TWI methods of teaching auxiliary nursing personnel

BY OLIVE WHITE, R.N.

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King County Harborview Hospital has instituted a training program for auxiliary workers to compensate in increasing measure for the decrease in its professional nursing staff. In 1943, this 500-bed hospital employed thirty-five helpers; in 1945 it employed 100; now it employs 125.

The director of nursing service realized that the care given by Red Cross nurse's aides was excellent because they were carefully instructed in specific procedures. Their work demonstrated to the public and to the nursing profession that the trained nonprofessional worker has a real place in ward service and in bedside nursing.

The auxiliary worker has rarely come to us with any hospital experience. She was formerly expected to learn “on the job,” and she was paid while learning. But even the more experienced head nurses did not have time to teach. The turnover in ward helpers was staggering. Some left because they were not temperamentally fitted for the work; others because they felt helpless and useless; or they felt themselves ignored. They were “in the way”; they were not taught how to function usefully. The standard and quantity of work was unstable; the morale was low.

An instructing supervisor of auxiliary workers appeared to be necessary if efficiency were to be created. In January 1945, the hospital appointed a registered nurse to orient, instruct, and supervise these workers.

Planning the instruction

The new auxiliary workers are not a homogeneous group. They show greater variety in education, social background, and temperament than do student nurses. Because of this, classroom instruction and the academic approach is considered undesirable and impracticable, if not impossible. The instructor of ward helpers needs to be personally interested in them. The worker’s “learning process,” from the standpoint of the worker, must appear to be on a co-operative enterprise basis. The instructor should teach always with a “let me show you how” attitude. A demonstration by the instructor, a doing of the procedure together, a supervision of the worker’s first and second performances; this is the technique of vocational training.

Facts and skills can be presented more effectively to the nonprofessional worker when instruction is used to give courage and confidence; in short, when it is sympathetic. The instructor should have a vision of the future possibilities of a vocational training program, and should be convinced of the high worthiness of integrating an auxiliary group into the nursing service. She must make certain that her instruction is in harmony with established hospital procedure. In hospitals with which schools of nursing are associated, she should attend the classes in nursing arts in order that her instruction never contradict the established nursing procedures of the school and hospital.

In a series of conferences attended by our director of nursing service, the director of the school of nursing and her staff, and all instructing supervisors and head nurses, the functions of auxiliary workers were defined and classified. Agreement was immediate upon one point: This training would be given upon an individual basis, limited in each case only by the capacity of the individual to grasp and to follow the instruction.

Eventually, the activities of nonprofessional workers were classified in four divisions. All new workers would be expected to grasp thoroughly the duties of the first category and progress as ability permitted into the functions of Groups II, III, and IV. The classification follows:

1. Housekeeping duties
   - Clean sterilizers
   - Scour and boil enamelware
   - Scour and boil bedpans, urinals
   - Clean utility room, supply cupboards, linen-room, bathroom
   - Wash rubber sheets, tubing
   - Fill toilet paper and towel containers
   - Make newspaper supplies; waste bags, isolation squares
   - Wash beds, bedside stands, chairs, sills, sideboards, standards, cradles, etc.
   - Tidy ward: flowers, ash trays, spatum cups, adjust blinds

2. Transportation and communication
   - Make lists of daily supplies needed
   - Get supplies from central supply, laboratory, pharmacy, linen-room, surgery
   - Take papers and records to proper offices
   - Assist with patient transfers
   - Transport patients to X-ray and therapy departments

3. Patient care
   - Pass wash water and mouthwash
   - Wash helpless patients (hands and faces)
   - Pass trays; feed helpless patients
   - Pass drinking water at routine hours
   - Pass bedpans and urinals routinely
   - Test urines for sugar
   - Check fluid intake and output
   - Dress and undress patients
   - Make out clothes lists on admission
   - Make up beds: closed, open, ether, etc.
   - Give routine incontinent care
   - Give simple decubitus care
   - Give enemas
   - Take temperatures
   - Know isolation and gown technic
   - Give bed baths; tub baths
   - Give post-mortem care

