1)

## Assumptions

For the purpose of this study the following assumptions were made:

- Participants would complete the entire selfdirected module within the two-week time frame.
- Participants would receive directions for the completion of the learning module only from the investigator.

# Hypothesis

The hypothesis tested was:

The type of teaching-learning methodology utilized in an orientation program for new nursing personnel will have no significant effect upon the acquisition of knowledge.

Please read as poles on a spectrum, not as black-and-white differences) By Malcolm S. Knowles, Department of Adult and Community College Education, Morth Carolina State University, January, 1975.

	ASSUMPTION	s I	PROCESS ELEMENTS					
About	Teacher-directed Self-directed Learning Learning		Elements	Teacher-directed Learning	Self-directed Learning			
Concept of the learner	Dependent personality	Increasingly self-directed organism		Formal Authority- oriented Competitive	Informal Mutually Respectful Consensual Collaborative			
Role of			Climite	Judgmental	Supportive			
learner's experience	To be built on more than used	A rich resource for learning	Planning	Primarily by teacher	By participative decision-making			
Readiness to learn	Varies with levels of maturation	Develops from life tasks and problems	Diagnosis of needs	Primarily by teacher	By mutual assessment			
Orientation to	Subject-centered	Task - or problem-centered	Setting goals	Primarily by teacher	By mutual negotiation			
Motivation	External rewards and punishments	Internal Incentives, Curiosity	Designing a learning plan	Content units course syllabus logical sequence	Learning projects Learning contracts Sequenced in terms of readiness			
learning is bas Greek words pai	d (meaning child) and	nich teacher-directed label "pedagogy," from the agogus (meaning guide) lence of teaching children.	Learning Activities	Transmittal techniques Assigned readings	Inquiry Projects Independent study Experimental techniques			

The body of theory and practice on which self-directed learning

is based is coming to be labeled "andragogy," from the Greek

word aner (meaning adult) -- thus being defined as the art and

science of helping adults (or even better, maturing human

beings) learn.

.

By mutual assess-

ment of self-

collected evidence

Primarily by

teacher

Evaluation

## Definition of Terms

For the purpose of this study the following terms were defined:

- Orientation that phase of staff development conducted for the purpose of acquainting the new employee with the policies, goals, procedures, and physical environment of the agency and assisting the new employee in the adjustment to a new role.
- 2. Knowledge a particular body of information.
- 3. <u>Self-directed learning</u> the study of a body of information at the time and pace set by the individual learner.
- 4. Nurse a graduate of an associate, diploma, or baccalaureate program of nursing who is either registered or awaiting registration as a result of having passed the State Board Examination and is a newly employed individual.
- Teaching the dissemination of a particular body of information.
- 6. <u>Learning</u> the acquisition of a particular body of information evidence of which is demonstrated by a testing process.

## Limitations

The limitations of this study were:

- The group which was called the control group was taught the current orientation program content by an instructor other than the investigator.
- The nurses had varied levels of educational background.
- The ability to learn by self-directed methods varied.
- 4. Some of the new employees may have had previous exposure to the content of the orientation.

## Delimitations

The investigator had certain controls over the study.

These were:

- The self-directed learning module was designed by the investigator.
- The participants were instructed to seek
   assistance with the self-directed learning
   module only from the investigator.

- The self-directed module was completed within two weeks.
- 4. Materials pertaining to the self-directed learning module were made readily available during the two weeks of the study.

## Summary

The preceding chapter includes the introduction to the study, the problem which was studied, the justification of the problem for study, a theoretical framework, assumptions about the study, the hypothesis, definition of terms, and the limitations of the study.

#### CHAPTER 2

#### REVIEW OF LITERATURE

The orientation process is an integral part of staff development. Because of its importance, there has been some degree of attention focused on the process and the characteristics of the new nursing employee placed in an orientation program.

There are a variety of teaching methodologies available for presenting educational programs. Of interest are the creative methods which address the special needs of the adult learner. In light of the unique needs of the adult learner, a self-directed method of learning was considered. In this study the method utilized was a programmed module.

## Adult Learner

Many articles which appear in the current literature focus on the needs of the adult learner. Verduin, Miller, and Greer (1977, p. 191) state that the position being advocated by researchers and practitioners in many different fields of education is an emphasis on behavior and the competency of students after instruction.

Competency indicates an emphasis on "the ability to do" as opposed to a more traditional emphasis on "the ability to demonstrate knowledge." This idea proposes that the adult student can perform the given behavior when the instruction is complete. Competencies are viewed as knowledge, skills, and behaviors in any field of endeavor, whether cognitive, psychomotor, or affective (Verduin, Miller, and Greer, 1977, p. 193).

Knowles (1977, p. 11) states that "to really understand adult behavior, this is the central dynamic: the adult's need to be self-directing, to be treated with respect." According to Adams (1977, p. 94), "if a man is viewed as an active, autonomous, and reflective being, the educators recognize that a learner has the capacity and need to assume responsibility for his own continued learning."

Because the adult learner has a need to be concerned for his own learning, the role of the educator shifts.

Tobin (1979, p. 75) tells us that adult educators should be more concerned with facilitating learning and freeing the learner to learn rather than burdening him or her with structured content and formats.

Competency-based learning is oriented to the learner. Emphasis shifts from the teacher and the teaching process to the learner and the learning process (Verduin, Miller, and Greer, 1977, p. 133).

According to Tapper (1977, p. 72) many educators will not change their traditional techniques to meet the needs of the learner. Most teachers teach as they were taught, and this usually means a form of the traditional lecture-discussion format (Tapper, 1977, p. 72).

Miller (1972, p. 323) presents a different picture of today's educators. She says:

Read what today's educators are doing. Are they teaching? No! Are they training? No! They are educating, that is they are facilitating learning. How do these differ? Teaching is defined by Webster as "showing how to do something, giving lessons to, etc." He defines training as a coordinating, as "to toilet train a child" or "to discipline or condition to perform tricks." Education embodies both; it stresses the development of latent faculties and powers within the learner. Educating allows the learner to develop at his own rate and in his own way. When we are educators, we are facilitators of learning.

If, in fact, educators are to be facilitators of learning, then methods other than the traditional lecture and discussion format become important. A teaching technique which is worth consideration for the adult learner is the self-paced, independent study. This will be addressed in the following section.

## Self-Directed Learning

In the planning of educational programs for the learner who wishes to be a more active participant, the process of self-directed learning has many positive elements. Schmidt (1977, p. 4) states that independent study has a definite appeal to the adult learner. He knows what he needs to learn from the outset, can proceed at his own pace, and receive immediate feedback of what he has learned.

Self-paced learning provides increased learning opportunities, increased cost effectiveness as a result of improved use of learner and instructor time, and collaborative involvement in staff development by the employee, the nurse manager, and support personnel (Huntsman and Thompson, 1977, p. 3). Keeling and Noriega (1978, p. 31) say that they find the independent study modules provide an appropriate, specific, and practical approach to encourage professional development of the practicing nurse in a medical center.

One form of self-directed learning is programmed instruction. Bigge (1971, p. 140) defines programmed instruction as "a system of teaching and learning within which pre-established subject matter is broken down into small, discrete steps and carefully organized into a logical sequence in which it can be learned readily by the student." It can be completed at the student's own pace.

Programmed instruction involves the learner in self-learning and provides indicators of progress and achievement. Lessons are available when the student wishes to do them and can provide a high yield of results in terms of learning (Coye, 1979, p. 138).

Woodruff (1979, p. 117) tells us that the concept of self-directed learning and the use of self-instructional packages are becoming part of many orientation programs. The nurse is not a passive learner, but helps to identify his/her own learning needs and seeks ways to meet these needs.

Tapper (1977, p. 73) states that self-directed learning is the highest form of learning. Every teacher's wish should be to get the learner from teacher-directed to self-directed learning. This is not easy and not all learners will achieve this. "One of the reasons it isn't easy is that many teachers believe that they must tell the learner what he will learn." (Tapper, 1977, p. 73)

Schmidt and Quaife (1974, p. 38) recommend that the principles of adult education--self-direction, mutual negotiation, and mutual evaluation--be applied to the orientation process. They suggest that the orientee help to plan the experiences he/she will need during the orientation phase.

Price (1977, p. 120) states that "a good inservice staff development program requires the active participation of the learner.

Schmidt (1977, p. 4) talks about the content of an independent study unit. She says that such a module should be self-contained, self-paced, be written in small steps, and provide immediate feedback. The module should contain objectives, terminology, concepts, procedures, a post-test, and a performance checklist to test the abilities of the individual to apply the knowledge on the job.

Schmidt (1977, p. 4) says that studies show no difference between effectiveness of self-paced and instructor-mediated learning, but that the modular system seems more efficient. She says that a comparison made on one section of material shows the cost at approximately five dollars per nurse for self-instruction, as opposed to ten dollars per nurse for the same material in the classroom.

Certain elements are needed for the success of the process of self-instruction. Hutchins (1968, p. 4) says these are motivation, orientation, sequential presentation of the content, concentration, persistence, and independence. Hutchins (1968, p. 4) further states that:

The motivated individual wants to learn because he likes to learn, because he wants to be able to do the work he has chosen to do, because he wants to accomplish more in the work that he is doing, or because he wants to be able to earn more in his work.

The concept of self-directed learning was considered as a possible methodology for staff development programs. That phase of staff development of interest in this study was orientation.

## Orientation

Woodruff (1979, p. 117) defines orientation as the process whereby a new staff member is introduced to a particular work setting. The American Nurses Association guidelines for staff development give as the components for orientation: inclusion of means by which new nursing staff members are introduced to the philosophy, goals, policies, procedures, role expectations, physical facilities, and special services in a specific work setting.

Belanger (1978, p. 18) states that "the primary objective of the orientation program is to provide resources for the staff nurse to move smoothly into the hospital's nursing care system. The orientation program should be conducted prior to the new employee's assuming responsibilities for the positions for which they were employed (Woodruff, 1979, p. 117).

Metzger (1978, p. 33) refers to the process of effective placement as induction and orientation. He says that these processes begin on the first day of employment. He gives four objectives which he considers necessary for an induction and orientation program to suceed. These are:

- To reinforce the employee's confidence in his ability to cope with a new work assignment;
- 2) To communicate complete and detailed conditions of the person's employment;
- 3) To inform the person of the rules and regulations surrounding employment;
- 4) To instill in the employee a feeling of pride in the institution.

Hilliard (1974, p. 1) states that the primary concern of the inservice orientation program is to enable the professional nurse to function at her highest level of competence and accountability in the delivery of quality nursing care to the hospitalized patient.

The individual needs to be considered when looking at orientation programs. Consideration of personal goals and encouragement of sense of prestige and responsibility in each orienting nurse will add to success of the program (Crockett, 1978, p. 21).

Lebo (1978, p. 2) suggests the use of present employees to help with new employees, but he says that "the best way to break in a beginner is to pair him or her with someone who has only recently mastered the tasks. Such a person realizes

where mistakes are likely to occur and misunderstandings arise. This is similar to the "buddy" system suggested by others.

Some orientations use skills checklists as methods to assess how well new employees can function. Frank and Powell (1975, p. 45) devised a detailed list with the new graduate in mind. They ultimately utilized such a checklist for all levels of personnel.

Orientations take various forms and the lengths are about as varied as the institution conducting them.

Benner (1979, p. 75) quotes an educator as saying "ideally inservice and orientation should be continuous and on-going.

I'd say a minimum of three months. I don't think anybody should expect a new employee to function immediately, and there isn't anybody but hospitals that expect this!"

Most of the literature aimed at the orientation process agree to its importance. Some suggest specific schedules and content. There is variation as to the ideal length of the programs. All elements have to be weighed based upon the unique characteristics of the individual institution and the needs of the nursing employees.

