PREAMBLE

The practical nursing program of Kapiolani Technical School is one of four departments offering courses of instruction, as was described in the report of the survey made in 1961. There have been no added courses of instruction in the health careers field, the only other one being offered is the course for Dental Assistants. There are no separate courses in practical nursing under the Manpower Act; instead, students needing employment are referred to the school by the U. S. Employment Office and students needing financial assistance are referred by the school to the U. S. Office. All such students are enrolled in the regular program if they have the specified qualifications for entrance. It was said that the relationship between the school and the personnel of the U. S. Employment Office was excellent.

Entrance requirements are the same as those stated in the previous report. The aptitude tests are given by the teachers in the program and scored by the coordinator. Both intelligence and personality tests are administered. Neither the NLN PACE nor the Psychological Corporation tests are used. It was said by the coordinator that PACE had been used at one time, but that the correlation between PACE and satisfactory completion of the course did not seem to be as good as the correlation between the present tests being used and student performance. NLN achievement tests are used to evaluate student progress.

The program is one year in length, including four weeks vacation. The faculty has been increased from three registered nurses to five, with the elimination of the part-time nutritionist. Nutrition is now taught by the coordinator. The four instructors and coordinator are all employed by the school. In addition one instructor is supplied by each of the following cooperating agencies: (1) Kaneohe, the state mental institution, (2) the Kindergarten and Children's Aid Association Pre-school and at (3) Leahi Hospital for rehabilitation. Mr. Raymond Won, the principal of Kapiolani is new, having taken this position only a few months ago.
The entire program of practical nursing has been restructured. Instead of a four-month preclinical period at the school followed by an eight-month rotation plan, the program is now divided into two 24-week parts. During the first 24 weeks, students are gradually introduced to the clinical setting, building up from four hours a week to two days a week and then three days a week. Medical and Surgical Nursing is correlated with the systems taught in Body Structure and Function, while there is concurrent instruction in other basic subjects. The second 24 weeks are divided between pediatric nursing, obstetrical nursing, the well-child nursery, rehabilitation nursing and psychiatric nursing. Instruction is concurrent with practice. (See Master Plan, Exhibit I.)

Student hours in the program remain the same, 37-1/2 - 40 hours per week. However much more of the time is given over to conferences and classroom discussion of patients with less actual patient care contact. Students are not on the floor on Saturdays and Sundays. Classroom instruction totals 767 hours.

Only two classes a year are enrolled, instead of the three being taken at the time of the 1961 survey. There is no tuition fee and admission fees remain the same—$64.50. Recruitment is no problem at this time. There are approximately 200 applications for the fall class of 1964. A total of 130 applicants were being tested at the school on the day following the present survey. From this number the coordinator believes that there can be greater discrimination in selection of students.

Affiliation with Hilo Hospital on the island of Hawaii has been discontinued in line with the recommendation made in the 1961 survey. All cooperating agencies are now on Oahu; this making the program more cohesive and the job of the coordinator less time consuming in travel. Agencies being used are:

- Kaiser Hospital
  - Medical Surgical Nursing
  - obstetrical nursing
  - pediatric nursing

- Queen's Hospital
  - Medical Surgical Nursing
  - obstetrical nursing
  - pediatric nursing

- Leahi Hospital
  - rehabilitative nursing

- State Psychiatric Hospital
  - psychiatric nursing

- Kindergarten and Children's Aid Association
  - observation and study of the well child.

- St. Francis Hospital
  - medical surgical
  - obstetrical nursing
PHILOSOPHY AND OBJECTIVES

There is a written statement of philosophy which is brief, but which incorporates beliefs about practical nursing and about the learning process. The two roles of the practical nurse are delineated. The objectives are concise and spell out what the faculty hopes to assist the student to become. In some instances they show the limitation in expectations; in others, they appear too all-inclusive to be realistic of attainment. There is some question as to whether the entire faculty understands that the objectives are guides to curriculum development, even though they participated in their formulation. (Exhibit II)

ORGANIZATION

No organization chart is on file. In its absence, the relationship of the cooperating agencies to the school program, the place of the Advisory Committee in the structure and the line of administrative authority are not clearly defined. The Chairman of the Department seems to have the responsibility for faculty assignments and coordination of the entire program, yet she appears to be on the same level with the other teachers in certain respects. Her teaching load of the formal instruction is about equal to that of the others, her salary is the same in spite of her added responsibilities and there is some question as to whether the teachers in the program are directly responsible to her or to the principal of the school.

An appointed Advisory Committee exists, but is relatively inactive. It meets, usually, only once a year and its usefulness seems questionable at the present time, except as a means of information sharing.

A job description of each faculty member is on file. For the instructors, this is largely a listing of teaching duties rather than a description of total responsibilities. It was said that these were shared with each instructor but were not used in employing as a part of orientation to each position. Again, no evaluation is made of teacher performance by the coordinator. Instead, Mr. Won, the principal of Kapiolani sits in on initial classes and evaluates the teachers during their period of probation as instructors in the program.