4. Clerical duties
   - Chart morning and afternoon graphics
   - Chart stools
   - Keep adequate supply of charts assembled
   - Add new sheets to patient's charts as needed
   - Fill in headings on admission and on all additional sheets
   - Check charts upon discharge of patient
   - Take charts to information desk upon patient's discharge
   - Rule census book
   - Fill in admissions and discharges
   - Keep temperature book ruled, room and bed numbers filled in
   - Make out time slips for following day
   - Check yesterday's time slip for errors
   - Keep up "critical" and "unsatisfactory" lists
   - Keep up "stool" and "bath" lists
   - Make skeleton for daily ward report
   - Order: I.V. sets, repairs, linen
   - Check supply cupboards and note needs
Make weekly supply requisition
Put supplies away
Keep desks and charting tables clean and tidy; supply with stationery
Answer telephone and relay messages
Collect money for newspapers
Care for old requisition books on floors
Pass mail, flowers, packages
Paste identification cards to beds
Clean and check locked cupboard and one behind desk
Assist with visitors

The technic of ward helper instruction is not that of the nursing arts laboratory and classroom. It is streamlined; it is instruction "on the job." In January 1945, Training Within Industry Service of the War Manpower Commission made available to our teaching supervisors and head nurses its course in job instruction. This did much to stabilize our program for ward helper training.

TWI achieved the instruction of a new worker on a job in four steps: The instructor must (1) prepare the worker; (2) present the operation; (3) try out performance, i.e., have the worker do the job, the instructor correcting errors; (4) follow up, i.e., "put the worker on his own."

**Table 1**

At the present time, our corps of one hundred auxiliary workers is distributed among these four types of duties as follows:

<table>
<thead>
<tr>
<th>Type of Duty</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housekeeping duties</td>
<td>20</td>
</tr>
<tr>
<td>Transportation and comm.</td>
<td>20</td>
</tr>
<tr>
<td>Patient care</td>
<td>80</td>
</tr>
<tr>
<td>Clerical duties</td>
<td>5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>125</td>
</tr>
</tbody>
</table>

**Table 2**

Auxiliary workers giving patient care are distributed over the three "shifts" as follows:

<table>
<thead>
<tr>
<th>Shift</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>7:00 A.M.-3:30 P.M.</td>
<td>42</td>
</tr>
<tr>
<td>9:00 A.M.-5:30 P.M.</td>
<td></td>
</tr>
<tr>
<td>10:00 A.M.-6:30 P.M.</td>
<td>18</td>
</tr>
<tr>
<td>2:30 P.M.-11:00 P.M.</td>
<td>20</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>80</td>
</tr>
</tbody>
</table>

**Orientation**

The first step is extremely important.

In TWI parlance, "to prepare the worker" means to put her at ease; to state the job and find out what she already knows about it; and to get her interested in learning the job. Since a ward helper ultimately may be taught some fifty jobs, we emphasize careful orientation when the worker is employed, thus minimizing or eliminating the effort "to prepare the worker" as each new job is approached.

The new worker is met at the nursing service office. This morning it is Betty B. who has been assigned to women's surgical ward. She is introduced to the instructor who sits down in a quiet, informal spot and talks to her.

"Have you ever worked in a hospital before, Betty?" she asks.

"No, I haven't," Betty replies.

"I noticed on your application that you have had some experience as a waitress. This will stand you in good stead, because you already know how to get along with people, and know the value of organizing your work. I will be at your side most of the time for the next day or two, and will work with you to help you learn your duties. At first, you will be doing mostly ward housekeeping. You will find this an

**Table 3**

<table>
<thead>
<tr>
<th>Time</th>
<th>Duties</th>
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<tbody>
<tr>
<td>7:00 A.M.</td>
<td>Pass and collect wash water</td>
</tr>
<tr>
<td>7:45</td>
<td>Pass and collect breakfast trays</td>
</tr>
<tr>
<td>8:30</td>
<td>Supplies and requisitions</td>
</tr>
<tr>
<td>9:00</td>
<td>Scour and boil wash basins</td>
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<tr>
<td>9:30</td>
<td>Wash pitchers and drinking glasses. Pass drinking water.</td>
</tr>
<tr>
<td>10:30</td>
<td>Clean rooms and bed units</td>
</tr>
<tr>
<td>11:20</td>
<td>Tidy utility room</td>
</tr>
<tr>
<td>11:50</td>
<td>Pass lunch trays</td>
</tr>
<tr>
<td>12:20 P.M.</td>
<td>Worker's lunch period</td>
</tr>
<tr>
<td>12:50</td>
<td>Pass bedpans</td>
</tr>
<tr>
<td>1:30</td>
<td>Cleaning: Mon. and Thurs. - cupboards</td>
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<tr>
<td></td>
<td>Tues. - linen-room</td>
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<tr>
<td></td>
<td>Wed. - screens, etc. cetera</td>
</tr>
<tr>
<td></td>
<td>Fri. - cubicle windows</td>
</tr>
<tr>
<td>2:30</td>
<td>Pass drinking water</td>
</tr>
<tr>
<td>3:00</td>
<td>Tidy utility room</td>
</tr>
<tr>
<td>3:30</td>
<td>Off duty</td>
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<tr>
<td>3:45</td>
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<tr>
<td>4:15</td>
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<td>5:00</td>
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<td>8:30</td>
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<tr>
<td>10:15</td>
<td></td>
</tr>
<tr>
<td>11:00</td>
<td></td>
</tr>
</tbody>
</table>