## Summary

The adult learner is of prime concern in the preparation of educational programs in the work setting. The adult seeks more independent study. Therefore, a self-directed module was designed based on current content of an orientation program. The importance of a comprehensive orientation program for new nursing employees seems evidenced by the interest of the many writers in the field.

#### CHAPTER 3

#### PROCEDURE FOR COLLECTION AND TREATMENT OF DATA

The study undertaken was an experimental design.

The approach was to utilize a control group and an experimental study group of new nursing employees. According to Kerlinger (1973, p. 375) an experimental design is one in which the investigator manipulates at least one independent variable.

This investigator changed the methodology for the presentation of a program content from basically a lecture-discussion format to one of self-directed learning utilizing a manual. The manual was based upon the content of the orientation program. The tools were developed by this investigator.

Instructions were given to the study participants as to the use of the manual, materials made available in a classroom setting, and the participants left to complete the orientation on their own. Assistance was given only as necessary.

## Setting

The setting for this study was a 500-bed multispecialty non-profit hospital and clinic. The institution is located in a Central Texas city with a population of 40,000 to 50,000 persons. The institution receives patients from several states and several foreign countries. Permission for this study was obtained from the institution prior to initiation of the study (Appendix A).

## Population and Sample

The population from which the sample was drawn was new nursing employees hired on two consecutive hiring dates at the study institution. The criteria met were: 1) Being a registered or graduate nurse; 2) being a new nursing employee. Six nurses were asked to volunteer from each of the groups of new nursing employees.

# Protection of Human Subjects

Written permission for the study was obtained from the Texas Woman's University, the Human Rights Committee of the Texas Woman's University, and from the study institution.

Each participant received an explanation of the study and signed a consent form to participate in the study (Appendix B).

## Instruments

There were two tools utilized in this study.

## I. Programmed Orientation

## Reliability

Internal reliability of the orientation manual was established by the skills and knowledge of this investigator. The investigator is employed by the study institution and has a theoretical and clinical background in education and orientation. External reliability will need to be established by replication of this study utilizing the manual.

## <u>Validity</u>

The validity of the manual was established by the study participants as they completed the lessons. All materials written and approved by the study institution were available and a key in the manual was provided for immediate feedback as to the correctness of the manual content. Unclear content was reviewed by this investigator and changes implemented in the manual throughout the study.

#### II. Examination

## Reliability

Internal reliability of the examination was established by the skills and knowledge of this investigator. The investigator's background shows experience with test construction. Replication of this study utilizing this exam will be necessary to establish external reliability.

## Validity

Face validity of the examination was established by an expert panel composed of three members who have experience with examinations.

Member 1: The first panel member is a registered nurse with a Masters Degree in nursing. He has a background in teaching in a four-year nursing program and has been working in a clinical setting as a cardiovascular nurse clinician. He has written test items and has taken a course in test preparation.

Member 2: The second panel member is a patient educator with a Bachelors Degree in Health Sciences with a specialty in patient education. She has several years of experience in the patient education field. She is presently a

Master's degree candidate. She works with test items as part of the patient education programs.

Member 3: The third panel member is a registered nurse with a Bachelors Degree in Nursing Education. She is presently working in Quality Assurance. She has thirty years of nursing experience, most of which has been in the study agency. She has teaching experience and has written test items.

The examination was reviewed by each of the panel members and changes incorporated into the final tool. Each panel member was briefed as to what the investigator was attempting to measure.

## Data Collection

This study was designed to compare two teaching methodologies in the acquisition of knowledge by new nursing employees in a health care institution. The data were collected utilizing two groups of new nursing employees.

The programmed orientation manual was written following review of the content of the present general orientation program. This program involves use of several types of media and activities which were included as parts of assignments to be completed by each participant in the experimental study group.

An examination was written to cover the content in the orientation program. The examination was utilized both as the pre-test and the post-test.

Two groups of new nursing employees were asked to participate in the study. The study was confined to registered or graduate nurses. One group, known as the control group, completed the orientation in the current format. The difference was that they were asked to write a pre-test and a post-test.

The second group, known as the experimental group, completed the orientation utilizing the programmed module.

Materials were placed in a classroom for the two weeks of the study. This investigator asked that she be approached for questions on the completion of the module.

Both groups were given the pre-test and the post-test. These were scored with the use of a key. Scores were determined based on a right minus wrong basis. Tests were coded to protect the anonymity of the study participants.

# Treatment of Data

The tests were scored based on a key. Two sets of scores were obtained, and these compared for significant differences in the scores obtained by the participants following the two different methods of instruction.

## Treatment of Data

Originally, the statistical test to be applied to the data was stated to be the <u>t</u>-test to determine differences between mean scores. When the final data were tallied, it was determined that this test was not appropriate to the sample size and the results. The sample was small, leaving room for error, and the scores were not paired due to the fact that several of the pre-tests on the experimental group had to be discarded due to incomplete answers. The samples of scores could not be paired due to the fact that the exact same group did not complete both tests. The scores are considered as a group, and the statistical method applied was the Mann-Whitney Rank Sum Test which compares differences in average performances. The scores were compared as a group on the pre-tests, post-tests, and compared against each other.

#### CHAPTER 4

#### ANALYSIS OF DATA

The following chapter describes the results of this study. Included are a detailed description of the sample utilized, a description of the findings, and a summary of the study findings.

# Description of Sample

Two groups of new nursing employees participated in this study. The numbers starting and completing the study changed in the course of the two-weeks of the study.

The population of this study was to include an arbitrary number of six registered or graduate nurses who were newly hired on two consecutive hiring dates. The hiring dates selected were December 31, 1979, and January 14, 1980.

Six nurses agreed to participate in the study on December 31, 1979. One dropped out on the first day due to the fact that she would not be attending the entire orientation. The other five completed the orientation, but only four wrote the final examination.

The group on January 14, 1980, contained twelve registered or graduate nurses. All agreed to be part of the study group. Two resigned prior to the completion of the orientation. Ten nurses completed the programmed module. Eight wrote the final examination.

All the study subjects met the specified criteria of:

1) Being a registered or graduate nurse, and 2) Being
a new nursing employee.

# Findings

The results of the test scores were tabulated and placed on tables (See Tables 1 - 4.) The scores were then compared as follows: 1) The pre-test and post-test scores of the control group; 2) The pre-test and post-test scores of the experimental group; 3) The scores of the two groups on the pre-test; and 4) the scores of the two groups on the post-test.

The question addressed was whether or not a significant difference would be shown in the amount of knowledge acquired urilizing two different teaching methodologies.

The rank sums were determined utilizing the Wilcoxon-Mann-Whitney statistical test. The  $\underline{R}$  values were obtained for the samples through the use of a computer and with the assistance of a statistician.

Utilizing a formula from Natrella (1966, p. 16-10) the  $\underline{R}$  values were obtained. The utilization of a table from Natrella (1966, p. T-80) helped this investigator determine the level of significance. The table contained the listing of the  $\underline{R}$  values with a statement as to their significance.

The tables on the following pages show the raw scores received by the participants on the pre-tests and post-tests. The scores were compared relating both against their own scores and the scores of the other group.

TABLE 1

COMPARISON OF PRE-TEST SCORES OF THE CONTROL AND EXPERIMENTAL GROUPS

Raw	Scores	(possible = 75)
Control Group		Experimental Group
32 36 36 32 46		32 44 41 37 43
Summed Ranks	: 23	32
Smaller Samp	le = n <sub>1</sub> =	- 5
Larger Sample	e = n <sub>2</sub> =	: 5
Total Sample	= n =	: 10

Take the summed rank of the smaller sample which equals R = 23.

$$R^{1} = n_{1} (n + 1) - R$$
 $R^{1} = 5 (10+1) - 23$ 
 $R^{1} = 5 (11) - 23 = 32$ 
 $R_{05} = 17$ 

Both R and  $R^1$  are greater than the  $R_{.05}$  of 17; therefore, there is no significant differences in the pre-test scores at the 5% level.

TABLE 2

COMPARISON OF POST-TEST SCORES OF BOTH GROUPS

Raw Scores (p	possible = 75)
Control Expe	erimental Group
60 54 59 67	70 64 64 68 52 63 66
Ranked Sums: 19.5	58.5
Smaller Sample = $n_1 = 4$	
Larger Sample = $n_2 = 8$	
Total Sample = $n = 1$	2
Summed rank of smaller	sample = $R = 19.5$
$R^1 = n_1 (n + 1) -$	R
$R^1 = 4 (12+1) -$	19.5 (round off to 20)
$R^1 = 4 (13) - 20$	= 32
$R_{.05} = 14$	
Both R and $\mathbb{R}^1$ are great	er than the $R_{.05}$ of 14;

Both R and  $R^1$  are greater than the R<sub>.05</sub> of 14; therefore, there is no significant difference in the post-test scores at the 5% level.

TABLE 3

COMPARISON OF PRE-TEST AND POST-TEST SCORES OF THE CONTROL GROUP

	Raw	Scores	(p	ossible	=	75)
Control Group				rimenta roup	1	
32 36 36 32 46				60 54 59 67		

Summed Ranks: 15

Smaller Sample =  $n_1 = 4$ 

Larger Sample =  $n_2 = 5$ 

Total Sample = n = 9

Summed rank of smaller sample = R=30

$$R^{1} = n_{1} (n + 1) - R$$
  
 $R^{1} = 4 (9 + 1) - 30$   
 $R^{1} = 4 (10) - 30 = 10$   
 $R_{.05} = 11$ 

 $R^1$  is smaller than  $R_{.05}$ , therefore showing that there is a significant difference between the pre-test and post-test scores at the 5% level.

<sup>(</sup>Natrella, 1966, pp. 16-10 states that "if either R or  $\mathbb{R}^1$  is smaller than or is equal to R  $(n_1, n_2)$ , conclude that the averages of the two products differ.)

TABLE 4

COMPARISON OF PRE-TEST AND POST-TEST SCORES OF THE EXPERIMENTAL GROUP

Raw Scores	(possible = 75)
Control H	Experimental Group
32 44 41 47 43	70 64 64 68 52 63 66
Summed Ranks: 15	76
Smaller Sample = $n_1$ =	= 5
Larger Sample = n <sub>2</sub> =	= 8
Total Sample = n =	= 13
Summed rank of smalle	er sample = R=15
$R^{1} = n_{1} (n + R^{1} = 5 (13 + R^{1} = 5 (14))$	1) - 15
$R_{.05} = 21$	13 = 43

R is smaller than  $R_{.05}$ ; therefore, there is a significant difference between the pre-test and post-test scores at the 5% level.

## Summary of Findings

The findings in this study show that new nursing employees can be taught a body of knowledge concerned with orientation, and that the use of a lecture-discussion format versus a self-directed learning module will have no significant result in the acquisition of knowledge.

The results show no significant differences in the comparison of the control and experimental group on the pre-test scores at the 5% level. The results show no significant differences on the comparison of the control and the experimental group on the post-test scores. Because there were no significant differences on the pre-test scores, we can conclude that the groups were comparable. Because there were no significant differences in the comparison of the scores on the post-test, there is support for the null hypothesis that the type of teaching-learning methodology utilized in an orientation program for new nursing personnel will have no significant effect upon the acquisition of knowledge.

The significant differences by both groups on the pretests and post-tests support the conclusion that knowledge was acquired by each of the two study groups.

#### CHAPTER 5

#### SUMMARY OF THE STUDY

The problem addressed in this study was what effect, if any, does a self-directed learning module have on the acquisition of knowledge in a new nursing employee orientation program? The hypothesis tested was that the type of teaching-learning methodology utilized in an orientation program for new nursing personnel would have no significant effect upon the acquisition of knowledge.

# Summary

The study was carried out in the following manner.