Agreements with each separate cooperating agency are on file with responsibilities of the school and the agency well defined. Each is signed by each party to the contract.

It does not appear that the coordinator has a budget to work within. Instead, needed materials and books are supplied, upon request. When extra staff is needed, it is asked for. Secretarial staff at the present time is poor. The secretary hired for the program has been absent a number of days and the coordinator has had a very difficult time carrying out here own duties and incorporating many that should be the responsibility of secretarial staff.
FACULTY

Three of the instructors share in the teaching of the basic subjects, which includes conditions of illness, during the first 24 weeks. The coordinator teaches two of the subjects for a total of 83 - 90 hours. Each instructor is assigned to one of three hospitals in which the students receive their medical-surgical nursing experience. While all the students are taught basic principles in one formal class, they are divided into three laboratory sections. One teacher takes each of the sections and demonstrates the type of techniques used in the hospital to which her group of students will be assigned for clinical experience.

During the second 24-week period, one instructor employed by the school is responsible for all of the clinical teaching and supervision in the area of maternity nursing and pediatric nursing. She is assisted part of the time by one of the faculty members whose major teaching responsibilities are in the first 24-week block of instruction. During this second 24-week period, however, teachers supplied by agencies other than those used for pediatric and maternity nursing are responsible for the supervision of clinical experience and correlated instruction during 12 weeks of the program of any one student.

All teachers, both those employed by the school and those supplied by the agencies, teach full time because of the repetitive nature of instruction for the various groups of students. For instance, instruction in the preschool agency and in the agency for rehabilitative nursing, instruction is repeated 12 times in a year. Pediatric nursing is also repeated 12 times a year and obstetrical six times. This occurs, in part, as a result of two classes a year being admitted. The teaching responsibility is greatest for the instructor responsible for pediatric and maternity nursing since experience in pediatric nursing is given in three hospitals and obstetrical nursing in two hospitals. At two times during the year pediatric nursing is being taught in one hospital while maternity nursing is taught in another. (See Duties of Faculty Members, Exhibit III.)

The qualifications of the faculty are shown in Exhibit IV. All employed by the school have a B. S. degree except one who has been with the program 17 years and who will retire next year. Two of the degrees are in nursing, one in nursing education and one in home economics. The instructor in psychiatric nursing also has a B. S. degree in nursing education.

One of the new instructors has had experience in clinical teaching as well as in nursing service, and has, also three credits toward her Masters Degree. The other has had experience only in nursing service. Both are young and dynamic in their approach to their work.

Faculty meetings of the five employed by the school are held every week. Others employed by the cooperating agencies are unable to attend meetings this frequently, because of distance and responsibilities. Minutes are kept of the faculty meetings and are on file.
STUDENTS

Admission policies for students are the same as those in effect when the previous survey was made in 1961. An admissions committee reviews only those applicants who are questionable, after the Chairman of the Department has selected those which appear to meet admission standards.

Withdrawals of students are still high—sometimes as many as fifty per cent. A fluctuant population in Hawaii, pregnancies or other personal problems were said to be the most common reasons for withdrawal, rather than inability to carry the program of studies. However, as in the past, some of the borderline students accepted because of inadequate numbers to select from present withdrawal or elimination problems. It was thought that with the increasing numbers of applicants, better selection would be made possible.

Health policies and counseling and guidance activities in relation to students remain the same. A Student Handbook, dated 1964, delineates the regulations, policies and plan of instruction, as well as a plan of class organization and responsibilities. The philosophy and objectives of the program are attached. Arrangements for class meetings are timed to coincide with faculty meetings whenever possible. No stipends are paid to students as was true in 1961, and their patient contact hours in the clinical agencies have been reduced to allow for conferences before and after patient care assignments.

In all the classes visited, there was a large amount of student participation with a permissive climate for discussion and frequent use of personal experiences of the students. Interest of the students seemed high and discussions in all of the formal classes attended centered around specific patients being cared for.

CURRICULUM

The organization of the curriculum shows thought and planning on the part of the faculty. With only two classes admitted a year it has been possible to plan instruction in two large blocks. During the first three weeks of orientation, students begin their study of basic subjects and practice skills in the laboratory. At the end of this period they are introduced to that clinical agency where their instruction will continue through the greater part of the program.

The clinical experience begins with four hours a week, then increases to two days a week during the second six weeks, then three days a week during the balance of 12 weeks to complete the first block of instruction. During this time the basic courses continue with medical-surgical nursing starting at the end of six weeks and continuing for 18 weeks.