As shown in Table 2, the night ward helpers work a straight shift from 11:00 P.M. to 7:00 A.M. During this time they assist the nurse in charge with patient care and are responsible for the routine nightly sterilizing.

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interesting way to learn the ward and to become at home in it before you go on to other learning."

"What will I learn to do? Will it all be cleaning?" Betty may ask at this point.

"When you are quite familiar with all phases of ward housekeeping, you will be shown where other departments of the hospital are located, how to keep your ward supplied with daily requisitions, and, possibly, how to take a patient to x-ray. Later, if you show an aptitude, you may be taught how to give baths to bed patients, or how to take temperatures."

"Oh, will I have to take temperatures?"

"Not at all, if you prefer not to learn. No worker need do anything beyond housekeeping duties if she does not feel capable. However, there are opportunities here for many types of learning if you are fitted for it. Shall we go to the ward now? I want you to meet the ward supervisor and your head nurse."

Getting off the elevator, the orientation continues:

"In this hospital, except on the main floor, all corridors run north and south. When you turn right on leaving the elevator, you are going south. If you will remember this, you are not apt to lose your way. Your assignment will be women's surgical service, Fourth Floor South. This is the fourth floor. Now, which direction do we go?"

Betty turns toward the south ward.

After the introductions, the instructor and Betty make an unhurried tour of the floor. She is first shown where the restroom for the personnel is located; then the wards are visited, and the bed numbering is explained.

"The beds in each room number from left to right, so that this bed to your left, inside the door, is bed number one. The room number is 402. Now, this room across the hall is 405. Which is bed number one in this room?" Betty tells the instructor, who tests her repeatedly on bed numbering as they walk through the wards.

The linen-rooms, bathrooms, and utility rooms are examined. In one of the latter a lesson is given on the use of the bedpan hopper:

"This is the bedpan hopper. You will be asked to empty and wash bedpans, so I will show you how it is done. (The instructor takes a pan from the rack.)"

"Hold the pan level with your right hand, like this (suiting the action to the word). Raise the hopper lid by pressing this lever with your foot. (The instructor points to the lever, then presses with foot.)"

"With your left hand lift up on this black-handled lever (action). See how it opens the claws that will grasp the pan? Place the pan on the rack between the claws (action). Drop the lever, like this (action). Do you see that the claws close on the pan? They will hold it in position while the water is flushed through it. The water rushes from this pipe which opens upward (pointing)."

"This lever (pointing) starts the water, but do not touch it until after you have closed the hopper lid. If you do, the water will spray out of the hopper. I now close the lid, and pull the lever. Hear the water? "The flow has stopped; I raise the lid (foot action on lever). Release the pan by lifting this black-handled lever (action). Now lift the pan from the rack and carry it to the sink (action). Here is the bottle brush; see, it is long-handled. And here is the jar of soap solution. Pour some solution into the pan and wash the pan with the long brush. Run the brush well up under the curved edge. (Suit action to words.) Now, watch me rinse the pan with hot water. The hot water not only cleanses the pan; it makes it dry more rapidly. Now, see where I put the pan away in the bedpan closet."

"Now, let me see you take a pan to the hopper, empty it, wash it, and put it away."