The contents of the current new nursing personnel orientation program was reviewed. This program content was placed in a programmed format. Objectives were written for each phase of the program. Each instruction sheet contained assignments and mastery items to review acquisition of knowledge and provide immediate feedback.

The tour of the organization was set up in the form of a scavenger hunt. Each new employee had a list of geographical areas to visit. Each area had a ticket for each employee.

Each employee returned a set of tickets to show completion of the objective.

The manual was provided with a key with the answers for all questions. Also, the material was made available throughout the two weeks. The instructions were to check the key for feedback or to review the material.

The process of the study was carried out in the following manner. Two consecutive groups of new nursing employees were selected. The groups were given explanations of the study, what would be required of them, the necessity of completing the examinations, the method by which the examinations would be coded to protect them, and finally, their permission was obtained in writing to participate in the study.

The control group was asked to write the pre-test and post-test only, and were oriented in the lecture-discussion format. The experimental group was asked to complete the orientation utilizing the programmed manual. The problem and hypothesis were tested utilizing a written examination.

# Discussion of Findings

Because there is no significant difference in the knowledge acquired in the two teaching-learning methodologies, a choice of methods is available for the dissemination of the information. This presents an opportunity to utilize

different methods, and the probability of the same results occurring.

The module could be used when there are small groups or when the instructor would not be available to do the program. This could free the instructor to do other things. This could prove to be a cost-containing method for the institution.

## Conclusion and Implications

As this investigator proceeded with the experimental phase of this study, it became apparent that several problems were presented as a result of the methodology utilized.

The foremost issue was that not enough pre-planning was done to alert everyone to a change in the usual format for the orientation. Some very negative feelings could have been avoided with a more detailed explanation. This investigator did visit with key contact persons involved with each of the study participants. Others wished to be included in the explanation.

The hiring process was not ideal for talking to the new employees prior to their reporting on the job. The list is not given to the education division until the Friday before the new employees start. This has been necessary due to the need to hire nurses when they are available. Some of the

nurses could have been called at home, but this investigator did not do this as planned. One of the results when the group was presented with the manual was that one person decided that she could not do orientation in this manner, and did, in fact, leave.

All participants were told that if, at any time, they wished to drop out, they would be able to do so, and this investigator would work with them on the material. A major problem which was not planned for is that only one set of some of the material was available, and it was too costly and too time-consuming to reproduce the material. There are several slide/tape presentations, videotapes, and films.

The classroom setting proved distracting. It was not conducive to doing several parts of the module at the same time. The participants solved part of the problem by working in small groups when viewing films, etc. Also, the room was needed for other activities, and the material had to be shifted to alternate quarters.

The proximity of new employees in the classroom caused many social situations and difficult for others to work. This presented both positive and negative results. While making it more difficult to complete the material, a peer group relationship was formed, and on the final day, the group went out together for a brief social gathering.

The participants were seen by this investigator more than participants are usually seen in the classroom. The informality presented an opportunity for sharing. The need to be available proved to be stressful. Also, the group was much larger than anticipated, and it was difficult to have enough time to help each participant.

Due to the amount of material required in the present orientation, much time was spent filling in material that was not included in the manual or providing a more extensive explanation of the material.

Some of the material is only available on audiovisuals. The investigator had to be available to operate the equipment or the new employee had to be able to operate the equipment. This was not always well coordinated.

Time for the pre-test was limited, and some of the participants did not complete the questions. Comparisons cannot be made of improvement in scores on an individual basis.

As a group the averages are higher.

Not all participants were able to adapt to the flexible schedules. Some did not spend enough time with the orientation materials because they were assigned patients to care for on the units. Others spent the first two to three days, and completed all of the material. This has advantages and disadvantages. Those who are able to absorb a large amount of information at one time learn well by long classroom

sessions. Those who learn by receiving small amounts of material at one time had the opportunity to spend shorter periods in the classroom with reinforcing experiences on the units.

The module made the participant an active part of the learning process. Not all nurses were ready to take on this role. This may have accounted for some of the anxiety and anger at the format of the orientation. Other factors helped to increase the anxiety level. Many of the areas have programmed unit orientations. These modules were given to the new employees on the first day. Before the day was over the tasks added a tremendous load to employees who were starting a new job, often living in a new area, meeting new people, and for the new graduates, facing the state board examinations within a few weeks.

Perhaps a closer examination of all the forces acting upon the new employee would help to lessen the trauma the new person experiences and would make the transition to a productive employee smoother and more rewarding.

Although adequate time was allowed on the job, some of the new employees felt compelled to take the material home to complete. No negative remarks were told directly to this investigator, but feedback from the units was that the manual was an added burden. There were some minor errors in the manual. The participants were quick to point these out. This had the positive effect of showing alert employees who want to get the correct information.

## Recommendations for Further Study

As a result of the findings in this study, it is recommended that:

- 1. The manual be utilized with smaller groups of new employees or when there are only one or two new employees hired on at a given time.
- 2. The module be utilized again with a more extensive preparation of materials, supervisors, buddies, directors, rooms, etc.
- 3. The module be revised and used for those parts of the orientation which require reading and not the use of all types of equipment or acquire equipment more easily operated.
- 4. The module be used as a study guide in conjunction with the regular orientation format.
- 5. Some type of check-off system be used to assure completion of all instructions.

- 6. The study be repeated and the test be given to a larger sample.
- 7. A record be kept of the exact amount of time spent in each methodology and determine which method is more cost-effective.

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# APPENDIX A

PERMISSION FORM FROM
INSTITUTION

# 53 TEXAS WOMAN'S UNIVERSITY

COLLEGE OF NURSING DENTON, TEXAS

DALLAS CENTER
1810 Inwood Road
Dallas, Texas 75235

THE

STUDY AGENCY

HOUSTON CENTER
1130 M.D. Anderson Blvd.
Houston, Texas 77025

### AGENCY PERMISSION FOR CONDUCTING STUDY\*

GRANTS TO Lois Ruth Rolston
a student enrolled in a program of nursing leading to a Master's Degree at Texas Woman's University, the privilege of its facilities in order to study the following problem:
A Comparative Analysis of Two Teaching Methodologies in the Acquisition of Knowledge in A New Nursing Employee Orientation Program
The conditions mutually agreed upon are as follows:
1. The agency (may) (may not) be identified in the final report.
<ol> <li>The names of consultative or administrative personnel in the agency (may) (may not) be identified in the final report.</li> </ol>
<ol> <li>The agency (wants) (does-not-want) a conference with the stu- dent when the report is completed.</li> </ol>
<ol> <li>The agency is (willing) (unwilling) to allow the completed report to be circulated through interlibrary loan.</li> </ol>
5. Other:
Date 12/24/7-7 Signature of Agency Personnel
For Rutt Roboto Agnin Keegan Signature of student Signature of Faculty Advisor
*Fill out and sign three copies to be distributed as follows: Original

Student; first copy -- agency; second copy -- T.W.U. College of Nursing.

# APPENDIX B

PERMISSION FORM FROM

HUMAN RESEARCH REVIEW COMMITTEE

## TEXAS WOMAN'S UNIVERSITY

### Human Research Committee

Name of Investigator: Lois Rut	h Rolston Center: Dallas
Address: 106 Ottoway Drive	Date: 1/28/80
Temple, Texas 76501	
Dear Ms. Rolston:	
Your study entitled A Com	parative Analysis of Two Teaching
Methodologies in the Acquisition of Orientation Program has been reviewed by a commit-	
Review Committee and it appear	rs to meet our requirements
in regard to protection of the	e individual's rights.
Please be reminded that	both the University and the
Department of Health, Educati	on and Welfare regulations
require that written consents	must be obtained from all
human subjects in your studie	s. These forms must be
kept on file by you.	
Furthermore, should your	project change, another
review by the Committee is re	quired, according to DHEW
regulations.	
o	incerely,
S	0 1 1
	Estelle & Kurt
C	Chairman, Human Research Review Committee

at\_\_\_\_Dallas

#### 56 APPLICACION TO BUMAN NECESHOL COMMITTEE

Subject: Research and Investigation Involving Humans.

This abbreviated form is designed for describing proposed programs in which the investigators consider there will be justifiable minimal risk to human participants. If any member of the Human Research Review Committee should require additional information, the investigator will be so notified.

One copy of this statement and a specimen Statement of Informed Consent should be submitted at least two weeks before the planned starting date to the chairman or vice chairman on the appropriate campus.

Title of Study:	A Compara	tive Analysis of Two Teaching Methodo	logies in
	the Acqui	sition of Knowledge in A New Nursing	Employee
		on Program	
Chairman of Thesis	s Committee	Mrs.Lynn Keegan	
Thesis Committee Members:		Dr. Anne Gudmundsen	
		Dr. Betty Rudnick	
Graduate Student:	_Lois Ru	th Rolston	
Estimated beginning	ng date of st	ady: 12-31-79	
Estimated duration	n: <u>O</u> n	e month	
		is to be sent: 106 Ottoway Drive	
Temple	e, Texas 76	501	
****			

5.	If the proposed study includes the administration of personality
	tests, inventories, or questionnaires, indicate how the subjects
	are given the opportunity to express their willingness to parti-
	cipate. If the subjects are less than the age of legal consent,
	or mentally incapacitated, indicate how consent of parents,
	quardians, or other qualified representatives will be obtained.

(See Attached)

signed	Program Director	Date 12-16-79
Signed	das Rut Rotto	Date 12-16-79
Signed	Dean, Department Head, Director	Date 12-16-79
Date re	ceived by committee chairman:	

1. Brief description of the study.

This study will address the subject of teaching methodologies in general orientation of new nursing employees to a health care institution. The question is whether more knowledge can be obtained by self-directed learning or by the present method which is primarily lecture and teacher-presented. The sample groups will be approximately six in the control and in the study group. This number is arbitrary and may be altered by the number of new nurses hired during the time of the study. The ages of the participants will range from twenty to forty-five years. Many of the new nursing employees are new graduates. These participants will be newly hired employees and will be asked to participate in the study.

2. What are the potential risks to the human subjects involved in this research or investigation?

The human participants asked to be involved in this study will be under no risk of physical harm. The only risk is that the new employee may fail to acquire all the knowledge his/her supervisor deems essential. There may be an increased anxiety level due to being a new employee and being asked to participate in a research project.

As far as the grades on the tests are concerned, these will be coded and names of individuals and their scores will not be released.

- Steps to be taken to protect the rights and welfare of the individuals involved.
  - a. Explanations will be given to the new employee, to his/her supervisor and director. This explanation will be that this individual is a part of a study group and how he/she is completing the orientation. The control group will be taught in the current manner. The difference will be that the participants will be asked to complete a pre-test and a post-test.
  - b. Since all information that any one person seems "necessary" can not possibly be covered in the orientation program, the investigator in the study will serve as a liaision with the persons involved to discuss any problems which arise.
  - c. Test results will be made available to supervisors, directors, and study participants collectively. The tests will be coded, thus protecting the anonymity of the study participants. This explanation will be given to participants at the beginning of the study. Further, the persons will be instructed that failure of the final examination does not consitute a threat to job status, nor does it offer an advantage in that it will be used to increase salaries or other benefits.
  - d. No pressure will be placed on the new employees to participate in the study, but the investigator will make an honest appeal to them to help her in the study.

Due to the present position of the investigator, this appeal will be handled with care to assure volunteer participation. (Position is Director of Education and Research in the study institution)

- 4. Method for obtaining informed consent.
  - a. If possible, a person-to-person interview when the person is hired for the purpose of explaining the study and obtaining consent.
  - b. If person-to-person contact is inconvenient at the time of hiring, a phone call will be made to each of the new employees and the explanation given over the phone and an appointment made to see the person to get the consent signed.
  - c. If for any reason the participants wish to withdraw from the study, he/she may do so at any time. This will be explained, also.
  - d. The explanation to each potential participant will be given as follows:

"Hello, I am Lois Rolston, a graduate student at Texas Woman's University. I am doing a thesis as part of my requirements for a Master's Degree in Nursing. I am doing a study on the teaching methodologies used in the general orientation program. I want to see whether or not more knowledge is acquired by one method over the other. I will compare the present method with a self-directed learning module which I have developed.