An attempt is made to correlate medical-surgical nursing with the systems of the body. The plan shows 510 hours of formalized instruction in this block, in addition to conferences and incidental teaching. A separate instructor with one third of the enrolled students (12-15) follows in from the school to each of the three hospitals in which medical-surgical nursing experience is gained.
In the second 24-week period the students remain in the same agency where they have started for the clinical experience and related theory in obstetrical nursing (8 weeks) and pediatric nursing (4 weeks), with the exception in obstetrical nursing for the group of students at St. Francis. For this experience the St. Francis group go to Queen's. Two weeks at the preschool well child agency, two weeks of rehabilitative nursing at Leahi Hospital and eight weeks of psychiatric nursing at Kaneohe, the state mental hospital, is planned for all students. The order in which all of these experiences is gained is arranged in a block system. One third of the group is in obstetrical nursing while one third is in psychiatric nursing, one sixth in each pediatric nursing, preschool well child agency and Leahi Hospital agency for rehabilitation.

The basic subjects are divided into small segments of several hours each, with each of three teachers and the Chairman responsible for the teaching of certain formal courses. Each teacher has one of three sections for laboratory experience in Nursing Skills and adapts the principles taught in the classroom to the specific techniques used in the hospital where her section of students is placed. Outlines are on file for all subjects taught. However, some outlines are detailed while others are topical outlines only with no division into class hours. Some contain a list of teaching aids and experiences. In others these are absent. All contain a listing of reference books and texts.

FACILITIES AND RESOURCES

The physical facilities for the practical nursing program at Kapiolani Technical School have shrunk in accommodating a program known as the Fry-Cook course of instruction using Manpower funds. The cooking laboratory is shared, the lounge once used by practical nursing students has been turned over to the new group and the room used as a library, large classroom and study room, is shared. This creates some cooperative planning and results, in some respects, in difficulty in making the facilities equal to the needs of students.

The library has had 29 new books covering 13 titles added in the past year. The library holdings include many old and out-of-date volumes. Some of the books being currently used were out in the clinical areas where they were available to teacher and students in the various agencies. A new and beautiful library building at Queen's Hospital with medical journals from all over the world may be used by professional and practical nursing students alike. A section of the whole will contain current nursing journals as well.

In the cooperating agencies, the practical nursing students appear to be well received. Medical and surgical areas afford a variety of types of medical and surgical conditions and appear to be adequate in numbers of patients for the number of students. The pediatric and obstetrical units in all the agencies are small in numbers of patients. For example, in the obstetrical unit where students were placed at the time of the survey, the census of 17 in the morning and 12 in the afternoon. In the pediatric unit there was a census of 26 children with four students in this area.

These same facilities are used by professional nursing students but at other times during the year. In the pediatric unit of another agency where four students will be placed, the census of the day of visit was 12. However, the limited experience with sick children is fortified by the two weeks' experience in the well child day nursery.
The students at Leahi Hospital learning rehabilitative nursing appeared to be getting a very worthwhile experience during the two weeks within this agency. The faculty member here (hired by the agency) teaches largely through demonstration of rehabilitative techniques. The formal instruction in rehabilitative nursing precedes this unit of clinical experience and is taught by a member of the faculty hired by the school. Others on the staff of the agency participate through lectures and demonstrations related to their special skills in rehabilitation.

Students in the psychiatric setting at Kaneohe State Mental Hospital were observed taking an active part in the recreation of the mentally ill patients. Some were playing volleyball in the year with male patients; others were playing bingo and various card games in the recreation room. In the class attended, an interesting discussion between students and teacher related to specific patients, their problems and method of handling them was in progress.

In the outlines of the formalized instruction, there is continuing emphasis on the relationships of nurse to patients and the effect of relationships on behavior. Nursing care in relation to group therapy and recreational and occupational therapy appeared to be highlighted, rather than drug and somatic therapies. The instruction as a whole seemed geared to the level of the practical nursing student under the instruction and guidance of a well-qualified teacher in this field.

No field visit was made to the well child day school because of lack of time. This agency was visited in 1961 and appeared to be an extremely meaningful experience area for practical nursing students as a means of learning about growth and development.

EVALUATION TECHNIQUES

Students are given the NLN achievement tests at suitable places in their learning period in addition to teacher-made tests. While raw scores have not been lowered, percentiles on achievement tests are lower than the national norms.

Results on state board examinations have been very good in the last three years (see Exhibit V). The overall averages of students came up above the national mean in 1962 and stayed above in 1963-64 in spite of five failures. There was only one failure after 1958 (in 1961) until this past year 1963-64. The passing score in Hawaii has been raised from 350 to 375. In the 1963-64 examinations, all the students who failed would have passed had the passing score for the state remained at 350. It was told that several of the students who failed had been borderline students in the program.

In the employment areas the graduates appeared to be giving satisfaction and nursing administrators seemed anxious to secure more LPNs.

STRENGTHS OF THE PROGRAM

The faculty appears to be a dynamic and highly motivated group, intent upon providing a well-planned program of instruction. The curriculum has had thoughtful study and revision during the last three years and seems
to be well structured to meet the school's objectives that are attainable. While some of the objectives are so broadly stated as to appear beyond fulfillment in a one year program of instruction, both the statements of philosophy and objectives show thought and a concerted effort to define objectives in terms of practical nursing students' learning and behavior changes.