Betty goes through the process, but may forget to drop the bedpan rack. She

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**Table 4**

Job Break-Down Sheet for Training Man on New Job

<table>
<thead>
<tr>
<th>PART—EQUIPMENT: Thermometers, containers, cotton, bichloride, water.</th>
<th>OPERATIONS:</th>
<th>(1) Read thermometer;</th>
<th>(2) Take temperatures;</th>
<th>(3) Care of equipment.</th>
</tr>
</thead>
<tbody>
<tr>
<td>IMPORTANT STEPS IN THE OPERATION</td>
<td>KEY POINTS</td>
<td>Key point: Anything in a step that might</td>
<td>Make or break the job</td>
<td>Make or break the job</td>
</tr>
<tr>
<td>Step: A logical segment of the operation when something happens to ADVANCE the work</td>
<td></td>
<td>injure the worker</td>
<td>injure the worker</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Make the work easier to do, i.e., &quot;knock,&quot; &quot;trick,&quot; special timing, bit of special information</td>
<td>Make the work easier to do, i.e., &quot;knock,&quot; &quot;trick,&quot; special timing, bit of special information</td>
<td></td>
</tr>
<tr>
<td>I. Read thermometer:</td>
<td>1. Markings, numbering, arrow (use model)</td>
<td>1. Solution beyond patient's reach</td>
<td>1. Cotton moistened with water</td>
<td></td>
</tr>
<tr>
<td>1. Explain thermometer</td>
<td>2. On model thermometer</td>
<td>2. Dry cotton</td>
<td>2. Cotton in bottom of container to protect thermometers</td>
<td></td>
</tr>
<tr>
<td>2. Check learning</td>
<td>3. To regular thermometer</td>
<td>2. From bulb to fingers</td>
<td>3. Fill water container</td>
<td></td>
</tr>
<tr>
<td>3. Transfer learning</td>
<td></td>
<td>3. Place under tongue</td>
<td>3. Shake down to 96° F.</td>
<td></td>
</tr>
<tr>
<td>II. Take temperatures:</td>
<td>1. Instruct patient to keep lips closed</td>
<td>4. Remove and read</td>
<td>1. Check ward, bed, name</td>
<td></td>
</tr>
<tr>
<td>1. Thermometer from solution</td>
<td>2. Leave three minutes</td>
<td></td>
<td>2. Record temperature</td>
<td></td>
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<tr>
<td>3. Place under tongue</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>4. Remove and read</td>
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</tr>
<tr>
<td>5. Return to container for two minutes</td>
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<tr>
<td>6. Record in book</td>
<td></td>
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</tr>
<tr>
<td>7. Repeat operation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>III. Care of equipment:</td>
<td>1. Wash containers</td>
<td>1. Soap and water</td>
<td>1. Soap and water</td>
<td></td>
</tr>
<tr>
<td>1. Wash containers</td>
<td></td>
<td>2. Handle thermometers carefully</td>
<td>2. Handle thermometers carefully</td>
<td></td>
</tr>
<tr>
<td>2. Reset tray</td>
<td></td>
<td>1. Bichloride to &quot;collar&quot; level in thermometer container</td>
<td>1. Bichloride to &quot;collar&quot; level in thermometer container</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>2. Cotton in bottom of container to protect thermometers</td>
<td>2. Cotton in bottom of container to protect thermometers</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>3. Fill water container</td>
<td>3. Fill water container</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>4. Fill cotton container</td>
<td>4. Fill cotton container</td>
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<tr>
<td></td>
<td></td>
<td>5. New paper &quot;waste&quot; cup</td>
<td>5. New paper &quot;waste&quot; cup</td>
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</tr>
<tr>
<td></td>
<td></td>
<td>6. Pencil on tray</td>
<td>6. Pencil on tray</td>
<td></td>
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</tbody>
</table>
is reminded immediately of her error—one essential of job instruction being to correct errors the first time they are made. If this first performance has not been easy for the worker, she is asked to repeat it until the instructor is sure she understands.

In teaching the worker a new job, the instructor must remember that “telling her how” is not sufficient; “showing her” is not sufficient. Rarely does the worker achieve proper performance unless the instructor combines into the teaching process telling, showing, “return demonstration,” and correction.

A demonstration of hand washing, and a simple discourse on the value of cleanliness to both the patient and worker, follows logically at this point.

How much better is Betty’s preview instruction on washing bedpans than was Barbara’s instruction in “the old days” when she was expected to fit unaided into a highly-gear’d ward program and to learn by the trial and error method! No one told Barbara that the top of her utility wagon was removable. Attempting to steer the vehicle, she lifted the top, unexpectedly dashing jars and bottles to the floor in a broken heap. How was she to know the top was not fastened to the chassis? Barbara gained confidence rapidly and by mid-morning wondered why she had ever been afraid of the thing she was going to try to do. Vocational instruction is successful when the instructor takes no knowledge on the part of the new worker for granted.