I ask your help in participating in this study. This study will be carried out during your first two weeks on the job. You will be given time at work and no outside work is required unless you so desire. You will be asked to complete a written pre-test and a written final examination. Your test papers will be coded, therefore you will not be identified. The results will be reported collectively to Supervisors, Directors, and the Assistant Administrator, Nursing. As a participant you will have access to your grades. The results of the test will in no way affect your benefits.

This study is a serious attempt to find the most effective ways to disseminate information to new employees. Your cooperation and concerted effort will render the study more valid.

I will be available to assist you at any time. I ask that you seek assistance only from me concerning instructions in the self-directed module."

5. Due to the study group being new employees, care will be taken not to exert undue pressure to participate in the study. There is the possiblity of them feeling pressure to participate. The investigator will appeal to them for assistance, but be careful to explain that if at any time they choose to withdraw, this is acceptable. All persons will be of legal age of consent.

#### 62 TEXAS WOMAN'S UNIVERSITY

### Consent to Act as a Subject for Research and Investigation:

I have received an oral description of this study, including a fair explanation of the procedures and their purpose, any associated discomforts or risks, and a description of the possible benefits. An offer has been made to me to answer all questions about the study. I understand that my name will not be used in any release of the data and that I am free to withdraw at any time.

	SIgnature <sup>,</sup>	Date
	Witness	Date
Certification by Person Exp	The second secon	
	t I have fully informed and explain of the listed elements of informations.	
	Signature	Date
	Position	
Witness	Date	

# APPENDIX C

GENERAL ORIENTATION

PROGRAMMED INSTRUCTION

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SECTION I

# GENERAL ORIENTATION PROGRAMMED INSTRUCTION

#### Foreword

Hello and welcome to your new job. As you embark upon this new phase of your chosen career, it is our goal to assist you with the adjustment to your new role. You will be involved in an orientation program during the next two weeks. Because we think of you as a self-directed, motivated individual, we are making you responsible for a large part of your own orientation. You will be given guidelines and instructor assistance along the way, but it will be up to you to present evidence that you have in fact acquired a particular body of knowledge needed for your new role.

In the following pages you will find broad objectives which will serve as guides to assist you in learning about policies, procedures, and the physical environment in which you will work. You may work at your own pace, but you are asked to complete the work within two weeks. At the end of the two weeks you will be asked to write a final examination based upon the content of this orientation program.

#### Instructions

- 1. Take the pre-test and turn it in to the instructor conducting this course. Do not be concerned if you miss several items. Grades will not be recorded. This test will be compared with the grade you make on the final examination.
- 2. Begin the course with a tour of the institution. The tour is best completed early in your experience so you will know your way around the institution. It is in the form of a scavenger hunt. The individuals at the particular locations have been informed that you will report there and expect to collect a card stating you have found that location.
- 3. Proceed through the lessons in any sequence you see fit, keeping in mind those items which may be more important because you will utilize them much sooner in your patient care.
- 4. In each lesson complete the mastery items and check yourself on your answers in the back of this manual or go back and re-read the materials.
- 5. Questions are to be directed to the course instructor only. She is available in Nursing Education between the hours of 8:00 A.M. and 4:30 P.M. Monday through Friday, or may be reached at home, 773-1039.
- 6. Materials and resources will be placed in classroom S-250 throughout the day during the two weeks of your orientation. The I.V. Therapy portion of the two weeks will not be included in the final examination as it has its own test.
- 7. You may write the final examination at any time, but it is recommended that you complete all lessons first.
- 8. When you are ready to take the final examination, please contact the course instructor and make arrangements to turn in all materials and receive the test. The exam must be taken in the classroom and no notes will be allowed.

## Special Instructions

- 1. The morning of the first day you will be required to attend another section of the orientation process conducted by the Personnel Department. This is necessary for the completion of the forms, etc. which are necessary for your processing into the organization.
- 2. When you are released from the Personnel portion of the orientation, you will be given instructions by the nursing instructor as how to proceed with the following portions of your program. This will take place in classroom S-250.
- 3. Rotation Agreement:

You will find in your materials a rotation agreement. The use of this agreement was explained to you when you were hired. This agreement is required. It provides a permanent record that you have had our rotation system explained to you. Please sign and return to the instructor or to the Nursing Office. (Any questions about this agreement are to be directed to the instructor.)

4. Address and Telephone List:

This is required so that we will be able to call you if you are needed to work, etc. It is up to you to keep this number current in the Nursing Office. If you have an unlisted number and desire it to be kept a secret, please make note of this fact and we will not give out the number.

5. Time cards:

Cards will be signed by the instructor on the first day and you may clock out. Thereafter, follow the procedure you will find in your learning module.

- 6. You received a pink orientation check-list from Personnel. This is required by them. We will make special arrangements to see that this form is completed.
- 7. TB Skin Tests:

These tests are required as part of your employment screening. You are to go by the Employee Health Nurse's Office on Wednesday morning and have the test read. Where is this office? You will find it while you are on your tour!

8. Welcome to your new city.

There are several materials in your packet that tell you about where you will be living. These materials are provided for your enrichment and we hope assistance. The contents will not be included in the exam.



#### Institution Tour

Objective: At the completion of this lesson, you will be able to locate geographical areas of the institution.

#### Assignments:

- 1. You will be asked to find your way around the institution. You will be given maps of the areas. The tour will be in the form of a scavenger hunt. You must locate certain areas and collect a card from a representative in that area to show that you have been there.
- 2. Preview the maps you have been given.
- 3. Complete the tour at your own pace, but it is recommended that it be the first lesson because one of your goals will be to get to your own unit.
- 4. You have been assigned a buddy and that person will give you a card on your unit when you reach there.
- 5. You may ask directions, but you will learn better if you find your own way.
- 6. You will be expected at the locations, so do not be afraid to ask personnel for the cards to verify your success.
- 7. The cards are to be returned to the instructor to demonstrate completion of the objective.
- 8. Call the instructor at Extension 2884 or 2886 if you get lost or confused.
- 9. Good luck! You may begin.

## Complete the following:

1. Locate the Ground Floor and report to the following locations:

Physical Therapy Occupational Therapy Personnel Department Photography Desk-G Patient Education Employee Health Library Central Service Mail Room Emergency Room Engineering

2. As you are walking on the Ground Floor, note the:

Bulletin Boards Physician's Pictures Trophy Case Direct Line Snack Machines

3. Locate the First Floor and report to the following locations:

Hospital Lobby Information Desk
Sunshine Gift Shop
Outpatient Pharmacy
Cashiers
Hospital Admitting
Insurance
Social Service
Department

Hospital Administration Nursing Administration
Nursing Office
Development Office
Psychiatry Unit - Go
inside to the nurses'
station

4. Return to the Main Hospital and go to the Second Floor. Areas to locate here are:

Surgical Pathology Family Waiting Room Operating Room X-Ray

5. Proceed to the Seventh Floor and locate:

Respiratory Therapy Department Transportation

6. Go to your own unit and ask to meet your buddy. (If you have any problems, call the instructor.)

#### Tube Stations/Vertical Lifts

Objective: At the completion of this lesson, you will

be able to demonstrate the operation of a

tube station and a vertical lift.

# Assignments:

- View the videotape, "Tube Stations and Vertical Lifts."
- 2. Observe the operation of the two pieces of equipment.
- 3. Have another nurse observe your operation of the two pieces of equipment.
- 4. Operate the equipment on your own.

## Mastery Item:

Ask the instructor to observe your operation of the tube station and vertical lift.

SECTION III

NURSING SERVICE

#### Nursing Service

Objective: At the completion of this lesson, you will be able to: state the philosophy of the nursing service; analyze the objectives of nursing service; interpret the organizational design of the institution and for the nursing department; identify the divisions and the division directors of nursing service.

#### Assignments:

- 1. Read the philosophy and objectives of the nursing service in the Nursing Service Organization Manual.
- 2. View the slides on "Organization and Divisions."
- 3. Read the dialogue which accompanies the slides.
- 4. Review the "Organizational Design" charts for the institution and for the nursing services.

# Complete the following:

- 1. Trace the chain of communication through the organization of the nursing service.
- 2. Name the five divisions of nursing service.
- 3. Name the staff divisions which support the clinical divisions.
- 4. State two of the objectives of the nursing service.
- 5. Identify your director.

Groups of the Nursing Service Organization

Objective: At the completion of this lesson, you will be able to identify and state the purposes of the groups of the nursing service.

#### Assignments:

- 1. Read and review the Nursing Service By-Laws.
- 2. Review the monthly calendar to note the dates of group meetings.
- 3. Attend a group meeting.

Complete the following:

- 1. The Nursing Service Organization has five groups which are:
  - a.
  - Ъ.
  - с.
  - d. e.
- 2. One function of your group is:
- 3. Officers in a group are:

#### Job Descriptions

Objective: At the completion of this lesson, you will be able to describe the role of the

registered or graduate nurse.

#### Assignments:

- 1. Read the Job Descriptions for Registered or Graduate Nurse in the <u>Nursing Service Organization Manual</u>.
- 2. Discuss the job description with another staff nurse or your supervisor.

#### Mastery Items:

1. Three responsibilities of the staff nurse are:

а.

b.

c.

2. The line of promotion for the staff nurses is:

#### Dress Code

Objective:	At the completion of this lesson, you will be able to state the dress code of nursing service.
Assignments	:

- 1. Read pages 7 through 9 in the <u>Nursing Service</u> <u>Personnel Guide and Policies Handbook</u>.
- 2. Observe the types of uniforms worn by other personnel and write down whether these meet the dress code.
- 3. Read pages I through K in the <u>Supervisor's Guide</u>.
- 4. Discuss your observations with the instructor.

1. Scrub suit may be worn in the following areas:

а. b. c.

d. e.

2. Sweaters are to be \_\_\_\_\_ in color.

Complete the following mastery items:

- 3. \_\_\_ (T or F). The wearing of caps by registered nurses, graduate nurses, and licensed vocational nurses is optional.
- 4. \_\_\_ (T or F). Engaging in activities as sewing, reading, etc., is okay as long as your patient call lights are not on.

- 5. Three types of acceptable uniforms are:
  - а.
  - b.
  - С.

#### Schedules/Time Off Policies

Objective: At the completion of this lesson you will be able to read the bi-weekly time schedule; identify and discuss the policies on holidays, weekends, vacations, and sick time; state the policy on leave of absence.

## Assignments:

- 1. Read pages 2 through 5, Sections D, E, F, G, H, & L in the <u>Nursing Service Personnel Guide and Policies Handbook</u>.
- 2. Read page III-T in the Supervisory Guide.
- 3. Read pages III-B, C, D, E, G, H, and Y, in the Supervisory Guide.

# Complete the following:

- 1. Schedules are posted for what period of time?
  - a. Two weeks in advance
  - b. Weekly
  - c. Two months in advance
  - d. Four weeks in advance
- 2. Changes in schedules after schedules are posted and no emergency exists requires:
  - a. An exchange between like employees.
  - b. A special note to the supervisor.
  - c. A friend in the Nursing Office who will make the change for you.
  - d. No changes are considered.

