

Pupils and Patients

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GUIDELINES FOR THE ORGANISATION

OF HOSPITAL BASED SOCIAL EDUCATION PROJECTS

FOR YOUNG PEOPLE STILL AT SCHOOL

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FOR YOUNG PEOPLE STILL AT SCHOOL

These notes have been prepared with the co-operation of the Volunteers Advisory Service of the London Council of Social Service following a meeting which was held at the Hospital Centre on 23 February 1972. Whilst especially relevant to hospital based schemes, the underlying principles may well apply to schemes based on local authority health and social services.

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PUPILS AND PATIENTS

1 THE PROJECT

A hospital-based social education project is taken to mean a scheme in which a group of school pupils regularly spend some time each week in a hospital or similar institution, for a specified period, as part of an educational based social studies programme within the school curriculum.

Two groups are involved in the organisation and ultimate success or failure of such a scheme: the school staff and the hospital staff. Two groups are expected to benefit primarily from the scheme as a result of contacts between them: the patients and the young people. The recognition and reconciliation of the sometimes conflicting aims and needs of the participants is the key to the success of the project.

2 PURPOSES

i The School

The purpose of the project for the school staff is to help pupils of all abilities to:

- a) find a practical outlet for their idealism
- b) meet their social and work needs experience
- c) meet their increasing leisure needs and to offer a possible activity for them to continue after they leave school
- d) have an understanding of the health and social services and an appreciation of the needs of others
- e) have an opportunity to make a wider range of relationships
- f) find the school experience more relevant, particularly for school leavers

- g) find a purpose and a possible area of success, particularly for those who may have had a history of consistent failure and may end up in routine and boring jobs
- h) gain an insight into some aspects of health education

The school should not see the project as:

- a) an opportunity to get troublesome children out of the school one morning or afternoon a week
- b) a soft option for the teachers. A successful project is bound to demand more from them in preparation, support and supervision than classroom teaching
- c) the same thing as work experience schemes which form part of the careers curriculum
- d) something which need necessarily be limited to the academically less able pupils. Its educational value is relevant to all abilities

ii The Hospital

The purpose of the project for the hospital is to:

- a) strengthen links with the community
- b) encourage young people to examine and understand constructively the way in which the health and social services operate
- c) add to the quality of a patient's life in hospital by the provision of services which are not possible within the health service
- d) give the patients an opportunity to make additional relationships, by widening their range of social contacts

The hospital should not see the project as:

- a) a way of meeting staff shortages and reducing the work load in wards and departments
- b) a way of recruiting future hospital staff

3 INITIAL MOVES

The initiative for pupil/patient contact is likely to come from a school which has decided to include a hospital-based social education project in the curriculum of some or all of its young people and is looking for a situation in which to place them.

Alternatively, the initiative to start a school service project within a hospital may come from the hospital, if it has a voluntary help organiser (VHO) who has clearly identified the need for such a project and the way it can be used to benefit the patients.

A hospital which is approached in this way by a school should remember that:

- a) the organisation and supervision of the project will involve the hospital in a great deal of work which probably should not be undertaken unless there is somebody such as a VHO with the time and position to maintain liaison with the school and to provide support within the hospital
- b) the school may feel that social education benefits its pupils but it cannot know whether it will benefit a hospital's patients
- c) there is considerable pressure on schools to introduce schemes of this sort for reasons of fashion or expediency and they may not always be well conceived
- d) there are many other situations in which pupils can undertake community service, eg, children's nurseries, day centres, etc, and they may in some circumstances be more suitable than the local hospital

A school which has decided to undertake a project should remember when approaching a hospital that:

- a) because hospital staff have other priorities, the school must be prepared to maintain a high level of support and supervision of pupils throughout the duration of the project