Reduction from three to two classes of students per year, with an increase of faculty hired by the school has made possible coordinated teaching and supervision of all students. Fewer students are assigned to specific clinical areas at one time, and teachers from the school are able to teach both in the classroom at the school and in the clinical areas—an improvement which should make possible the continuation of threads of learning throughout the whole program of instruction.

The cooperating agencies are well chosen with the objectives of the program in mind. They are all now within easy distance from the school making it possible for students to move back and forth from clinical areas to classrooms at the school when necessary. The students and instructors seemed to be well received in all agencies visited. The service needs of patients appear to be taken care of by sufficient staffing of employed personnel and students are not used for service. Patients to be cared for by students are selected by the instructors from the school in cooperation with the head nurse of the unit and student assignments were sufficiently limited to allow the student enough time to give the necessary nursing care.

The addition of conferences before patient assignment and group conferences and discussion of patients after completion of assignments are additional strengths. Permissiveness in the atmosphere of classes and leadership on the part of students in the discussion of patients' problems were noted. The classes in all clinical areas seemed focused on nursing of the total individual in relation to needs rather than on procedure-centered or disease-centered content.

The program, as a whole, seems greatly improved in respect to the earlier visit three years ago.

RECOMMENDATIONS FOR FURTHER IMPROVEMENT

CURRICULUM

Concern was felt by the faculty because percentiles of Kapiolani students on the NLN achievement tests has not risen in corresponding fashion to the national norms. In looking over all course outlines of classes taught in the first 24 weeks, it appeared that content may still be fragmented into too many short courses that could be integrated. Again, it may be that sufficient time is not being given to the teaching of Fundamentals of Nursing or Basic Nursing Care as it is designated in this particular program. While the curriculum plan shows 55 hours of classwork and 110 hours of laboratory, the number of hours on the instructor's outline for class presentation and demonstration was 28. This course is the backbone of the curriculum and it would appear impossible to give it sufficient attention in 28 hours. A careful analysis should be made of the content in this course and method of presentation with the largest number of hours in basic instruction given over to it. All other courses are background learning for this course which presents nursing measures applicable to all patients and involves skill training.
Note: The apparent discrepancy between the 28 hours of Basic Nursing Care taught by Mrs. Schattenburg and the 55 hours of classwork shown in the curriculum plan is due to the fact that 27 hours of principles and demonstration are carried out by each of the three clinical instructors in laboratory following the general discussion of principles. In this way principles can be related to procedures and patients in the particular hospitals where the students are assigned so that they are not confused by the many minor differences between hospitals in these early weeks.

Since the course content for medical-surgical nursing lists only diseases and does not spell out what is taught in relation to nursing care, it is difficult to see where nursing care really receives the attention it should get in a curriculum focused on preparing graduates for direct patient care. Nursing care seems to get lost in the total content of knowledge presented.

It is interesting to note that while the outlines for pediatric and obstetrical nursing are also lacking in spelling out nursing care, actual teaching in the maternity area was focused on patients and their needs. It is believed, then, that in the clinical area outlines do not show the actual teaching picture as it is being carried out. The teaching is more patient-centered than outlines present it to be.

It is suggested, however, that future faculty conferences in part be given over to a focus on nursing care in all subjects in order that weak spots in the curriculum can be searched out, identified and incorporated in the content both in the outlines and in actual practice. Patients in each clinical area need to be considered in terms of all basic needs relative to nutrition, rest, exercise, elimination, etc., as well as the special needs related to their health deviation. This would give reinforcement and carry over from the basic teaching in fundamentals of nursing which as a base needs to be strengthened and enlarged in content and time. These changes can readily be made within the present structure of the curriculum.

Selection of patients for student assignments needs to be more carefully done in relation to students' abilities and their progress in the program, making certain that there is a sequence from simple to more complex situations of nursing. If the sequence of presentation of medical-surgical nursing content interferes with this, the suggestion is made to rearrange such content so that correlation between the subject matter in Body Structure and Function can be carried out, if desired, and still keep to the "simple to more complex" objective in patient care assignments. It is further suggested that greater emphasis be placed on nursing care of patients with common illnesses with less attention given to the variety of disorders less often encountered.

The possibility of shortening maternity nursing was discussed. This might be of value in order to add two more weeks of medical-surgical nursing at the end of the program. Objectives for this added two weeks should be carefully formulated. This might serve as a transition experience from carefully controlled experiences to one in which the student is placed under the head nurse or team leader for assignments, and in which she learns to organize her work in caring for several patients as a part of the nursing team.
OTHER RECOMMENDATIONS

An organization chart should be worked out and kept on file. The philosophy and objectives should be re-evaluated. They were written in 1961 and there have been faculty changes since then. Again, there is need to constantly evaluate curriculum content in relation to objectives and philosophy to make sure that they are consistent.

Library holding should be gone over and old and out-of-date volumes discarded. There are a number of new reference books suitable for practical nursing students which might be added.