3.	Your schedule is to reflect every weekend off unless you make special requests requiring extra days off during the week.
4.	The maximum amount of time allowed off for a leave of absence and the same position held for the employee is:
	a. Two months b. Eight weeks c. One month d. Six weeks
5.	The number of days of sick leave accumulated per year for a full-time employee is
6.	You are allowed six holidays per year. These are:
	a. b. c. d. e. f.
7.	Floating holidays require that you be employed a minimum of before being granted this benefit.
8.	$\overline{\text{Christmas}}$ Vacation time is allowed during the $\overline{\text{Christmas}}$ Season.
9.	(T or F). Holidays must be taken on the day on which they occur.
10.	You will receive weeks vacation per year. You may take week(s) at the end of six months.

Merit System/Evaluations/Pay Increases

Objective: At the completion of this lesson, you will be able to describe the merit system of pay increases; discuss evaluations; identify methods utilized for increases in pay.

#### Assignments:

1.

- 1. Review "Standards of Job Performances for Professional Registered Nurses Related to Job Description."
- 2. Read and review "Job Description for Professional Registered Nurse."
- 3. Read page 4, Section I, <u>Nursing Service Personnel</u> <u>Guide and Policies Handbook</u>.
- 4. Read Section IV, Policy-A, Supervisory Guide.

Complete the following:

2.	Written	evaluations	are	completed	on	al1	employees
		(time	e fra	ame).			

The purpose of the three-month evaluation is:

3. Salary increases are based upon:a.b.

4. To meet the standard on the merit system for accepting responsibility and accountability, you must be able to care for groups of patients, which is patients.

5.	The	number	of	audits	required	for	merit
	cons	siderat	ion	is			

6. According to the merit standards, your record must show:

a.

Ъ.

#### Sick Call/Absenteeism

Obje	be able to discuss policies concerning sick call and absenteeism.								
Assi	gnments:								
1.	Read page 3, Section H, <u>Nursing Service Personnel</u> Guide and <u>Policies Handbook</u> .								
2.	Read pages III-FF and VI-B in Supervisory Guide.								
3.	Review Form #400, which is completed prior to reporting to Employee Health Nurse or Emergency Room.								
Comp	lete the following:								
1.	(T or F). You may have a friend call in that you are ill.								
2.	The minimum amount of time to call in isbefore you are scheduled on duty.								
3.	You are to notify:								
а	a.								
	b.								
4.	Physician's statements are required for absences								

Both acute and chronic health problems are handled through the

The employee must notify his/her immediate supervisor prior to

reporting to sick call during regular

sick call procedure.

duty hours.

in excess of \_\_\_\_\_ days.

(T or F).

(T of F).

5.

6.

7. \_\_\_ (T or F). The employee receives a bill for the services given by the Employee Health Nurse.

#### Accident Reports

Objective: At the completion of this lesson, you will be able to complete two types of accident reports.

#### Assignments:

4.

- 1. Read and review Form #294, "Accident Report for Employees."
- Read and review Form #295, "Accident Report for Patients."
- 3. Read page A-1, <u>Nursing Service Organization</u> Manual.

# Complete the following:

within how many hours?

1.	Form is used for patient and visitor accidents.
2.	(T or F). Visitors who have accidents may be sent to the emergency room to be seen by a physician at no charge to the person.
3.	Accident reports are to be given to either of the following:

Check your answers with the Key or review the material.

Employees are to complete a report of an accident

Time Cards/Meals/Coffee Breaks

Objective: At the completion of this lesson you will be able to state process of use of the time clock, identify meal and coffee breaks allowed.

#### Assignments:

- 1. Locate your time card in your red folder.
- 2. Read Section II-D in Supervisory Guide.
- Read Section M, page 6, <u>Nursing Service Personnel</u> <u>Guide and Policies Handbook</u>.
- 4. Read and review, "Instructions for Completion of Time Cards."
- 5. Clock out.

# Complete the following:

- 1. \_\_\_ (T or F). It is permissable for a friend to clock in or out for you as long as you give permission.
- 2. \_\_\_ (T or F). Thirty-minute meal breaks are given to the day and evening tours only.
- 3. The time allotted for a coffee break is \_\_\_\_\_ per tour.

## Unit Assignments

Objective: At the end of this lesson you will be able to identify the process of unit assignments, transfers, promotions.

## Assignments:

- 1. Read page 1 of <u>Nursing Service Personnel Guide and Policies Handbook</u>.
- 2. Read Section III-P of Supervisory Guide.

#### Mastery Items:

(True	or Fa	alse)
1.	•	Unit assignments are based entirely upon staffing needs.
2.		Transfers to choice assignments are offered to in-house personnel before others are offered the position.
3.	•	Senority is considered when two requests are made for some assignment if comparable skills exist.
4.	•	Transfers to other areas are to be arranged and then inform your supervisor you are leaving.
5.	•	You may refuse to leave your unit to work other areas.
6.	•	You can expect no repercussions if you refuse to work other areas.

- 7. The first step to take in requesting a transfer or promotion is:
  - a. Talk to someone in the department where the other job is located.
  - b. Arrange an interview with a Personnel representative.
  - c. Consult with your department leader or supervisor.
  - d. Get a friend to arrange the transfer for you.

SECTION IV

PATIENT CARE ACTIVITIES

#### Medications

Objective: At the completion of this lesson, you will be able to administer medications, discuss policies controlling administration of medications, chart the administration of medications.

#### Assignments:

- 1. Read "Medication Review."
- 2. Utilize pharmacology reference books to review medications listed on #1.
- 3. Read pages M-1 to M-6 in <u>Nursing Service Organization</u> Manual.
- 4. Read and review, "How to Solve Dosage Problems in One Easy Lesson."
- 5. Review chart Form #35, "Temperature and Medication Sheet."

## Mastery Items:

- 1. Arrange a time and complete the "Orientation Pharmacology Quiz."
- 2. Have the examination graded by the instructor.
- 3. Administer medications on your patients if grade of 80 percent or higher achieved on the examination.
- 4. Chart medications on patients' charts.
- 5. Have another nurse check you for correct charting.

#### Doctors' Orders

Objective: At the completion of this lesson you will be able to sign off physician's orders and identify procedures for completing the orders.

#### Assignments:

- 1. Read and review Form #1 in the patient's chart.
- 2. Review the orders written on your patient's charts.
- 3. Observe the Unit Clerk transcribing orders.
- 4. Observe a staff nurse checking and signing off orders.
- 5. Complete the following:
  - a. The method for notifying the personnel that there are new physician's orders on the chart is:
  - b. \_\_\_\_True or False. All laboratory tests are arranged for by the Unit Clerk after the nurse signs off the orders.
  - c. \_\_\_True or False. Orders written by medical students must be countersigned before the orders may be transcribed and completed.
  - d. List two items which must be sent to the Pharmacy when ordering medications:
  - e. The Unit Clerk alerts the nurse that a blood test has been ordered by:

#### Patient Admission

At the completion of this lesson you will Objective: be able to complete a patient admission. Assignments: Review the admission form utilized on your unit. 1. 2. Observe another nurse admitting a patient. 3. Admit a patient. 4. Complete the following: True or False. The admission assessment is the first page of the nurses' notes. True or False. Admission assessments b. are required on all patients. c. Admission assessments are the basis for

beginning the \_\_\_\_

#### Flow Sheets

At the completion of this lesson you will Objective: be able to utilize flow sheets to chart treatments.

#### Assignments:

- 1. Read and review the form applicable to your area.

  - #310, "Special/Routine Nursery" #81, "Nursing Treatment Record" Ъ.
  - ICU Flow Sheets c.
  - Neonatal Intensive Care Flow Sheet
  - Emergency Room Flow Sheet e.
- 2. Observe charting on the flow sheet.
- 3. Chart on the flow sheet.
- 4. Complete the following:
  - The purpose of the flow sheets is:
    - To decrease the time needed to chart. (1)
    - (2)
    - To provide a record of routine care given. To allow for a concise record of care given. (3)
    - (4) None of the above.
    - (5) All of the above.
  - b. True or False. Treatment records or flow sheets are not permanent parts of the patient's records.
  - True or False. Only registered nurses are с. to chart on flow sheets or treatment records.

# Intake/Output Sheet

Obje	tive: At the completion of this lesson you will be able to record intake and output.
Assi	nments:
1.	Read and review Form #1660.
2.	Observe another nurse charting on the Intake/Output Sheet.
3.	Chart on your patient's intake and output record.
4.	Complete the following:
	aTrue or False. It is the responsibility of the Unit Clerk to total all intakes and outputs at the end of each eight hour shift.
	b. The sheets may be kept and are placed when completed.
	c. The responsibility for the twenty-four total and transcription to the temperature and medica- tion sheet lies with the
	d. A new sheet is needed every days.

#### Nurses' Notes

Objective: At the completion of this lesson you will be able to chart patient information on the Nurses' Notes.

#### Assignments:

- 1. Read and review nurses' notes in your patients' records.
- 2. Read and review pages C-4 tp C-15 in the <u>Nursing Service Organization Manual</u>.
- 3. Observe another nurse charting.
- 4. Chart on your patients' charts.
- 5. Complete the following:
  - a. Two purposes of charting are:
    - 1)
    - 2)
  - b. True or False. Any color ink may be used in charting.
  - c. The procedure for an error in charting is:
  - d. \_\_\_\_True or False. Charting on the Progress notes is reserved for physicians.
  - e. \_\_\_True or False. Abbreviations may be utilized in charting and these may be devised by the nurse.

#### Confidentiality

Objective: At the completion of this lesson you will be able to differentiate the elements of confidential information.

#### Assignments:

- 1. Read and review the handbook, "Confidentiality."
- 2. View slide tape presentation, "Confidentiality."
- 3. Read Section I, Policy Number Y, of <u>Supervisory</u> <u>Guide</u>.
- 4. Read pages P-3, N-1 to N-4, of <u>Nursing Service</u> Organization Manual.

# Complete the following:

1.	The	penalty	for	discussion	of	personal	information
	is						
	_						

- Answers to all inquiries about patients/clients from newspapers, magazines, television, and radio stations will be handled by:
- 3. References about former employees are supplied by:
  - a. Nursing Office
  - b. Mursing Care Supervisor
  - c. Personnel Department
  - d. Staff on the unit

4.	Patient	records	may	be	released	to	
----	---------	---------	-----	----	----------	----	--

5. \_\_\_True or False. Patients have a legal right to take their records with them due to the fact that the records belong to them.

6.	Three	items	not	considered	${\tt confidential}$	are:
	a					
	b					
	c			-		

#### Risk Control

Objective: At the completion of this lesson you will be able to describe the risk control process and complete an incident report.

## Assignments:

- 1. View the videotape, "The Incident."
- 2. Review a sample incident report.
- 3. Read page R-6 in <u>Nursing Service Organization Manual</u>.

# Complete the following:

- 1. The purpose of an incident report is:
- 2. Incidents are to be reported to:

a.

**b**.

3. Complete an incident report and discuss with instructor.

#### Care Plans

Objective: At the completion of this lesson you will be able to discuss care plans utilized at this institution.

- 1. Read and review page P-1 in <u>Nursing Service</u> Organization Manual.
- 2. Review the care plans on your unit.
- 3. Review rolodex information.
- 4. Write a care plan for one of your patients.
- 5. Review the care plan with your instructor.

#### Rolodex

Objective: At the completion of this lesson you will be able to utilize the rolodex to locate patient care information.

#### Assignments:

- 1. Review contents of rolodex.
- 2. Select a particular diagnosis or patient care problem and look up guidelines on the rolodex.
- 3. Utilize the rolodex to write a patient care plan on one of your patients. Be ready to discuss with the instructor.
- 4. The rolodex contains several types of information. Two of these are:

a.

**b**.

#### Consent Forms

Objective: At the completion of this lesson you will be able to identify the consent forms utilized at this institution.