The instructor must anticipate all possible situations, and prepare the new worker to meet them, thus avoiding damage, injury, and embarrassment.

### Procedure book and timetable

The instructing supervisor of auxiliary workers compiled a procedure book of all jobs to be taught ward helpers, using the TWI method of job analysis. The sheets from the procedure book are for the use of the instructor only. They are the instructor’s reminder to herself—her lesson plans. They are never given to the worker. TWI constantly warns against the inclusion of too much detail. Hence a lesson plan consists of “important steps” and “key points.” An example of such a “job breakdown” is shown in Table 4. The

#### Table 5

<table>
<thead>
<tr>
<th>Timetable</th>
<th>Ward helpers</th>
<th>Ward 4 South Surgical service</th>
</tr>
</thead>
<tbody>
<tr>
<td>June</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name</th>
<th>Housekeeping</th>
<th>Utility room</th>
<th>Drinking water</th>
<th>Care of patients, etc.</th>
<th>Repairs, cleaning, etc.</th>
<th>Pass tray</th>
<th>Bed pan</th>
<th>Make empty bed</th>
<th>Care and first aid</th>
<th>Patient-stretcher</th>
<th>Transport-patient-stretcher</th>
<th>Incontinent care</th>
<th>Bath</th>
<th>Low enemas</th>
<th>Temperatures</th>
<th>Fluid intake</th>
<th>Fluids</th>
<th>Simple deaths</th>
<th>Isolation and gown technic</th>
<th>Care of the deceased</th>
<th>Care of the dying</th>
<th>Early duty</th>
<th>Midnight hours</th>
<th>Treatment-room</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alice A.</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
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<tr>
<td>Betty B.</td>
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<tr>
<td>Carol C.</td>
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<td>Donna D.</td>
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<tr>
<td>Enid E.</td>
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<tr>
<td>Gladys G.</td>
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<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Helen H.</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>5½</td>
<td>5½</td>
<td>5½</td>
<td>x</td>
<td>x</td>
<td>x</td>
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<tr>
<td>Janet J.</td>
<td>x</td>
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<td>/</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Excellent</th>
<th>May join Waves in July.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ward clerk.</td>
<td>----------------------------</td>
</tr>
<tr>
<td>Could be developed to replace Alice. Dependable.</td>
<td>----------------------------</td>
</tr>
<tr>
<td>Slight detail. Hold to present work.</td>
<td>----------------------------</td>
</tr>
<tr>
<td>Dependable but learns slowly. Lacks confidence. Help her.</td>
<td>----------------------------</td>
</tr>
<tr>
<td>Learns quickly. Will be good worker. Thorough.</td>
<td>----------------------------</td>
</tr>
<tr>
<td>Poor vision.</td>
<td>----------------------------</td>
</tr>
<tr>
<td>Good leadership material. Evenings only.</td>
<td>----------------------------</td>
</tr>
</tbody>
</table>

**LEGEND**

- **X** — Worker knows job.
- **/** — Learning not needed.
- **5½** — Must know this job by this date.
- **·** — Has not been taught this job.
- **O** — Will not be taught.

**June 1946**
breakdown, when interpreted to the worker, is augmented with the TWI tech-
nic of "tell, show, and illustrate."

The entire ward helper program is one of teaching "mechanics," rather than
nursing arts. For this reason there may appear to be an overemphasis on key
points relating to the mechanics of the procedure and little attention to the ob-
servation of the patient. The ward helpers work with convalescent patients and we
believe they are "told" and "shown" enough to ensure safety to their patients.

In addition to the procedure book, the instructor keeps what TWI calls a "time-
table." It contains a sheet for each ward showing the workers on duty, their qualifi-
cations, handicaps, and the procedures in which they are competent. This timetable
reminds the instructor of the worker-need and the training-need on each ward. On it
are recorded vacancies, dates of approaching vacations, leaves, and resignations. A
review of the timetable shows the instructor, in TWI parlance, "What worker must
be taught what job by what date" if the ward is to be taken care of efficiently.