The physical facilities at the school are not quite as good as before, though manageable. It is suggested that no further encroachment on these facilities be made to accommodate students in other programs.

Secretarial help needs to be stabilized with the Chairman of the Department aided by an able administrative secretary who can take over more of the routine duties. If this were accomplished, the Chairman could spend more time on the duties of a coordinator, visiting classes in the agencies and giving guidance to new instructors in the program as well as evaluating those who have been teaching for some time. In this way, closer coordination of the teaching of all could be accomplished.

There is need to consider the possibility of one more teacher for the clinical areas in order to relieve the burden on the clinical teacher who is responsible for all teaching in pediatric and obstetrical nursing. Because these clinical experiences are divided between three agencies, this instructor has an impossible assignment unless assistance is provided by the service personnel of the various agencies. Five instructors and a coordinator, rather than four instructors certainly does not seem unrealistic in terms of an enrollment, annually, of 80 students. Because of the nature of the clinical facilities in pediatric nursing and maternity nursing, the instructor in these areas must repeat instruction a tremendous number of times—six times a year in maternity nursing and 12 times a year in pediatric nursing. This poses quite a responsibility in addition to not being able to be in two units at the same time.

Finally, it is suggested that the budget for the program should include a travel allowance for the coordinator or one member of the faculty to travel to the mainland at least once a year in order to attend nursing conferences or conventions. Being separated by such distance from the mainland and without much contact, trends and changes in patterns of nursing care and in nursing education are not readily kept up with. There is need to share ideas with others in similar types of programs. This would seem to be a "must" in considering the fast moving changes today on all education as well as in nursing education.

It is necessary to point out that while suggestions are made here for improvement in several areas, weaknesses are pointed out in order that improvement that has been made can be continuous. The overall improvement in the program in the last three years has been marked. Yet, the only value of a survey is to point out areas which could be further strengthened in order that the one year program of practical nursing can bring the students to a level of achievement equal to their possible potential. It is hoped that the survey will have accomplished this purpose.
One year course including four weeks vacation—two weeks at Christmas and the last two weeks in August. (The two weeks in August will be terminal vacation for the class entering the previous September.)

CURRICULUM
"48-week Integrated and Correlated Program"

24-week Unit -- *Basic Nursing and Medical-Surgical Clinical Experience

Weeks 1-6 inclusive:
Orientation to course
Basic courses
Orientation in hospitals 4 hours per week in weeks 4-6

Weeks 7-12 inclusive:
Monday, Thursday, and Friday:
Continuation of basic courses
Tuesday and Wednesday (6 weeks—2 days per week = 12 days)
Med.-Surg. clinical experience including ward conferences and classes in Med.-Surg. conditions of the body systems related to assigned patients.

Weeks 13-24 inclusive:
Monday and Friday:
Continuation of basic courses to total of: .............. 420 hrs.
Tuesday, Wednesday, and Thursday: (12 weeks—3 days per week = 36 days. Total Med.-Surg. = 48 days)
Clinical experience including ward conferences and continuation of classes in Med.-Surg. conditions.
Ward classes ----------- 40 hours. Total .............. 90 hrs.

The three groups into which the class has been divided will rotate through the remaining specialized clinical areas and rehabilitation nursing which is considered a part of Med.-Surg. nursing. A typical schedule for one group would be:

8-week Unit -- (Half of group) (Half of group)
4 weeks--Pediatrics 2 weeks--Rehabilitation
2 weeks--Preschool 2 weeks--Preschool
2 weeks--Rehabilitation 4 weeks--Pediatrics

Related instruction: Pediatrics 52 hrs.)
Preschool 10 hrs.) .............. 86 hrs.
Rehabilitation 24 hrs.)

8-week Unit -- Psychiatric Nursing

Related instruction ................................. 76 hrs.

8-week Unit -- Obstetrical Nursing

Related instruction ................................. 65 hrs.

Related tours, speakers, etc. (Weeks 25-48) .............. 30 hrs.

48 weeks--Total

Total instruction .............. 767 hrs.
*Courses included in Basic Nursing:

