

The project is a good illustration of working within an institution to effect change, and this aspect could be enlarged upon by involving ward staff. Since we are challenged to prepare professional students for "reality shock", an illustration of change within a bureaucratic structure to improve patient care is of great value(3).

This very interesting paper is most generative, and will encourage many nurse-educators to help students seek innovative solutions to perceived clinical problems.

REFERENCES

1. Barbara K. Redman, "Client education therapy in treatment and prevention of cardiovascular diseases." *Cardiovascular Nursing*, 10:1-6, Jan.-Feb. 1974.
2. C. D. Egbert et al., "Value of the pre-operative visit by an anesthetist." *J.A.M.A.* 185:553-555, Aug. 17, 1963.
3. Marlene Kramer, *Reality Shock*. St. Louis: C. V. Mosby Co., 1974.

REPONSE A "THREE PATIENT CONFERENCES": L'IMPORTANCE D'ÉVALUER LES EFFETS D'UNE INTERVENTION

LOUISE LEVESQUE

Faculté de Nursing

Université de Montréal

L'initiative tentée par Miss Choi-Lao n'offre aucune caractéristique d'une expérience de recherche. Postulant que cette initiative n'en n'est pas une de recherche, il serait plus ou moins utile d'énumérer les éléments méthodologiques propres à tout projet de recherche et qui ne se retrouvent pas dans cette expérience.

Cependant certaines questions peuvent être soulevées au sujet de la démarche scientifique utilisée pour arriver à la conclusion qu'un programme d'enseignement est utile aux patients. Cette affirmation est hâtive, basée sur un nombre très limité d'essais (deux séances d'enseignement préopératoire et une au départ) et sur peu de considérations objectives.

L'auteur a pensé examiner et critiquer le contenu de l'enseignement ainsi que la stratégie pédagogique utilisée. Mais, il semble que Miss Choi-Lao n'a pas évalué les effets de son intervention i.e. le fait de donner un enseignement, sur le comportement du patient en période postopératoire ou à domicile.

Certes, il y a les commentaires favorables exprimés par les patients. Mais utilisé seul, ce moyen d'évaluation demeure très incomplet. L'enseignement peut plaire aux patients; mais, savoir s'il leur est profitable est une question d'ordre fondamental. Il eût été intéressant de connaître l'impact du programme sur les patients. Par

exemple, est-ce que les patients ont pratiqué les exercices respiratoire? Semblaient-ils moins tendus après l'opération? En d'autres termes, les objectifs du programme ont-ils été atteints? et surtout avaient-ils été clairement définis?

Il est commun d'entendre dire que le nursing a peu de contenu théorique. L'évaluation des effets d'une intervention semble être un élément de base dans la poursuite d'une action nursing rationnel.

RESPONSE TO "THREE PATIENT CONFERENCES"

JEAN GODARD*

There is a growing concern on the part of all social researchers, nurses included, that their work should contribute to the solution of practical problems. Accordingly, Ms Choi-Lao has attempted to provide for improved patient education both pre-operatively and post-operatively through the use of group discussion methods.

The problem as stated was "to find a different approach to that of traditional bedside teaching so that the needs of both the patient and the nurse might be better satisfied." Ms Choi-Lao attempts to utilize her prior knowledge of the values of group discussion in such an educational situation, but the question as put is difficult to answer. It is relatively non-specific and difficult to answer on the basis of knowledge alone, as it involves values as well, i.e. how is "better satisfied" to be defined and quantified? This paper, in fact, is a description of the vicissitudes found in an attempted introduction of change. It is difficult to see where it is more than a presentation of the values of group discussion in problem-solving for a very specific group of patients.

The author offers little description as to the planning done with the patients, if any; no attempt is offered in describing how the patients saw their needs or would attempt to solve their problems. The behavioral descriptions are non-specific, not quantified, and relate almost totally to the students and their evaluations — little validity is offered as to the value of group discussion in patient teaching of surgical patients. The statement is made, "special attention was paid to both content and method of presentation to ensure patient-centredness." Unfortunately, no specifics of description are offered the reader either as to patient participation in planning or implementation. We are told that the ward staff are consulted as to time of presentation, but no mention is made of consulting the patients. The lack of attention to patient care and consultation is

* Jean Godard taught at McGill University School of Nursing until 1973.