A plan for supervision

The new worker remains under the personal supervision of the instructor until she
has received adequate basic instruction to function in ward housekeeping. This may
take two days; it may take a week. The instructor, at any point during this period
may advise the nursing office to discon-
tinue the employment of a worker with little aptitude or without proper attitude.
The instructor turns the worker over to the head nurse with a memorandum of the
"jobs" she is to perform. The daily
assignment of work to properly instructed
ward helpers is a function of the head
nurse. Head nurses hand memoranda to the
instructor requesting review of demon-
strations for slow or backsliding workers.
The instructor recommends promotion
from housekeeping duties to "transporta-
tion" and to "patient care."

The relation of the instructor of auxil-
iary workers to the supervisor or head
nurse is quite analogous to that of a nursing
arts instructor to these same persons. Just
as the head nurse may instruct a student,
she may instruct a ward helper. But,
just as she is usually thankful for a student
well instructed by the nursing arts in-
structor, so is she appreciative of the value
of a well-instructed auxiliary worker. And,
just as the nursing arts instructor "follows
up" the work of students in the hospital,
so must the supervising instructor of auxiliary workers carefully watch the per-
formance of ward helpers. In no other way
can she judge the merit of her instruction.

**Results to date**

The program of supervision of auxiliary
workers has greatly improved morale in
the group, developing in them a keen
interest and sense of personal responsi-
ability. It has accomplished standardization
of work methods and a quality of perfor-
ance that is proving its efficacy. Auxiliary
workers now feel that they are a valued
part of the nursing personnel. Better type
women are applying for work and, because
the turnover is less, the hospital is selecting
personnel with ever greater care.

Orientation, instruction, and supervi-
sion of the nonprofessional women by a
specified leader has lightened the load of
responsibility of head nurses and has at the
same time made possible release of staff
nurses for more vital duties. But above all
it means that, even in time of nurse short-
age, patients are receiving good care.

What is the future of this program? In
the April 1945 Journal, Edna S. Lepper
speaks of "the demonstration of the worth
of service given by nonprofessional or
auxiliary personnel" as one of lasting value
which has resulted from our difficult ex-
periences with nursing service in war time.
We are in complete accord. Our corps of
ward helpers is here to stay. The endless
repetition of simple nursing procedures is
of doubtful educational value to the stu-
dent nurse preparing for a professional
nursing career. And it is poor economy to
take the time of women who have invested
from three to five years in education and
training above the high school level for the
performance of elementary procedures
which may be taught "on the job" to
women of appropriate attitude and apti-
itude.

Our corps of workers for elementary
patient care, now numbering 80 will be
increased as promotions can be made.
Without further expansion, the "split
shift" cannot be completely eliminated
nor our daily hours of nursing care per
person be increased to a highly acceptable
standard. The continued success of the
program depends upon continuity of in-
struction and supervision and upon in-
creasing co-operation and understanding
on the part of head nurses and graduates.

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**Bulletin boards**

**BY MARY E. MACDONALD, R.N.**

**AND MARY WALLACE, R.N.**

Miss Macdonald is educational director at Burbank Hospital School of
Nursing, Fitchburg, Massachusetts. She was formerly instructor in sciences
at Worcester City, Worcester, Massachusetts. She is a graduate of Massa-
chusetts General, has her A.B. from Emmanuel College. Miss Wallace is
instructor in nursing at Burbank, was formerly assistant instructor in nursing
at Worcester City. She also is a graduate of Massachusetts General.

It is our purpose to show here by word
and illustration what we have been able to
accomplish at the Burbank Hospital School
of Nursing through the application of
principles published in previous issues of
this Journal.¹, ²

The educational bulletin is not a recent
innovation in our school. Bulletin boards,
located in the classrooms, corridors, and
library, have been used in the past for
posting illustrative material and current
items, with the hope of supplementing
lesson plans and enriching the learning
process of the student. It was not until the
fall of 1945, however, that we made a
definite attempt at an organized, corre-
lated presentation of material. A teaching
project by the history of nursing class sup-
plied the impetus, with a bulletin presenta-
tion, cleverly executed in white on a red
background and entitled "The Cross—Its
Diversified Forms and Meanings." The at-
tention, interest, and favorable comment
received left us with but one resolve:
planned, attractive, and effective bulletins in
the future. We had these subsequent ex-
hibits photographed and the prints have
been filed for future reference.

Our teaching bulletins are located in the

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² Davis, Henrietta: Bulletin Boards in the Hos-

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