<table>
<thead>
<tr>
<th>Course</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Orientation</td>
<td>12 hrs</td>
</tr>
<tr>
<td>Fundamentals of Nursing</td>
<td>261 &quot;</td>
</tr>
<tr>
<td>Including:</td>
<td></td>
</tr>
<tr>
<td>Nursing Principles &amp; Skills</td>
<td>55 hrs</td>
</tr>
<tr>
<td>Nursing Laboratory</td>
<td>110 &quot;</td>
</tr>
<tr>
<td>Pharmacology</td>
<td>10 &quot;</td>
</tr>
<tr>
<td>Anatomy &amp; Physiology</td>
<td>42 &quot;</td>
</tr>
<tr>
<td>Introduction to Med.-Surg. Nursing</td>
<td>15 &quot;</td>
</tr>
<tr>
<td>Personal &amp; Community Health</td>
<td>11 &quot;</td>
</tr>
<tr>
<td>Rehabilitation &amp; Home Nursing</td>
<td>18 &quot;</td>
</tr>
<tr>
<td>Family Living</td>
<td>38 &quot;</td>
</tr>
<tr>
<td>Personal &amp; Vocational Relationships</td>
<td>40 &quot;</td>
</tr>
<tr>
<td>Normal Nutrition &amp; Diet Therapy</td>
<td>43 &quot;</td>
</tr>
<tr>
<td>(Lecture 28 hrs., Laboratory 15 hrs.)</td>
<td></td>
</tr>
<tr>
<td>First Aid &amp; Civil Defense</td>
<td>26 &quot;</td>
</tr>
<tr>
<td></td>
<td>420 hrs</td>
</tr>
</tbody>
</table>
### Preclinical

Sept. 4-Oct. 11, 1963 (6 wks.)

### Basic Classes and Coordinated Medical-Surgical Experience

Oct. 14 63-Feb. 28 64 (18 wks.)

<table>
<thead>
<tr>
<th>KAISER HOSPITAL</th>
<th>QUEEN'S HOSPITAL</th>
<th>ST. FRANCIS HOSPITAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mrs. Mary Ah You</td>
<td>Mrs. Avelina Arcio</td>
<td>Miss Carol Andrade</td>
</tr>
<tr>
<td>Miss Gloria Apilado</td>
<td>Miss Sharon Asato</td>
<td>Mr. Elmer Bisarra</td>
</tr>
<tr>
<td>Miss Clara Bio</td>
<td>Miss Jennifer Roberts</td>
<td>Miss Norma Carman</td>
</tr>
<tr>
<td>Mrs. Mary Kolehmainen</td>
<td>Mrs. Eudora Silva</td>
<td>Miss Violet Crivello</td>
</tr>
<tr>
<td>Miss Betty Jane Sunada</td>
<td>Miss Evelyn Tanaka</td>
<td>Miss Henrietta DeLuiz</td>
</tr>
<tr>
<td>Miss Laura Watanabe</td>
<td>Miss Lillian Tanimoto</td>
<td>Mrs. Elouise Lewis</td>
</tr>
<tr>
<td>Miss Rosaline Yamamura</td>
<td>Miss Louis Toda</td>
<td>Mrs. Mary Lino</td>
</tr>
<tr>
<td>Miss Elaine Yasutake</td>
<td>Miss Jeanne Yamamoto</td>
<td>Mrs. Purification Soares</td>
</tr>
</tbody>
</table>

**Special Areas March 2-Aug. 14, 1964 (24 weeks)**

<table>
<thead>
<tr>
<th>G. Apilado</th>
<th>M. Ah You</th>
<th>March 2-April 24</th>
<th>March 2-April 24</th>
</tr>
</thead>
<tbody>
<tr>
<td>M. Kolehmainen</td>
<td>C. Bio</td>
<td>Queen's - 8 wks.</td>
<td>State Hospital - 8 wks.</td>
</tr>
<tr>
<td>B. Sunada</td>
<td>E. Yasutake</td>
<td>Obstetrics</td>
<td>Psychiatric Nursing</td>
</tr>
<tr>
<td>L. Watanabe</td>
<td>R. Yamamura</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Mar. 2-13</th>
<th>Mar. 2-27</th>
<th>Mar. 16-27</th>
<th>Mar. 30-Apr.10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Well Child</td>
<td>Pediatrics</td>
<td></td>
<td>Well Child</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Mar.30-Apr.24</th>
<th>Apr. 13-24</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kaiser-4 wks.</td>
<td>Leahi-2 wks.</td>
</tr>
<tr>
<td>Pediatrics</td>
<td>Rehabilitation</td>
</tr>
<tr>
<td>April 27-June 19</td>
<td>April 27-June 19</td>
</tr>
<tr>
<td>---------------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>State Hospital - 8 wks.</td>
<td>Queen's - 8 wks.</td>
</tr>
<tr>
<td>Psychiatric Nursing</td>
<td>Obstetrics</td>
</tr>
<tr>
<td>Apr. 27-May 8</td>
<td>Apr. 27-May 22</td>
</tr>
<tr>
<td>Preschool-2 wks.</td>
<td>Queen's-4 wks.</td>
</tr>
<tr>
<td>Well Child</td>
<td>Pediatrics</td>
</tr>
<tr>
<td>May 11-22</td>
<td>May 25-June 5</td>
</tr>
<tr>
<td>Rehabilitation</td>
<td>Well Child</td>
</tr>
<tr>
<td>May 25-June 19</td>
<td>June 8-19</td>
</tr>
<tr>
<td>Queen's-4 wks.</td>
<td>Leahi-2 wks.</td>
</tr>
<tr>
<td>Pediatrics</td>
<td>Rehabilitation</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>June 22-Aug. 14</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kaiser - 8 wks.</td>
</tr>
<tr>
<td>Obstetrics</td>
</tr>
<tr>
<td>June 22-Aug. 14</td>
</tr>
<tr>
<td>State Hospital - 8 wks.</td>
</tr>
<tr>
<td>Psychiatric Nursing</td>
</tr>
<tr>
<td>June 22-July 3</td>
</tr>
<tr>
<td>Preschool-2 wks.</td>
</tr>
<tr>
<td>Well Child</td>
</tr>
<tr>
<td>June 22-July 17</td>
</tr>
<tr>
<td>St. Francis-4 wks.</td>
</tr>
<tr>
<td>Pediatrics</td>
</tr>
<tr>
<td>July 6-17</td>
</tr>
<tr>
<td>Leahi-2 wks.</td>
</tr>
<tr>
<td>Rehabilitation</td>
</tr>
<tr>
<td>July 20-31</td>
</tr>
<tr>
<td>Leahi-2 wks.</td>
</tr>
<tr>
<td>Rehabilitation</td>
</tr>
<tr>
<td>July 20-Aug. 14</td>
</tr>
<tr>
<td>St. Francis-2 wks.</td>
</tr>
<tr>
<td>Pediatrics</td>
</tr>
</tbody>
</table>