- 1. Read and review the following forms:
  - a. #211, "Consent to Operation."
  - b. #70, "Special Authorization for Outpatient Surgery."
  - c. #405, "Authorization and Consent No. 1."
  - d. #213, "Consent for Autopsy"
  - e. #38-B, "Consent for Irradiation Therapy"
  - f. #210, "Consent for Sterilization Operation"
  - g. #214, "Consent for Sterilization by Radiation Therapy"
  - h. #97, "Consent for Use of Investigational Drugs"
  - i. #23, "Permission for Disposal of Severed Member"
  - j. #MR 530, "Medical Authorization" (Release of Information)
  - k. #209, "Consent to Sterlization Procedure, Tubal Ligation"
  - 1. #500, "Photography Requisition"
  - m. #4800, "Authorization for and Consent to Special Diagnostic or Therapeutic Procedures"

2.	Read Form	d and review "General Guidelines for Consent ns."
Comp	lete	the following:
1.	A co	onsent form is required for
2.	The	legal age for a witness is
3.		(T or F). The nurse has the main responsibility for informed consent.
4.	A co	onsent is not required in the following condition:
	Ъ. с.	Patient is over fifty years of age. A life-threatening emergency exists. Patient is a neonate. Patient has been officially admitted to the hospital.

### Quality Assurance

Objective: At the completion of this lesson you will be able to discuss the concept of quality assurance.

#### Assignments:

- 1. Listen to audio cassette tape, "Quality Assurance."
- 2. Observe patient care on your unit.
- 3. Discuss with your supervisor your concept of quality care.

# Complete the following:

- 1. \_\_\_ (T or F). Quality assurance is the audit process.
- 2. \_\_\_ (T or F). Policies on quality of patient care are made by the Joint Commission on Accreditation of Hospitals.

#### Audit

Objective: At the completion of this lesson you will be able to describe the audit process and complete an audit on one of your patients.

- 1. Read "Guidelines for Measuring Quality of Care."
- 2. Review the following audit forms:
  - a. Medical-Surgical
  - b. Discharge
  - c. I.V.
- 3. Complete one audit on your unit.
- 4. Discuss the audit results with the instructor.
- 5. Submit the audit to Quality Assurance Supervisor.

#### Patient Classification

Objective: At the completion of this lesson, you will be able to classify patients based upon needs and make care assignments based upon these needs.

- 1. Read and review "Categories of Nursing Care Needs of Patients."
- 2. Read pages A-2 and A-3 in <u>Nursing Service</u> Organization Manual.
- 3. Complete Assignment Planning Exercise.
- 4. Discuss #3 with instructor.
- 5. Observe categorization of patients on your unit. (Note: if categories not being utilized on your unit, arrange to go to unit where can observe.)

#### Reporting

Objective: At the completion of this lesson you will be able to present a report to another unit or another staff.

- 1. Review patient care plans.
- 2. Read and review page R-5, <u>Nursing Service</u> <u>Organization Manual</u>.
- 3. Listen to end-of-shift report.
- 4. Report on own patients.
- 5. Share ideas about reports with instructor.

### Laboratory Tests

Objective: At the completion of this lesson you will be able to order specific laboratory tests.

### Assignments:

- 1. Review laboratory wheel.
- 2. Observe Unit Clerk utilizing the laboratory wheel.
- 3. Review guidelines for completion of:
  - a. CBC
  - b. U/A
  - c. EKG
  - d. Chest x-ray
- 4. Review section of Kardex for recording laboratory work ordered.

Complete the following mastery items:

- 1. Complete a laboratory slip ordering a CBC.
- 2. Complete a laboratory slip ordering an EKG.

Check your tickets with Instructor for proper completion.

# SECTION V

SUPPORT SYSTEMS FROM OTHER DEPARTMENTS

# Dietary Department

0bjec	tive: At the completion of this lesson you will be able to discuss the activities of the dietary department.
Assig	gnments:
1.	Preview the slide presentation on the "Dietary Department."
2.	Read the dialogue which accompanies the slides.
3.	Review the <u>Diet Manual</u> .
4.	Observe the Unit Clerk on your unit ordering diets.
5.	Assist with the delivery of trays.
6.	Observe the types of diets your patients are served.
Compl	lete the following mastery items:
1.	Three services offered by the dietary department are a. b. c.
2.	The hours of operation of this department are
3.	Diets are ordered on Form #
4.	"N.P.O." for treats, etc. is marked on the census sheet with the symbol
5.	State three standard diets:

a. b. c.

- 6. (T or F). Dietary Aides will deliver trays to patients except where "No Visitors" or "Isolation" signs are posted.
- 7. (T or F). Dietitians will not visit patients except when sent Consult tickets.
- 8. Diet instructions require physician's order and must be requested at least \_\_\_\_\_ days before the patient is dismissed.
- 9. Two special types of diets are discussed in special classes. These are:

  a.
  b.

#### Pharmacy

Objective: At the completion of this lesson you will be able to describe the operation of the pharmacy.

### Assignments:

- 1. View the slide presentation on "Pharmacy."
- 2. Read the dialogue which accompanies the slides.
- 3. Review the Formulary and Physician's Desk Reference.
- 4. Observe change of shift narcotic count.
- 5. Observe narcotic sign-out procedure.
- 6. Observe Unit Clerk ordering medications.
- 7. Administer medications on your patients when you have successfully completed the pharmacology examination.

# Complete the following:

- 1. The objective of the pharmacy is:
- 2. The hospital offers \_\_\_ (number) kinds of pharmacy service.
- 3.  $\frac{\text{(T or F)}}{\text{hours}}$ . There is a pharmacist on call at all
- 4. Your resource for medications unavailable on your unit is:
- 5.  $\frac{\text{(T or F). All medications must be ordered}}{\text{for the individual patient.}}$

- 6. The form for ordering medications is known as a and is Form # \_\_\_\_\_.
- 7. Items not listed on the order form are to be
- 8.  $\frac{}{\text{signature of two nurses.}}$
- 9.  $\frac{\text{(T or F)}. \text{ Patients may take their own }}{\text{medications if their doctor so orders.}}$

# Respiratory Therapy

Objective:	At the completion of this lesson you will be
	able to discuss the operation of the Respiratory Therapy Department.

$\Delta c$	C	7	gnmen	+	
110	J	_	Filmeri	L	•

6.

1.	View slide presentation on "Respiratory Therapy."
2.	Read the dialogue which accompanies the slides.
3.	Observe respiratory therapy treatments on your patients.
4.	Review order forms and treatment recording.
Compl	lete the following mastery items:
1.	Two responsibilities of the Respiratory Therapy Department are:
	a.
	b.
2.	Service hours of the department are:
3.	Breakfast for therapy patients is placed on
4.	Service is ordered on Form # which is in color.
5.	${\text{stamped}}$ (T or F). Tickets of diabetics will be so stamped and treatments given first.

The length of treatment continuation in days before re-order is: \_\_\_\_\_\_.

7.	Q.I.D.	treatments	will	be	given	on	which	hours?
----	--------	------------	------	----	-------	----	-------	--------

- 8. Three forms of delivery of oxygen available are:
  - a.
  - b.
  - c.
- 9. Three pieces of equipment for treatment modes are:
  - a.
  - b.
  - с.
- 10.  $\frac{}{\text{will}}$  (T or F). The Respiratory Therapy Technician will obtain induced sputum specimens.
- 11. Procedures for cytology specimens are:
- 12.  $\underline{\hspace{0.2cm}}$  (T or F). Portable oxygen is provided for patients who need to be transported.

## Housekeeping

Objective:	At the completion of this lesson you will be able to discuss the operation of the Housekeeping Department.
Assignments	:

- 1. View slide presentation on "Housekeeping."
- 2. Read dialogue accompanying the slides.
- 3. Observe personnel from Housekeeping while on your unit.

Complete the following mastery items:

о ор	
1.	The responsibility of the Housekeeping Department is:
2.	Personnel in housekeeping may be identified by their uniforms which are in color.
3.	Staffing to floors consists of the following personnel:
	a. b.

- 4. Trash and linen chutes are located in \_\_\_\_\_.
- 5. Patients' rooms are cleaned:
  - a. Weekly
  - b. Daily
  - c. Three times per week

- 6. The nurses' responsibility before a room is cleaned is to:
- 7. (T or F). Housekeeping personnel will dispose of properly bagged bed linen.
- 8. Two procedures which the nurse must do for an isolation room before housekeeping can clean are:
  - a.
  - b.
- 9.  $\frac{}{\text{cleaned}}$  (T or F). Rooms of late dismissals are always  $\frac{}{\text{cleaned}}$  by the night shift.

#### Volunteers

Objective:	At the completion of this lesson you will be	be
	able to discuss the activities of the	
	Volunteer Service.	

### Assignments:

- 1. View the slide presentation on "Volunteers."
- 2. Read the dialogue which accompanies the slides.
- 3. Observe the Volunteers on your unit.

### Complete the following:

- 1. The goal of the Volunteer Service is:
- 2. The uniform worn by the Volunteers is:
- 3. Another name for the Volunteers is:
- 4. Four areas of service by the Volunteers are:a.b.c.d.
- 5. Money earned from photographs of newborns is utilized for .

### Unit Management

Objective:	At	the	completion	of	this	les	sson	you wil	1 be
	abl	e to	identify	the	role	of	Unit	Manage	men t
	in	tota	l patient	care	€.				

## Assignments:

- 1. View the slide presentation on "Unit Management."
- 2. Read the dialogue which accompanies the slides.
- 3. Observe the Unit Managers and Unit Clerks on your unit.
- 4. Review the Unit Clerk Manual.

## Complete the following:

- 1. The main objective of Unit Management is:
- 2. Three Unit Manager responsibilities are:
  - b.
  - c.
- 3. The main Unit Clerk responsibilities are:
- 4. Unit Clerks are available on which shifts?

#### Admissions

Objective: At the completion of this lesson you will be able to discuss the operation of the admitting department.

### Assignments:

- 1. View the slide presentation on "Hospital Admissions."
- 2. Read the dialogue which accompanies the slides.
- 3. Review the admission form.

Complete the following mastery items:

- 1. The purpose of the Admitting Department is:
- 2. The admitting form must be completed by a
- 3. Three types of information obtained from the patient are:
  a.
  - а.
  - Ъ.
  - c.
- 4.  $\underline{\hspace{0.5cm}}$  (T or F). Patients with no available funds are sent home.
- 5. Records of admissions, transfers, or dismissals are maintained by what means?

#### Social Service

Objective: At the completion of this lesson you will be able to discuss the operation of the Social Services Department.

#### Assignments:

- 1. View the slide presentation, "Social Services."
- 2. Read the dialogue which accompanies the slides.
- 3. Observe a social worker in a patient interview.
- 4. Refer a patient to the service.

Complete the following mastery items.

- 1. The primary function of the Social Services Department is:
- 2. The department sees patients who:
- 3.  $\frac{}{\text{hours}}$  (T or F). Social workers are available after hours when the department is open.
- 4. Referrals may be made by:

# Physical Therapy

Objective: At the completion of this lesson you will be able to describe the operation of the Physical Therapy Department.
Assignment:
1. View the slide presentation, "Physical Therapy."
2. Read the dialogue which accompanies the slides.
3. Observe physical therapy treatments on your patients
Complete the following mastery items:
1. The hours of operation of Physical Therapy are:
2. Physical Therapy is ordered on Form #
3. The four sections of the department are:
a. b. c. d.
4. Treatment, observations, etc., may be found recorded on the

### Occupational Therapy

Objective: At the completion of this lesson you will be able to discuss the operation of the Occupational Therapy Department.

### Assignment:

- 1. View the slide presentation on "Occupational Therapy."
- 2. Read the dialogue which accompanies the slides.
- 3. Observe occupational therapy treatment on one of your patients.