- b) schemes have been proved to work most successfully in long-stay wards and hospitals, eg, those with geriatric and psychiatric patients, because these locations provide sufficient continuity of staff and patients to allow pupils to build relationships and because their workload and pattern is relatively stable from day to day
- c) the local hospital may have only very few wards of this type on which they can suitably place and supervise young people and so they may only be able to take a small number of pupils at a time
- d) pressure from the school to take more pupils than the hospital feels it can manage may lead to the young people being offered routine jobs in wards and departments, which defeats the educational aims of the project
- e) there may be many more suitable places for pupils to undertake service. For example, old people's homes offer the same chance to make relationships, but with a more stable staff and resident population and in a less traumatic situation. Non-institutional community approaches to social education can also be considered, eg, there is a great need for young people to be actively involved in their block of flats or their street

Both the hospital and the school should remember that:

- a) it may be helpful to make use of an outside specialist in voluntary services to examine and tie in the vested interests of schools and service organisations. This might be a member of the local authority social service Department, a youth worker, a volunteer bureau organiser or a member of the local council of social service
- b) the fluctuation of interest and ability of pupils in successive years, and the need of volunteers to develop something of their own, may mean that it is in everybody's best interests to accept schemes on a limited basis, eg, one year. This need not mean that overall contact between the two institutions will stop just because that one project has ended

4 ORGANISATION

i The School

If a hospital-based social education project is to work successfully, the school should:

- a) allocate a member of the staff to take responsibility for the project
- b) give him adequate time within the timetable to undertake the organisation, preparation, supervision, support and follow up for the project
- c) ensure that the project forms part of an integrated social studies programme which is justified in educational rather than social terms and which is care rather than task orientated
- d) not impose the scheme on any pupil but make it part of a range of attractive alternative choices either as between community service and other activities such as sport, pottery, etc, or as between types of service, eg, in day centres, nurseries, etc, as well as in hospitals
- e) select from the pupils who volunteer only those who seemed suited to undertake the type of work in question
- f) wherever possible, involve the young people in the initiation and planning of projects and in criticism and suggestions for their development
- g) draw on expertise within and without the school to create a broadly based social education programme, eg, visits from hospital staff, community social workers, etc
- h) consider the possibility of also involving local youth workers who are skilled in group work, and who can stress the relationship rather than the task orientation of projects and who may have more experience at supporting this type of project than school teachers. Youth workers are also well placed to encourage young people to continue voluntary service in their leisure time and after they leave school, and are able to place hospital work in the wider context of community service rather than leaving it as a one-off event
- i) make sure that both staff and pupils understand the way the hospital works and its need to maintain standards of care

- j) require the individual pupils to make a commitment for at least a term to ensure continuity in those visiting the hospital
- k) hope to get eventual parental involvement in the project as this can both help to forge links between the school and the pupils' homes and between the hospital and the community with benefits for all

ii The Hospital

It is assumed that the hospital which is prepared to take young people as part of a school project has a VHO, or other person designated by the hospital authority with the time to undertake the necessary organisation. This person has to begin by ensuring that there is support for such a project within the hospital generally, or at least within an area of it where a start can be made, and that there has been adequate consultation with any other bodies likely to be affected by the scheme, such as local voluntary organisations and trade unions. It then needs to be considered whether there are any jobs that the young people could do, bearing in mind the following points:

- a) the jobs must be seen to be worthwhile
- b) they should be challenging and stimulating and should offer the young person the opportunity to make relationships with the patients
- c) they should start from practical tasks, as these help to break down the pupil's shyness in the hospital situation and to get them close to the patients
- d) these practical tasks might be of the type already commonly undertaken by volunteers in hospitals, eg, giving out drinks, feeding or reading to patients, writing letters, playing cards, taking patients out in wheelchairs in the grounds, flower arrangement, etc
- e) they might also use the specialist skills of the young people still at school, eg, skills in art, cookery, pottery, hairdressing, etc. This might be in the context of the patients' occupational therapy programme and might make it possible to absorb larger groups of young people into the hospital at any one time