Graduation--Friday, Aug. 14, 1964 (Mrs. Yoshida--vacation--August)
Licensing Examination--Wednesday, August 19, 1964
Practical Nursing Department, Kapiolani Technical School
May 1964
Clinical Agencies
2 classes per year beginning enrollment approx. 40

Kaiser Hospital:
1. Med.-Surg. Nursing--21 weeks part-time for 1/3 of class
   (orientation only 3 weeks. Two days per week for 6 weeks
   then 3 days per week for 12 weeks.) Repeated for second class.
   June Morioka-Clinical Instructor

2. Obstetrical Nursing--8 weeks for 1/3 of class
   Repeated for second class
   Katherine Deai-Clinical Instructor assisted by June Morioka

3. Pediatric Nursing--4 weeks for 1/6 of class at a time.
   Repeated for second 1/6 of class. Repeated for second class
   Katherine Deai-Clinical Instructor assisted by June Morioka

St. Francis Hospital:
1. (Same as 1 at Kaiser) except Myrtle Schattenburg-Clinical
   Instructor

2. Pediatric Nursing--4 weeks (continue same as 3 at Kaiser but
   omit "assisted by June Morioka")

The Queen's Hospital:
1. (Same as 1 at Kaiser) except Hanayo Hashimoto-Clinical
   Instructor

2. Obstetrical Nursing--8 weeks 1/3 of class (Queen’s group) and
   separately for the St. Francis group
   Repeated for second class
   Katherine Deai-Clinical Instructor

Leahi Hospital:
Rehabilitation Ward (Medical)
Rehabilitation Nursing--2 weeks for 1/6 of class at a time
Repeated for second 1/6 of class. Repeated for the 2 other
groups of each class. Repeated for second class of the year.
Setsuko Yoshida-Clinical Instructor (employed by the hospital)

Hawaii State Psychiatric Hospital:
Psychiatric Nursing--8 weeks 1/3 of class. Repeated for each
of 3 groups.
Alma Tokata-Instructor (employed by the hospital)

Kindergarten & Children's Aid Association—Preschools:
Well Child Experience--2 weeks for 1/6 of class at a time. Repeated
for second 1/6. Repeated for 2 other groups of class. Repeated
for second class of the year. A total of 12 groups during each year.
Principals are the instructors. The Superintendent gives the
orientation at the main office assisted by an instructor from
the school.
The faculty believes:

1. Practical nurses are an important occupational group in nursing. The practical nurse is prepared, through a one-year course of vocational education, to practice the art of nursing within a limited range of types of situations.

2. Nursing abilities are confined to those which can be effectively learned and applied to types of nursing situations where required nursing judgments can be made by a nurse with a sound but minimal scientific background.

3. Learning should be guided in such a way as to help the student develop his potentialities as an individual, to work with others to resolve problems in the home, the hospital and the community, and to encourage personal and vocational growth. Learning best takes place in a permissive environment which stimulates cooperation and a spirit of inquiry and where teaching is based on a patient-centered concept of nursing.

4. The practical nurse must be prepared for two roles:
   a. Nursing in situations relatively free from complexity with minimal supervision.
   b. Assisting in more complex nursing situations with more supervision.

The objectives are:

1. To prepare the graduate of the department to function effectively as a practical nurse in all general fields of nursing within the limitations of a one-year curriculum. To help the student gain skills in effective communications and establish good interpersonal relationships.

2. To help the student to acquire the knowledge and the skills and to develop the attitudes, sensitivity and responsiveness that will enable him to meet the fundamental health needs of the individual patient, the family and the community.

