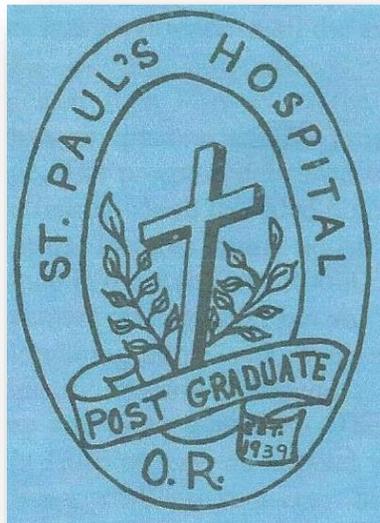


*HISTORY OF THE
ST. PAUL'S HOSPITAL OPERATING ROOM
POST BASIC PROGRAM
FOR REGISTERED NURSES*



**by
Gloria Stephens**

(c 2012; updated October 2015)

Available BCHNS Archives

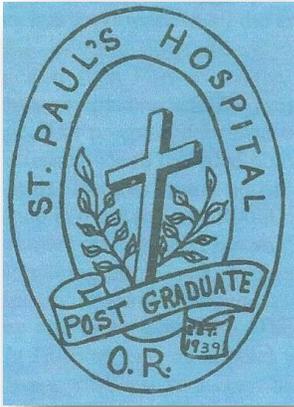
HISTORY

ST. PAUL'S HOSPITAL OPERATING ROOM

POST BASIC PROGRAM for REGISTERED NURSES

—by Gloria Stephens 2012

(Updated- Sept. 2015)



SPH OR PIN

St. Paul's hospital has established a commendable reputation throughout the province of BC and across Canada for its philosophy to community support, to patient care and to the support of education. This institution maintained a post-basic Operating Room Program for Registered Nurses for more than 70 years. The program may be credited for preparing well qualified registered nurses for the benefit of hospitals throughout BC and in fact across Canada. A high percentage of the students remained on the OR hospital staff at St. Paul's when vacancies were available.

The post-basic Operating Room (OR) Program at St. Paul's hospital for registered nurses was established in late 1939 as an on-the-job training. Four nurses were chosen at a time to take the course. There were no organized lectures and the student 'shadowed' a staff member. The student decided when to move from one service to another and there was no formal recognition nor record of the student's progress of when the allotted time was concluded. This process usually lasted four months after which the student was considered capable to function in an operating room and were usually taken on staff. While learning the students were given a stipend and they worked the day shift and no weekends.

As operating room procedures became more complex, dealing with 'sicker' patients, the staff objected to having the task of teaching students with no one responsible for a proper program. It became evident that a structured program was necessary. About the early 1950's the program became somewhat more structured under Joan Flower. Now the students received lectures in the afternoon and 'scrubbed' in the mornings with another RN. The students never 'circulated', nor had anaesthesia lectures and experience in the Recovery Room. Exams were held at the end of the program. There was no Master Plan for the program nor written objectives. The students were considered as part of the staff number. The class consisted of six students. The small classroom was at the end of one of the OR halls and did not contain any AV aids nor a blackboard. About 1965 the classroom and the OR 'Pack Room' was taken over as the Recovery Room was enlarged to receive more patients.



JOAN FLOWER

(JOAN FLOWER- Joan was an outstanding operating room nurse who was the first President of the British Columbia Operating Room Nurses Group, BCORNG, 1966, and she served on many committees over the years. Joan also was an active member of RNABC and served on many committees. She was a 'Staff Rep.' at SPH for many years for the RNABC Labour Relations. Her husband died while they lived in Vancouver. Joan, after a few years, moved to Kelowna where she died, about 2003)

At this time the Pack Room was staffed in the afternoon with OR nurses to make up the linen packs



to be sterilized in CSD (Central Supply Department) for the next day's surgeries. The staff as well had to select the proper instruments for each surgery on the next day's slate and to make sure the doctor's special instruments were included. . These sets were sterilized just before needed in a small sterilizer between each operating room.) The students were taught how to select instruments and how to arrange properly in a set and how to make up sterile packs.

St. