

Plan for the Course leading to an Honours
degree in BSc (Hons) Nursing Studies

Bedford College
(University of London)

Outline of the Course
(Consultative)

April 1981

1. Introduction to the course.

1.1. Origins:

The proposal originates from and incorporates the principles of the course proposal of October, 1978¹.

1.2. Demand for the course:

- (i) The current concept of the nurse's role suggests that increasingly nurses are required to have a broadly based professional education to meet patients' clients' nursing needs in both hospital and community settings through developing professional competence coupled with intellectual curiosity.
- (ii) Because there does not exist a single standard model for degree courses in nursing studies in British institutions of Higher Learning, scope exists for a variety of courses, emphasising different aspects in and of the field.
- (iii) Bedford College through the department of Sociology and through the MSc Course in medical sociology has a unique contribution to offer to nursing studies. This contribution, the sociology of health and disease, the sociological mode of enquiry, an understanding of social institutions of industrial and rural societies and causes and courses in social change, will be required to become an integral part of nursing knowledge as part of its constituted components. In this way academic and professional studies are not seen as too separate entities. Within this context the study of professional nursing will be of an academic nature ensuring students to acquire intellectual curiosity, to understand social change and to encourage further study in appropriate fields of and related to nursing.

1.3. Limits of nursing practice:

As the requirements of an Honours course are very demanding in terms of academic expectations, the range of nursing practice within this course shall be limited to the statutory requirements under the EEC regulations

which are as follows:-

medical/surgical nursing; obstetric, paediatric and psychiatric nursing, geriatric nursing and experience in community nursing which may cover any of those specialities.

1.4. Rationale of proposal:

1.4.1. Introduction:

This proposal arises out of the nature of nursing and of Higher Education, of the theoretical and practical graduate preparation necessary for nurses to be working anywhere in health services, determined by the requirements stipulated by the General Nursing Council of England and Wales.²

1.4.2. The nature of Higher Education:

As a result of a pattern of educational-professional development it is possible to identify a number of assumptions about values and knowledge which underpin the present system and which from time to time are reflected in public and private ideological arguments.

These are: that the purposes of Higher Education is:

- a) to foster and to transmit knowledge, skill and values which are useful to the development of the society in general
- b) to foster an appreciation of particular cultural forms which promote and encourage the developemtn of specific vocations.
- c) to continue the general education and socialisation of adolescents and to promote their acceptance of adult roles and responsibilities.
- d) to fo ter a critical mind and to encourage the developem nt of powers of insightful analysis.

1.4.3. The nature of nursing:

The Briggs Report in 1972 suggested that nursing needed a cadre development in the form of graduates who would as potential leaders and as potential role models guide and develop nursing knowledge, its practise and organisation. As nursing knowledge is still very much in its develop- ing infancy state there is need to provide a base upon which a body of

knowledge related to the principles and practices of nursing can be developed through research and application. Nursing's increased scope and complexity within the health care system requires such a body of knowledge to meet challenges resulting from new developments in medicine, in technology and complexities of the society.

Whilst these purposes exist, they must not be allowed to remain static, and whilst training and education must take account of existing situations, students must also be prepared for the future.

1.4.5. The nature of the degree:

In the light of the above analysis, the nature of the degree must be summarised as requiring the nursing graduate to demonstrate a theoretical and practical competence in her/his vocational areas, and as a person in his/her own right.

1.4.6. Aims of the course:

- (i) To provide students with an understanding of the effects of ill-health on themselves, their patients and families, taking into considerations such effects as episodic or long-term institutionalisation as it impinges on individuals and family networks.
- (ii) to provide students with an understanding of the relationship between socio-political and economic forces and health and disease and to open and widen the debate about nursing's contribution to the well-being of individuals of the society.
- (iii) to provide students with a broadly based nursing education.

1.4.7. Plan of the course: (a diagrammatic scheme of the four year course is set out in appendixes A, B, C.)

- (i) The academic nature of the course lies mainly in its intellectual integration of the sciences and the arts constituting nursing studies, the depth of the subject content in these areas and the power of the transformation of the traditional subject called nursing into the something new that nursing should become. It is not considered adequate that additional subjects should merely feed into nursing and that they should display merely another aspect, like for example, the sociological aspect

etc, but rather that nursing of itself should become much wider and more encompassing which goes beyond that which is commonly understood by it, so that new questions about its activities have a chance to surface. As it is the belief of this course, that both biological and social sciences contain certain fundamental principles which are an essential for nursing, a contribution can be made to the understanding of the care of individuals and groups and the delivery of care to individuals and groups, the nature and direction of integration becomes crucial. This idea demands concurrent teaching of subject matter right across all the nursing studies, interspersed by practical observation when principles from areas of study should be applied. Professional practice and academic learning exercises are thus no longer seen to be situated in different camps, but become one unit; theoretical concepts underpinning nursing practice and nursing practice enriching theoretical formulation and understanding.

