**Education of nurses and health visitors in group practice**

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A working party on education and training of the family health care team (Royal College of General Practitioners, 1969), drew attention to the need for training in a teaching health centre. The General Nursing Council (1969) in its syllabus has indicated the need for future nurses in training to be introduced to the concept of community care. With effect from 1971 every nurse in training must select one option from psychiatric nursing, geriatric nursing, obstetrics, and community care. With effect from 1975 two options must be selected. Challis and McKinlay (1971) recently described their experiences in a hospital Family Practice Unit teaching student nurses.

In a group practice of eight principals working with an attachment of health visitors, district nurses and midwives, and full supporting secretarial staff, a teaching programme has been developed over the past three years for nurses and health visitors. Additional instruction is given outside the centre but this is being reduced as more space becomes available within the centre.

**Teachers**

In addition to the eight principals, a trainee medical practitioner and visiting students participate in the courses. The latter are often able to comment with benefit to all participants as they themselves are still very much involved in the learning process.

The complement of attached staff is one health visitor with special administrative experience (group adviser), one health visitor with special teaching experience (field work instructor), two health visitors, two midwives, one district nurse, one state enrolled nurse, and one part-time male nurse.

The senior receptionist of the group practice (a former midwife) also takes part. The local social services, through close liaison, contribute to some of the courses described later.

Lastly, regular consultation with other tutors at county and divisional level, hospital nursing tutors, and college course tutors have been invaluable in constructing the courses.

**Pupils**

(1) **Student nurses**

The practice course has been attended by 172 student nurses in their second year of training at a local district hospital. They have come from 24 different countries:

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The nurses attend once only in groups of six, and stay for two hours, this period being divided into five sessions.

The first is taken by a general practitioner, the second by a nurse in the treatment room with a series of patients, the third by a receptionist going round the centre and ending in the common room where the health visitor is waiting for the fourth session. After this all the participants meet for informal discussion. The time available is very short but questions are encouraged at all stages. The content of the course is as follows:

1. General practitioner (20 minutes): Structure of the National Health Service—structure of general practice—work of general practice—patient and family at home—how a patient gets to
hospital—communication—nurse—patient relationship—patients’ reactions to illness—convalescence and rehabilitation—prevention in the community.

2. Nurse (20 minutes): Treatment of patients—equipment used—register of patients—pathology specimens.


5. Entire group (40 minutes): General discussion—questions—questionnaire for each student.

(2) District nurse training course

One lecture is given to this course which is organised by the county health and welfare department at their training centre.

The content of the lecture is as follows: drugs—ethical and legal considerations and their use in the surgery and home—labelling of containers—special dangers for infants—dangerous drugs and fourth schedule poisons—dependence on drugs—legal control—injectins—new drugs—allergies and desensitisation—disposal of unused drugs—incompatability of drugs.

(3) Practical work instructors’ course

One lecture demonstration is given to this course which is also organised by the county health and welfare department. Diagnostic tests is the subject of this lecture given to experienced district nurses by a general practitioner with demonstrations by a nurse.

The content of the lecture demonstration is as follows: collection of pathology specimens—measurement of blood pressure—haemoglobin estimation—tonometry—ear examination—cervical smears—visual acuity—weight and height measurements—respiratory function tests.

(4) Health visitors’ course

A series of eight lectures is given to health visitor students on current medical problems seen in general practice. This takes place at a college of further education and there are usually about 20 students. Adequate time is allowed for questions and discussion.

The content of these lecture discussions is as follows:

A general practitioner’s view of the impact of disease, disability and mental disorder, upon individual, family and community.

The organisation of general medical practice in the 1970s to cope with current medical-social problems.

Challenge and opportunity for the health visitor in the general practice team.

Screening and health checks in general practice.

Psychosomatic disorders in general practice. (1)

Psychosomatic disorders in general practice. (2)

Other current medical problems seen in general practice and their management.

The computer.

(5) Field work instructors’ course

This course is given at the practice to groups of eight health visitors attending a course for field work instructors at a college of further education. The students attend at the practice for a whole day and bring their own lunch. Discussion rather than lecture is the aim.

The content of the course is as follows:


Organisation and management of attached staff—Group adviser. Role of team leader and versatility of duties—availability of resources moulding the team—communication, liaison and motivation—opportunities for development.

The midwife in group practice—Midwife. Booking at hospital—antenatal care with district midwife in co-operation with general practitioner—liaison with hospitals—48 hour discharge.

Voluntary services—General practitioner. Definition—motivations—needs of society—recruitment, selection, organisation, training—relationship with professional workers.

Geriatric services—General practitioner. Medical care—primary care team—hospital geriatric unit—discussion on living accommodation.

Health education—General practitioner. What do we understand by health education?—in what way do we see our roles as educators?—can the aims be achieved more realistically in the school setting rather than in the home?

Social work in the community—Two social workers. A seminar with two social workers to consider the present and future work with the group practice.

Free discussion—General practitioner. An opportunity to discuss any of the problems that have arisen during the day and any other relevant matters.

Objectives and results

The objective of the courses is to show community care by the primary care team, with emphasis on prevention. All the instruction is based on work which is carried out and has been developed by the team. The health visitor is defined as a nurse with post registration qualifications. The basis training in community care for both is the same and in this course nurses benefit by an early contact with health visitors.

The student nurses were asked to complete a short questionnaire after their session; 160 considered the arrangements satisfactory, 168 found the demonstration interesting, 167 indicated they would like to visit a patient at home with a member of the staff and the same number considered that they had adequate opportunity to ask questions. They were also asked for general remarks and the most frequent comments were how valuable it was to know about care outside hospital and a request for more time at the group practice.

The lectures given as part of the county educational programme have been well received. However, half-day courses providing seminar instruction at the practice are in active preparation and are expected to begin soon.

The field work instructors' course is intended to stimulate discussion and an exchange of ideas, and in this would appear to be successful. The content is probably too much for the time allowed and there will have to be some adjustment. A questionnaire was completed by all the students to assess the value, presentation and the inclusion or exclusion of topics in future courses. No major changes have been indicated but the short length of the course is the major problem.

Recent reports such as Doctors in an Integrated Health Service and The Organisation of Group Practice have considered the organisation of group practice and the work of the community health team. If this team is to be able to give adequate care a programme of education is necessary and must be developed and taught by the primary care team in the community.

Acknowledgements

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References