3. To enable the student to understand the basic health needs common to individuals of all age groups with varying deviations from health. To prepare the student to help people with their on-going daily needs which they are unable to meet themselves, to carry out the medical care prescribed, and to provide the spiritual and emotional support the individual needs. The degree of supervision required will be determined by the role in which the practical nurse is functioning.
Faculty Members

Marjorie Elliott - Department Chairman

1. Teaching: Freshman Class as group
   Personal & Vocational Relations 45 hours
   Nutrition & Diet Therapy 46 hours

2. Supervision and overall planning for program

3. All scheduling in consultation with other instructors

4. Coordinating visits to two areas not staffed by school employed instructors:
   Psychiatric Nursing
   Rehabilitation Nursing

5. Orientation of Preschool groups on their first morning and evaluation meeting with students the last afternoon. This is more often done by Hanayo Hashimoto.

6. Correspondence of all sorts that is not routine.

7. Interviewing applicants all through the year.

8. Administering 3-1/2 hour admission test battery to large groups twice yearly and to individuals when advisable.

9. Scoring (with the aid of business students) all tests in battery.

10. Making recruitment and interviewing trips to the neighbor islands each spring—4 days on Hawaii, 2 each on Maui and Kauai.

11. Recruitment talks to schools on Oahu as requested by Intermediate and High Schools.

12. Evaluating all completed applications and making decisions on all that are definitely acceptable or definitely to be rejected.

13. Planning and conducting meeting of Admissions Committee to make decisions on all other applications twice yearly.

14. Planning and conducting Advisory Committee meeting at least once each year.

15. Reviewing agreements with affiliating agencies once each year and rewriting as developments and changes occur.

16. Keeping or supervising the keeping of all school records.
Myrtle Schattenburg - Instructor

Teaching - Freshman class as a group
  Fundamentals of Nursing
  Principles and skills
  Personal & Community Health
  Pharmacology
  Anatomy & Physiology (except musculo-skeletal and reproduction)

Teaching - St. Francis group
  Laboratory practice
  Clinical experience in Med.-Surg. including discussions and conferences

Hanayo Hashimoto - Instructor

Teaching - Freshman class as a group
  Fundamentals of Nursing
  Anatomy & Physiology
    Musculo-skeletal system
    Reproductive system
  Body Mechanics
  Rehabilitation and Home Nursing
  Family Living (including geriatrics)
  First Aid & Civil Defense
  First Aid course for Dental Asst. program

Teaching - Queen's group
  Laboratory practice
  Clinical experience in Med.-Surg. including discussion & conferences

Other duties:
  Orientation of Preschool groups on their first morning and evaluation meeting on the last afternoon of the two weeks of Preschool. Sometimes done by M. Elliott.

June Morioka - Instructor

Teaching - Freshman class as a group
  Diseases 60 hours

Teaching - Kaiser group
  Laboratory practice
  Clinical experience in Med.-Surg. including discussions and conferences

  Assisting K. Deai in supervision of pediatric and obstetrical nursing students at Kaiser and Queen's.
  Complete teaching and supervision of one group in pediatric nursing each Sept. and March at beginning of each new class before Med.-Surg. clinical experience begins.
Myrtle Schattenburg - Instructor

**Teaching - Freshman class as a group**
- Fundamentals of Nursing
- Principles and skills
- Personal & Community Health
- Pharmacology
- Anatomy & Physiology (except musculo-skeletal and reproduction)

**Teaching - St. Francis group**
- Laboratory practice
- Clinical experience in Med.-Surg. including discussions and conferences

Hanayo Hashimoto - Instructor

**Teaching - Freshman class as a group**
- Fundamentals of Nursing
- Anatomy & Physiology
  - Musculo-skeletal system
  - Reproductive system
- Body Mechanics
- Rehabilitation and Home Nursing
- Family Living (including geriatrics)
- First Aid & Civil Defense
- First Aid course for Dental Asst. program

**Teaching - Queen's group**
- Laboratory practice
- Clinical experience in Med.-Surg. including discussion & conferences

**Other duties:**
Orientation of Preschool groups on their first morning and evaluation meeting on the last afternoon of the two weeks of Preschool. Sometimes done by M. Elliott.

June Morioka - Instructor

**Teaching - Freshman class as a group**
- Diseases 60 hours

**Teaching - Kaiser group**
- Laboratory practice
- Clinical experience in Med.-Surg. including discussions and conferences

Assisting K. Deai in supervision of pediatric and obstetrical nursing students at Kaiser and Queen's. Complete teaching and supervision of one group in pediatric nursing each Sept. and March at beginning of each new class before Med.-Surg. clinical experience begins.
Katherine Deai - Instructor

Teaching - All pediatric and obstetrical nursing groups at Kaiser, Queen's, and St. Francis except for the 2 pediatric groups under June Morioka. At all times she has a small group (1/6 of class) in pediatric and a large group (1/3 of class) in obstetric.

Pediatrics - 6-hour class per week
Obstetrics - 8-hour class per week

Supervision of clinical experience in pediatric and obstetric with the assistance part of June Morioka.