### Complete the following mastery items:

- Four types of patients treated in Occupational Therapy are:
  - a.
  - b.
  - c. d.
- 2. The main goal of Occupational Therapy is:
- 3. Therapeutic activities that are task-oriented are used to:

# Patient Education

Obje	able to identify the purpose of the Patier Education Department.
Assi	ignments:
1.	View the slide presentation, "Patient Education."
2.	Read the dialogue which accompanies the slides.
3.	Preview the brochure on programs offered.
	plete the following mastery items:
1.	The goal of patient education is:
2.	Five elements of educational programs are:
	a. b. c. d. e.
3.	The teaching mode is
4.	Other materials are in the form of:
	a. b.

c.

- 5.  $\underline{\hspace{0.2cm}}$  (T or F). Patient education fees are included in the clinic visit.
- 6. Appointments are made by:
  - a.
  - Ъ.
- 7.  $\underline{\qquad}$  (T or F). All referrals to the department require a physician's order.

#### Central Service

Objective: At the completion of this lesson you will be able to describe the operation of the Central Service Department.

#### Assignments:

- 1. View slide presentation on "Central Service."
- 2. Read the dialogue which accompanies the slides.
- 3. Observe the Unit Clerk ordering supplies.
- 4. Observe the charge procedure for Hall Stock supplies.
- 5. Review the items listed on the Central Service order forms.

# Complete the following mastery items:

- 1. The hours of operation of the Central Service Department are:
- 2. Three procedures carried out in the department related to supplies are:
  - a.
  - Ъ.
  - c.

3.	Unused items are to be returned to the department and the ticket marked
4.	$\overline{\text{only}}$ if a charge ticket is completed and sent to the department.
5.	Large items are delivered by
6.	Three order forms and their uses are:
	a. b. c.

SECTION VI

SPECIAL PROCEDURES

### Fire Procedure

Objec	ctive: At the completion of this lesson you will be able to discuss the fire procedures.
Assig	gnments:
1.	View the film, "Fire in the Patient Care Facility: Rehearsal for Survival."
2.	Read and review Fire Procedures.
3.	Locate five extinguishers, alarms, oxygen on-off valves, and exits on your unit.
4.	Participate in the next fire drill on your unit.
Comp	lete the following:
1.	To call to report a fire, the number is and the code is
2.	Two carries which you might use to remove a patient are: a. b.
3.	Three classes and types of fire are: a. b. c.
4.	Fire alarms, fire hoses, and extinguishers are located near

5. List two responsibilities the nurse has after reporting the fire:
a.

b.

6. \_\_\_(T or F). The first step taken after a fire is reported is to remove all patients from the unit.

## Cardiopulmonary Resuscitation

Objective:	At the completion of this lesson you will be able to describe the skill and discuss the rationale for cardiopulmonary resuscitation.
Assignments	:

- View the film, "Pulse of Life." 1.
- Read and review, "CPR in Basic Life Support." 2.
- Read and review, "Choking: The Cafe Coronary." 3.
- Read, "Standards for Cardiopulmonary Resuscitation and Emergency Cardiac Care." 4.
- View videocassette on "Heimlich Maneuver." 5.
- Read and review pages 11 to 12, <u>Nursing Service</u> Personnel Guide and Policies Handbook. 6.
- Obtain and mannequin and practice the procedure. 7.

Comp1	lete the following mastery items:
1.	The steps in CPR are:
	a. b. c.
2.	The code for a cardiac arrest is and the number to call is
3.	Three symptoms of choking are: a. b. c.

- 4. The most common signal of a heart attack is:
  - a. A feeling of depression
  - b. Pain in the chest behind the breastbone
  - c. Numbness in both legs
  - d. Pain in the right lower quadrant
- 5. The main danger in exaggerating the backward position of the head tilt in small children is:
  - a. Making the child too uncomfortable
  - b. The accumulation of mucous and saliva in the airway
  - c. Blocking the breathing passages
  - d. Prevention of forming an airtight seal
- 6. Practice the skill of CPR on the mannequin and demonstrate your skill to the instructor.

SECTION VII

APPENDIX

#### Key

## Nursing Service:

- 1. Chain of communication
  - a. Staff
  - b. Nursing Care Supervisor
  - c. Director
  - d. Assistant Administrator, Nursing
  - e. May be direct to any of the above
- 2. Medical-Surgical
   Surgical Services
   Women's and Children's Services
   Clinic
   Critical Care
- 3. Unit Management
  Education and Research
  Central Service
- 4. a. Plan, administer, and maintain a high standard of patient/client care including all aspects-the physical, emotional, social, and spiritual.
  - b. Provide a safe, tranquil, physical environment for the patients, staff, and visitors.
  - c. Promote professional behavior and attitudes of compassion and empathy in our dealings with patients/clients, and families.
  - d. Teach health care to patients, families, and staff.
  - e. Collaborate and communicate with all departments concerned with giving patient care and utilize other health care agencies in this community.
  - f. Utilize tools of research to measure and evaluate the level of patient care we are providing and to make necessary changes in order to improve care.
  - g. Abide by the code of ethics and the professional standards of practice in giving patient care.
  - h. Contribute to the education programs for students of nursing and other learners.
  - Elevate our own educational status by actively participating in hospital and/or academic courses.

### Key (continued)

### Groups:

- 1. RN/GN LVN NA/NAT Unit Clerks Clinicians
- 2. Participate and contribute to activities and functions of the Nursing Service Organization. Study and evaluate the functions of the group.
  - Ъ.
  - Contribute to an Inservice Education Program for the group.
  - Plan a program to encourage membership and d. participation in the professional organizations.
  - Keep personnel informed of plans, policies, programs, and recommendations as they affect Nursing Services.
- 3. Chairperson Vice-Chairperson Elect/Secretary

# Job Descriptions:

- 1. Develop, implement, and evaluate the nursing regimen for specific patients/clients within a given unit.
  - Make nursing judgements and decisions about the b. nursing care for the patient/client by using assessment data to formulate and implement a plan of goals and objectives; and to evaluate the patient/client responses to the nursing care.
  - Record, report, and interpret patient/client responses, symptoms, and progress, and collaborate with appropriate nursing staff and other health care members.
  - Accept responsibility and accountability for the quality and the quantity of nursing care rendered under his/her supervision. Assignments and delegation of duties to other nursing personnel shall be commensurate with their educational preparation and demonstrated proficiency.

- e. Assist personnel under his/her supervision to develop the necessary skills needed for continued competence in providing patient/client care, comfort, and safety.
- f. Accept leadership accountability for care of groups of patients to include assignment planning, conferences, written plans of care, and clinical decisions which are necessary for management of nursing personnel.
- g. Participate in defining, maintaining, and interpreting standards of nursing practice.
- h. Review and analyze trends pertinent to delivery of nursing care services within the unit and work in collaboration with nursing care supervisor for appropriate innovations.
- i. Promote and participate in patient/client education and counseling based on individual's health needs and illness status, and involve the individual and significant others for a better understanding and implementation of immediate and long term health goals.
- j. Participate in discharge planning by consultation and utilization of community agencies as resources for continuity of patient/client care.
- k. Be responsible for individual professional growth through participation in continuing education and other appropriate learning experiences.
- 2. Nurse Clinician
  Nursing Care Supervisor

### Dress Code:

- 1. a. ER
  - b. OR/RR
  - c. Labor and Delivery
  - d. Post-Partum
  - e. Central Supply
  - f. Nursery

- 2. White
- 3. True
- 4. False
- 5. Dress

Jumpsuit

Pantsuit

### Schedules/Time Off Policies

- 1. d.
- 2. a.
- 3. third
- 4. d.
- 5. 13
- 6. a. New Years
- f. Christmas
- b. Fourth of July
  - c. Labor Day
  - d. Thanksgiving
  - e. Floating
- 7. six months
- 8. true
- 9. false
- 10. two, one

# Merit System/Evaluations/Pay Increases

- 1. To evaluate your performance on the job. Does not usually involve any change in pay status.
- 2. Annually
- 3. a. Our wage and salary program
  - b. Your performance throughout the year
- 4. 6-8 patients
- 5. one per month
- 6. a. Participation in educational conferences
  - b. Record of audit completion
  - c. Evidence of doing care plans
  - d. Good attendance

### Sick Call/Absenteeism:

- 1. False.
- 2. Two hours
- 3. Assistant Directors or "50," Nursing Office Your unit
- 4. Three
- False 5.
- 6. True
- 7. False

# Accident Reports:

- 1. #295
- 2. True
- 3. Director, Assistant Director, or Supervisor
- Twenty-four hours 4.

# Time Cards/Meals/Coffee Breaks:

- 1. False
- 2. False
- 3. 20 minutes

# Unit Assignments:

- 1. False
- 2. True
- 3. True
- 4. False
- 5. False
- 6. False
- "c" 7.

### Doctors' Orders:

- 5. Orange flag a.
  - False Ъ.
  - True
  - Pink order form and copy of doctor's orders Pulling the unit copy of the lab ticket and d.
  - leaving it with the orders to be checked.

### Patient Admission:

- 4. a. True
  - b. True
  - c. Patient Care Plan

### Nurses' Notes:

- 5. a. Provide an accurate and permanent record of the patient's illness, treatment, and care.

  Record signs and symptoms observed as an aid in treating the patient.
  - b. False
  - c. Draw a single line through the mistakes and the word "error" is printed above it.
  - d. False
  - e. False

### Flow Sheets:

- 4. a. 5
  - b. False
  - c. False

# Intake/Output Sheet:

- 4. a. False
  - b. At the bedside, on the patient's chart
  - c. Unit Clerk
  - d. Every day

# Confidentiality:

- 1. Dismissal
- 2. Legal Department
- 3. "c"
- 4. With an Authorization--Insurance Companies, Attorneys, Parts of the record to patients in exceptional cases, referring physicians, students
- 5. False
- 6. Patient's full name
  Admission and discharge date
  Physician's name

#### Risk Control:

- 1. Reporting any errors in medications, treatment, or unusual patient situations.
- Nursing Care Supervisor
   Director
   Assistant Director

# <u>Rolodex</u>:

- 4. a. Patient Care Guidelines
  - b. Procedures

# Consent Forms:

- 1. Treatment
  Surgical Procedures
  Photography
  Certain Diagnostic Tests
- 2. 18 years
- 3. False
- 4. "b"

# Quality Assurance:

- 1. False
- 2. True

### Pharmacy:

- 1. To provide drug products information and services of high quality and just cost for both in-patients and out-patients, and personnel.
- 2. Two
- 3. True
- 4. House Supervisor Pharmacy
- 5. False. Some stock drugs on the units.
- 6. "Pinkie," Form #551.
- 7. Written in
- 8. True
- 9. True

#### Social Service:

- 1. Assist patients to adjust to his/her situation
- 2. Are fearful anxious confused about health, financial benefits, or future planning
- 3. True
- 4. Physician by consult
  Nurse
  Patient himself

# Physical Therapy:

- 1. 8:30-5:30, Monday through Friday
- 2. 11
- 3. Hydrotherapy
  Thermotherapy
  Rehabilitation/Gym
  Bedside unit
- 4. Progress record

# Occupational Therapy:

- 1. Stroke; physical trauma such as head injuries, hand injuries, spinal cord injuries; pulmonary; arthritics; children with developmental/learning disabilities.
- 2. A performance of self-care, work and play activity in as independent a way as possible.
- Restore strength in motion Increase balance Improve hand skills Challenge perceptual skills

### Respiratory Therapy:

- 1. All therapy
   All treatments
   Care and maintenance of equipment (Air, oxygen)
   Doctor Blues
- 2. Twenty-four hours a day
- 3. Hold
- 4. #433, Brown
- 5. True
- 6. Seven
- 7. 7-11-3-7
- 8. Mask
  Catheter
  Cannula
  Ventimask
- 9. Mask, tracheostomy, endotracheal tube, IPPB, hand nebulizer, croupette tent, incentive spirometer, breathing exerciser, vaporizer, postural drainage with or without percussion, continuous ventilator.
- 10. True
- 11. Fasting
   Early am
   Three tests in series
- 12. True

# Housekeeping:

- 1. All cleaning in the institution.
- 2. Blue
- One supervisor for two floors
   Two porters each floor
   Two maids each floor
- 4. Porter's closet on each unit
- 5. Daily
- 6. Remove all patient's belongings
- 7. True
- 8. Remove trash Remove linen
- 9. False--only if room is needed

#### Central Service:

- 1. 24 hours day/365 days per year
- 2. Receiving/decontamination
   Processing
   Sterilizing
   Stocking/Dispensing
   Traction apparatus
   Equipment handling
- 3. Credit
- 4. False
- 5. Transportation
- 6. #51-A Hall Stock
  - #51 Order-charge for dressings, etc.
  - #56 Order-charge for machines, traction, etc.