- f) larger groups might also be invited into the hospital to entertain the patients or to show an exhibition of art and craft work
- g) the young people might work in the hospital departments in jobs which offer patient contact such as taking patients to x-ray, carrying messages in out-patients, etc, but it should be remembered that these do not give pupils an opportunity to make relationships. Jobs in certain departments such as sterile supply and pharmacy might be very routine and might cause problems over the operation of incentive bonus schemes, or in other ways
- h) the contacts made with patients might, with proper permission and liaison with social workers, allow the young people to undertake follow-up after discharge and to visit them in their own homes
- i) while jobs should be designed so as not to deliberately expose the young people to situations with which they were unable to cope, they should not be entirely protected from the reality of death and suffering because this is part of the experience of real life
- j) in hospitals where there appeared to be no suitable jobs to offer to pupils of a school which expressed interest, young people might be invited to make equipment for the hospital in metal or woodwork classes and then to come to the hospital to see how it was being used

5 ADMINISTRATION

i The School

The administration of a hospital based social education project from the school end involves:

- a) preparation by the teacher responsible and preparation of the pupils including: contact with the hospital, a decision on the size and scope of the project, visits by the hospital VHO, MSW, ward sister or other representatives to talk to the pupils, visits by the pupils to the hospital to see the working situation, broad-based classroom preparation

- b) preparation of a consent form to be signed by the pupil's parents
- c) decisions on the responsibility for payment of pupil's fares and other expenses as between the school, the hospital and the pupils themselves, and depending on distances involved, ability to pay, etc
- d) arrangements to replace pupils who may be unavoidably absent by other young people already familiar with the hospital. Hospital staff cannot be expected to welcome widely fluctuating numbers of volunteers or to initiate new volunteers at every session
- e) adequate supervision of pupils throughout the duration of the project, involving: close liaison between the teacher and the hospital VHO or representative; a procedure to ensure that pupils arrive on time and do not depart early; regular visits to the hospital by the teacher, etc
- f) the provision of a supportive framework within the hospital and school to cope with the problems which must arise when young people are involved in such a potentially emotional situation as a hospital
- g) the teacher in showing that he has knowledge of and approves of the jobs being undertaken. The provision of classwork and follow-up which arises out of the interests of the pupils can prevent it from being seen as a chore. The project cannot be too closely involved with the formal life of the school, (essays, reports, etc) if it is to retain its voluntary nature
- h) being prepared to cope with criticism of the institutions visited and the wider social structure and to put this in the context of the organisation of society and of the health and social services in particular
- i) being prepared to terminate projects if they no longer serve their purpose
- j) to provide the pupils with follow-up either by encouraging them to continue the project into another area such as community visiting, or by encouraging them to continue with some kind of service after they have left school

ii The Hospital

The administration of the project from the hospital involves the VHO, or other person designated, in:

- a) preparation of all levels of hospital staff and of the patients. It is particularly important to assure staff that young people will only be placed in wards and departments where they are wanted and where they can contribute, and to ensure that both staff and patients understand the pupils' needs and aims in coming to the hospital, so that they can help to meet them
- b) policy decisions on the minimum age limit for young people coming into the hospital, usually 14 or 15 depending on the working situation; and on the maximum number who can be used in any one location - usually two pupils per ward, to avoid them forming inward-looking sub-groups and to facilitate supervision and training
- c) decisions on the details of the scheme, eg, where the pupils can be placed; the maximum number which can be taken allowing for wards being closed, or for crises which may make wards temporarily unsuitable places in which to use young people, etc
- d) arrangements that need to be made to ensure that pupils attend regularly; stay for the period specified; are supervised without taking ward staff away from their essential tasks; and are not changed round from week to week by either the school or the hospital
- e) arrangements to cover the school holiday periods, to avoid the development of a feast-and-famine cycle on the wards. This might involve encouraging the young people to come in during their holidays, or recruiting another group of volunteers from the pupils in examination classes who could not fit social service projects into their curriculum
- f) arrangements for a regular and on-going review of the scheme involving all the staff to discuss problems and to ensure the continuing usefulness of the whole project

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