- (ii) The courses in social sciences will be focussed on the contribution of sociology to the conceptualisation of nursing as an area of study; its antecedents and consequences; its delivery of care, and the execution of its practice. It will concern theoretical enquiry into contemporary issues of sociological theory and will examine comparative social structure. It will also consider issues of health and disease from the standpoint that they occur within the confines of the social milieu. This will constitute the sociological framework which will provide an explanatory background from which to examine specifically nursing issues. It will be reinforced by courses in Social Policy and Administration dealing with the development of the health services, in research methods and psychology.
- (iii) The courses in biological sciences will deal with all aspects of anatomy, physiology, pathophysiology, microbiology and pharmacology. They will take place either concurrently with or prior to the main part of specialised clinical experience which will be in the second and third years.
- (iv) The course in research methods will concern itself with key issues in social research such as the role of social research, the relevance of the scientific method, correlation, regression and historical sources, descriptive statistics, the comparative methods and others. At a later stage the course will concern itself with specific studies in the history of nursing, the contrasts in the definition of health and disease, with

compilations of research reports and their utilisation.

- (v) So that students can also benefit from an available system of choice in relation to subjects, apart from nursing, in the third and in the fourth year students will be able to exercise such choice and opt for two such options.

(vi) Objectives for placements:

As the BSc nursing course will unfold and develop, it will develop its own specific clinical placement objectives. As an introduction into the course, however, clinical objectives used at the Middlesex Hospital will be used and augmented where appropriate.

- (vii) An introductory course will initiate students to the philosophy of the degree, the principles of links and integration of studies. It will cover the core content of what constitutes nursing, discuss nursing issues and will concern itself with Henderson's notion of 'activities of daily living', those that are necessary to maintain physiological needs, (and where possible psychological needs), in terms of maintaining life and physical health, as outlined by Roper, Logan and Tierney in 'The Elements of Nursing'.³

In this way, the aim is at scientific understanding of physical care, coupled with an awareness of physiological and sociological dimensions as they relate to individuals and their families within the socio-political context of where and when nursing is practiced. The honours element of the degree is associated with the level of the course content throughout the four years, its level of integration between the subjects and the extended essay of the final year.

2.1. Teaching methods:

As an essential part of an Honours degree course, the timetable will take into consideration the need to provide an adequate amount of time for independent study and reading beyond that required for an ordinary course. Timetabling will therefore, be flexible, more suited to individual needs. Days of the week assigned to the university or the hospital, or to any other clinical placements will be subject to alteration.

Modern methods of education requires that students be guided to become actively involved in their own education by being made aware of the relevance of each aspect of the course particular to the nursing situation.

Any number of teaching methods will be used which includes the formal lecture, seminars, tutorials, written work, oral presentation, etc. Clinical instructions, tutorial and other informal methods will be used wherever there are clinical placements.

2.2. Examination and Assessment:

While the final examination structure is under discussion, the following principles have been agreed to:

- (i) that statutory practical examination for SRN qualifications will be included in the examination structure.
- (ii) As Bedford College operates a unit system, each unit will be separately examined at the end of its course and registration for the following year is subject to having completed the units of the previous year. Exceptions to this rule will be in accordance with Bedford College student regulations about admissions to courses.
- (iii) Each separate nursing speciality designated by a fraction of a unit to be examined by:
 - (a) a case history reflecting the particulars of the speciality, for example; a patient with a medical/surgical/paediatric etc, complaint.
 - (b) unseen papers at the end of the appropriate academic year on the specialities of the year
 - (c) ward sisters' reports on nursing students' capabilities on clinical placements will be included in assessments.
- (iv) Bedford College operates on a maximum of four units per year per student. The nursing units will include clinical placements.

2.4. Timing of GNC examinations:

- (i) The carrying out of a procedure involving aseptic technique - during the ward experience of the second year.
- (ii) The administration of drugs. The carrying out of a medicine round in a ward - during ward experience in the second year.
- (iii) The planning and carrying out of the nursing care required by a patient during a span of duty. A suitable part of this care to be observed by the examiner - during a ward experience of the third year.
- (iv) Communications and organisation for a ward or group of ten to twelve patients.
 - (a) supervising the record of patients' progress reports and conveying their contents to the staff when handing over at the end of a span of duty
 - (b) giving verbal report to the examiner on the lines of a report which would be made to a member of the medical staff
 - (c) the organisation of the duties of the ward staff for a span of duty.
(a, b, c, to take place during the final ward experience - the pre-registration period.)
- (v) The examiner needs to be satisfied that students are professionally competent in the carrying out of those examinations, that they are able to recognise priority needs of patients and act accordingly, that students are able to suggest rationales for action, able to debate possible alternative actions, and what different mode of activities they would have pursued, had students been given another chance to repeat the exercise.