# Patient Education:

- 1. Teaching patients to cope with their illness or to prevent illness by changing health habits.
- 2. Diagnosis information
  Basic anatomy and physiology
  Description of symptoms
  Complications
  Treatment
  Prognosis

# Patient Education (continued):

- 3. Audio-visual, individual instructions
- 4. Books, pamphlets, handouts
- 5. False--fee for service rendered
- 6. Pink consult ticket
  White miscellaneous ticket
  Telephone call
- 7. False. Some programs are available by self-referral.

### Dietary Department:

- 1. In-patient
  Out-patient
  Cafeteria
  Catering
- 2. 6AM to 7:45 PM
- 3. #192
- 4. "H", midnight census
- 5. General Full liquid
  Soft Clear liquid
  No salt Pediatric
- 6. True
- 7. False. Will visit anyone on a special diet.
- 8. Three
- 9. Diabetic Lipid

# Admissions:

- 1. To admit patients into the hospital in a prompt and efficient manner and to collect hospital charges by assisting the patient with insurance claims and financial counseling.
- 2. Physician
- 3. Type of insurance
  Next of kin
  Vital statistics
  Method of payment of bill
- 4. False--receive financial counseling
- 5. Computer

#### Volunteers:

- 1. Provide extras which professionals do not have time to render
- Yellow, pinafores "Yellow Birds" 2.
- 3.
- 4. Admitting ER Units Museum Newborn Photography Green House Gift Shop
- Scholarships 5.

#### Unit Management:

- All non-nursing activities in the Nursing Service 1.
- Training/supervising Unit Clerks 2. Physical environment of the units Adequate unit equipment and supplies Co-ordination of ancillary departments Yearly Budgets
- Transcribing all doctors orders 3. Scheduling tests Recording vital signs/weights Filing reports in patient records Answering telephone Operating the tube/lift systems
- Ordering/maintaining drug and supply inventory All units on days and evenings 4. ICU, Nursery, and ER at night

# Fire Procedures:

- 1. 2100, Dr. Red
- 2. Side assist hold Rear approach assist Slide Swing

Hip roll Hip carry

Packstrap carry Extremity carry

### Fire Procedures (continued):

- 3. A--Ordinary combustibles (paper, wood, drapes) B--Flammable liquids (fuel oil, gasoline, paint) C--Electrical Equipment (wiring, fuse boxes, conductors)
- 4. Exits
- 5. Remove patients from immediate danger Fight the fire
- 6. False. Evacuation is ordered only by the fire marshall.

# Cardiopulmonary Resuscitation:

- 1. Airway
  Breathing
  Circulation
- 2. 2000 Dr. Blue
- 3. Unable to speak Clutch at throat Cyanosis
- 4. b
- 5. c

#### GENERAL ORIENTATION

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"Central Service"
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"Housekeeping"

"Occupational Therapy"

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"Patient Education"

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"Physical Therapy"

"Social Services"

"Unit Management"

"Volunteers"

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- "Tube Stations and Vertical Lifts"

(All items not specifically noted were prepared by the study agency.)

<sup>&</sup>quot;Confidentiality"

<sup>&</sup>quot;Dietary Department"

<sup>&</sup>quot;Hospital Admissions"

APPENDIX D

FINAL EXAMINATION

#### GENERAL ORIENTATION

#### Final Examination

### True or False Registered nurses are required to utilize the 1. time clock. Vacation time may be taken after the initial 2. three-month probation period. Patient gowns may be worn over the uniform by 3. the employee as long as he/she does not leave the unit. Medications of all types must be ordered for 4. each patient individually. Sick leave is paid the first day an employee is 5. ill only after a year's employment. 6. Tuition reimbursement may be granted both to full time and part-time employees. 7. The signing of the rotation agreement is optional. 8. Narcotics are counted at least six times per twenty-four hours. 9. Employees may remain overtime anytime work has not been completed during the regular shift. 10. Three weeks is the expected amount of time of notice for the registered/graduate nurse who plans to terminate. 11. As a registered or graduate nurse, you will be given every other weekend off.

12.	The pharmacy is open eight to five, Monday through Friday.
13.	The wearing of caps by registered nurses, graduate nurses, and licensed vocational nurses is optional.
14.	Patients have a legal right to take their records with them due to the fact that the records belong to them.
15.	It is the nurse's sole responsibility to provide informed consent to patients prior to signing of consent forms.
16.	The first step to take after reporting a fire is to remove all patients from the units.
17.	Unit Management is responsible for all non-nursing activities on the units.
18.	The Respiratory Therapy Technician will be notified to obtain all induced sputum specimens.
19.	The main accrediting body concerned with assurance of quality of patient care is the Joint Commission on Accreditation of Hospitals.
20.	All treatments are charted in the Nurses' Notes.

# Multiple Choice:

- The time frame for calling about an absence is: 1.
  - Three hours before the shift begins.
  - The day before you will be absent
  - Two hours before your shift begins.
  - At least one-half hour before your shift begins. d.
- The purpose of the incident report is: 2.
  - To provide information to the supervisor for
  - employee counseling.
    To provide material to keep the incident review b. committee active.

- 2. c. To report any commission or omission in the usual patient care.
  - d. To provide a vehicle for reporting other employees.
- 3. The code for a cardiac or respiratory arrest is:
  - a. Dr. Red
  - b. Dr. Gray
  - c. Dr. Smith
  - d. Code 99
  - e. Dr. Blue
- 4. The purpose of categorizing patients is:
  - a. To provide some extra activity for the charge nurse.
  - b. To be able to equalize the assignments by giving everyone on the team the same total.
  - c. To assess the patient for level of care for the purpose of assignment to the appropriate nurse.
- 5. References about former employees are supplied by:
  - a. Nursing office
  - b. Nursing Care Supervisor
  - c. Personnel Department
  - d. Staff on the unit
- 6. Changes in schedules after schedules are posted and no emergency exists require:
  - a. An exchange between like employees.
  - b. A special note to the Supervisor.
  - c. A friend in the Nursing Office who will make the change for you.
  - d. No changes are considered.
- 7. The first step to take in requesting a transfer or promotion is:
  - a. Talk to someone in the department where the other job is located.
  - b. Arrange an interview with a Personnel Department representative.
  - c. Consult with your Department Head or Supervisor.
  - d. Get a friend to arrange the transfer for you.

- 8. A consent form is not required in the following condition:
  - a. The patient is over fifty years of age.
  - b. A life-threatening emergency exists.
  - c. The patient is a neonate.
  - d. The patient has an official admission to the hospital.
- 9. Patient rooms are cleaned by the Housekeeping Department Staff:
  - a. Weekly
  - b. Daily
  - c. Three times per week
  - d. Every shift
- 10. When performing cardiopulmonary resuscitation on small children, the main danger in exaggerating the backward position of the head tilt is:
  - a. Making the child too uncomfortable.
  - b. The accumulation of mucous and saliva in the airway.
  - c. Blocking the breathing passages.
  - d. Prevention of forming an airtight seal.

#### Fill-in

- 1. Employee medical health care for persons who become ill while on duty is available by reporting to:
  - а.
  - b.
- 2. Holidays recognized by (the study institution) are:
- There are groups of employees in the Nursing Service who are organized and have regular meetings. List these groups.

4.	List the five clinical divisions in the organization.
5.	The job description of the staff nurse lists his/her duties and responsibilities. State three of these.
6.	The purpose of the three-month evaluation is to:
7.	The areas to notify in case of illness are: a. b.
8.	Doctor's order for a medication is good for
9.	The penalty for discussion of personal patient information is
10.	Three items on the patient's record not considered confidential if the person is a public case are: a. b. c.
11.	The legal age for a witness of consent form is
12.	Two procedures which the nurse must do for an isolation room before housekeeping can clean are: a. b.
13.	Money earned from photographs of newborns by the Volunteers is utilized for .

a. b. c.  15. Three classes and types of fire are:	14.	Three Unit Manager responsibilities are:
16. The code for a cardiac arrest is		b.
a. b.	15.	Three classes and types of fire are:
a. b.		
a. b.	16.	The code for a cardiac arrest is
b.	17.	Three steps in cardiopulmonary resuscitation are
		b.

#### GENERAL ORIENTATION

#### Final Examination Key

# True or False (1 point each)

- 1. False
- 2. False
- 3. False
- 4. False
- 5. True
- 6. False
- 7. False
- 8. False
- 9. False
- 10. False
- 11. False
- 12. False
- 13. True
- 14. False
- 15. False
- 16. False
- 17. True
- 18. True
- 19. True
- 20. False

# Multiple Choice (1 point each)

- 1. "c"
- 2. "c"
- 3. "e"
- 4. "c"
- 5. "c"
- 6. "a"
- 7. "c"
- 8. "b"
- 9. "Ъ"
- 10. "c"

#### Final Examination Key

### Fill-in

- (2 points) 1. a. Emergency Room b. Employee Health
- (6 points) 2. New Years
  Fourth of July
  Labor Day
  Thanksgiving
  Christmas
  Floating
- (4 points) 3. RN/GN
  LVN
  NA/NAT
  Clinicians
  Unit Clerks
- (5 points) 4. Critical Care

  Medical/Surgical
  Clinic
  Surgical Services
  Women's and Children's
- (3 points) 5. a. Plan, implement, and evaluate nursing regimen for patients within a given unit.
  - b. Make nursing judgements as to nursing care utilizing assessment data to plan and implement goals and objectives.
  - c. Evaluate patient response to nursing care.
  - d. Document patient responses, symptoms, and progress.
  - e. Collaborate with appropriate nursing staff and other health care members.
  - f. Accept responsibility and accountability for the quality and quantity of nursing care given under his/her supervision.
  - g. Assist other personnel to improve their skills levels.

#### Final Examination Key

5. h. Accept responsbilities for care of groups of patients.

i. Do assignment planning, conferences; write plans of care; make clinical decisions.

j. Assist with defining, maintaining, and interpreting standards of nursing care.

k. Show awareness of trends in delivery of nursing care.

1. Promote and do patient education.

m. Participate in discharge planning.

n. Participate in inservice programs.

- (1 point) 6. Evaluate performance
- (2 points) 7. a. Nursing office, hourse supervisor, or assistant director

b. unit

- (1 point) 8. 7 days
- (1 point) 9. dismissal
- (3 points) 10. a. Name of patient

b. Admission/Discharge Date

c. Physician name

- (1 point) 11. 18 years
- (2 points) 12. a. Remove linen b. Remove trash
- (1 point) 13. Scholarships
- (3 points) 14. a. Training/supervising Unit Clerks

b. Physical environment of the unit

c. Adequate unit equipment/supplies

d. Coordination of ancillary departments

e. Yearly budgets

(6 points) 15. A - Ordinary Combustibles (paper-Wood)

B - Flammable liquids

C - Electrical equipment

# Final Examination Key

- (1 point) 16. Dr. Blue
- (3 points) 17. a.
  - b.
- Airway Breathing Resuscitation c.