3. Clinical practice placements:

3.1. Introduction:

As the nursing studies' course is primarily a vocational course, albeit with inbuilt critical evaluation of both course and of nursing, clinical practice therefore constitutes part of the unit system of the degree subject nursing. Nursing practice is the course's field or laboratory work. It is a learning experience and students on clinical placements are there in the capacity of 'supernumerary' personnel, in relation to the Area Health Authority employed nursing work force.

3.1.1. Calculation of hours: (for more details see: appendix C)

While nursing practice in two terms, the first two, in any given undergraduate year will amount to two and a half days per week per term, the arrangements of the third term will be different to accommodate the university's examination periods. While during the pre-examination period students will continue with their two and a half day per week, the post-examination period will cover whole days over a period of eight weeks. Students will be guided to develop the planning and carrying out of nursing care of patients in accordance with Barr's⁴ dependency classifications which should gradually increase in relation to the student's level of competency from a simple to a more complicated and sophisticated level of patient care.

3.1.2. Nursing's area of specialisation:

- (i) As grouping in wards is not necessarily based on either medical or surgical diagnosis, or on methods of treatment, or on patients' ages, in fact as a number of patients may carry a diagnosis which is at variance with specific medical or surgical labels, students' ward allocation will have to take cognisance of this fact.
- (ii) specialities will be in accordance with EEC regulations.

3.1.3. Conceptual model of nursing practice:

Nursing practice will be taught and critically evaluated on the basis of the Nursing Process⁵, which involves the recognition of a patient's health deficit in relation to an optimal (health) functioning. Where possible, together with a patient's active personal involvement, the nurse will make an assessment of the appropriate requirement, will together with the patient develop a nursing care plan, will make an assessment of the carrying out of the plan and will subsequently evaluate the care given. The nurse's central focus in this work is the consideration of the maintenance of the physiological and where appropriate psychological requirements in relation to the particular disease(s) - needs to consider is the particular nature of the health deficit, and the particular needs necessary to obtain optimal health functioning; to what extent a patient is able to provide for his/her own such needs, and the nature of the adaptation process a patient has to undergo to cope with the disease mechanism and its effect on the social relations

within the family.

3.1.4. Order of nursing practice:

- (i) The order of nursing practice at Bedford College is based partly on availability of practice placements and partly on the amount of social skills and emotional maturity that is required of the nursing novice. Though it is difficult to make confident statements about students' abilities in these areas, it is suggested that the areas of obstetrics, paediatrics and geriatrics which include those of chronic diseases require a level of skill which is perhaps more confidentially acquired by the third year of study than was present during the earlier years. By the end of the second year students shall have moved from the learning exercises focussing mainly on observation and description, to the learning exercise of recognising that changes in a patient's health state has occurred, and what type of nursing intervention is required. This necessitates the student to acquire skills in identifying the degree and nature of change in a patient's health state, in developing an ability to identify the patient's needs for nursing care and to discuss the implications of those needs.

The fourth year of nursing practice placements will use the second term as a consolidation period underpinned by a course in nursing administration. This period will also function as a pre-registration period and will be completed with the fourth GNC Practical examination.

(i) Community nursing:

As each clinical placement unfolds, subject to availability and patients' agreement, students should find themselves patients they have nursed, or will nurse, or have monitored their nursing care, to visit in their homes at varying intervals which should ideally include pre- and post-hospitalisation visits to discover patients' expectations of and about their hospitalisation, its effects, and the effects of the illness on the patient's usual environment, the social milieu. The area of exploration in this exercise will be a description of the patient's home, of the patient's congruity with his/her environment, of specific information related to this environment, the meaning of the illness for the patient and his/her family, the mode or lack of compliance with medical and or nursing interventions and any other observations. The exercise

is geared to provide the student with a more global understanding of health care and of the effect of nursing care in particular.

- (ii) there is also planned to be a specific period of 'community' nursing subject to placement arrangements and availability.

3.4.5. GNC practical examinations:

As nursing practice is part of the nursing unit, and as the nursing units are part of the nursing study degree it follows that successful completion of nursing practice, assessed on the basis of the GNC Practical examinations as follows is a necessary and sufficient component of the BSc degree in nursing studies.

- (a) the carrying out of an aseptic technique - to take place during ward experience of the second year
- (b) the administration of drugs; the procedure of carrying out a drug round - to take place during the ward experience of the second year
- (c) the planning and carrying out of nursing care required by a patient during a span of duty - to be completed during the ward experience of the third year
- (d) the ward organisation including the handing over of one shift to the next - to be completed during the ward experience of the fourth year.

Appendix C

Calculations of hours:

Year i: Term 1, 2, 3

<u>Unit Value:</u>	<u>Subject:</u>	<u>Lectures/Seminars:</u>	<u>Nursing Situation:</u>
1½	Core Course: Nursing	85	640
½	Sociology 1	37	
2	Anatomy & physiology	75	

Year ii: Term 1, 2, 3

½	Nursing theory & practice. General adult nursing	37	500
½	Mental health	37	240
1½	Pharmacology pathophysiology	85	
½	Research methods	37	
½	Psychology	37	

Year iii: Term 1, 2, 3

½	Microbiology	37	
¾	Nursing theory & practice family health	35	500
½	Geriatric nursing	37	240
½	History of nursing	37	
½	Social policy	37	
¾	Research methods	35	
½	Student choice	37	

Year iv: Term 1, 2, 3

1	Sociology of health	70	
½	Nursing administration	37	620
1	Extended essay	Guided Study	

Total nursing practice 2740 hours

Calculations of hours:

1 day = 7 hours

1 week = 18 hours

1 term = 10 weeks = 180 hours. This applies to the first and second term.

3rd Term:

pre-examination = 36 hours

post-examination = 280 hours

References

- 1 Proposal for a BSc degree with Nursing Studies as the Main Field and with a qualification of State Registered Nurse. October, 1978
- 2 Educational Policy Document: GNC 77/9. August, 1977.
- 3 Roper N; Logan W; Tierney A. The Elements of Nursing, Churchill Livingstone, 1980.
- 4 Barr A. 1964 'Measuring Nursing Care in McLachlan G (ed) Problems and Progress in Medical Care. Nuffield Provincial Hospital Trust, Oxford.

Core course in nursing:

1½ course units

The intention of this course is to acquaint the student with themes, issues, methods, problems etc, concerned with such nursing activities as are both basic and common to all general aspects of nursing. It is to provide a conceptual framework within which students can view nursing practice, and to introduce some of the topics which are studied in greater depth in subsequent nursing and other units. While those subsequent nursing units will cover specific areas, the core of nursing must be sought within a foundation course upon which the others are built. Basic to nursing activities is the maintenance of physical and psychological functioning which sustains health, the prevention of disease and the care of the sick in that order, all of which takes place in a variety of settings.

The objectives of this course:

- (a) students to become conversant with what is understood by nursing, what it constitutes and who does it.
- (b) students to become conversant with the institutions inside which health care delivery takes place
- (c) students to become conversant with an approach to health that supports and directs their patients'/clients' varied coping mechanisms
- (d) students to become conversant with a variety of approaches to nursing care.

Content:

Introduction to nursing and the nursing profession; the roles of the nurse and other health service personnel; care/cure dichotomy and the meaning of health and illness; institutions delivering illness care; comparative systems of care; theoretical approaches and 'models'; 'ADL' (activities of daily living) principles of function sustaining physiological and psychological health; formulation of goals, assessment and needs of nursing work.

Teaching methods: Lectures/seminars/practical work on wards.

Assessment : Course work, written examination.

(October 1983)

NURSING PRACTICE COURSE PLAN: SOCIAL, BIOLOGICAL AND BEHAVIOURAL STUDIES

<u>Year</u>	<u>CORE COURSE</u> 2 units		INTROD. SOC. THEORY <u>½ unit</u>	ANATOMY AND PHYSIOLOGY <u>1½ units</u>	
1	GEN. WARDS PRACTICE				
2	NURSING OF THE ADULT SICK <u>1 unit</u>	MED/SURG. PRACT.	SOC. OF MODERN BRITAIN <u>½ unit</u>	PHARMACOLOGY AND PATHOPHYSIOLOGY <u>½ unit</u> Introduction	HUMAN RELATIONS <u>½ unit</u>
3	NURSING ISSUES OF FAMILY HEALTH <u>¾ unit</u> CHILD GROWTH & DEVELOP- MENT	PAEDIATRIC NURSING COMMUNITY NURSING OBSTETRICS AND NEONATOLOGY	HEALTH POLICY <u>1 unit</u>	RESEARCH METHODS <u>1 unit</u>	EXTENDED ESSAY <u>½ unit</u>
4	NURSING MANAGEMENT <u>½ unit</u> NURSING ISSUES IN AGEING <u>½ unit</u>	CONSOLID- ATION PERIOD IN GENERAL NURSING PRACTICE GERIATRIC NURSING	SOCIOLOGY OF HEALTH AND ILLNESS <u>1 unit</u>	APPLIED RESEARCH METHODS <u>½ unit</u>	EXTENDED ESSAY <u>½ unit</u>

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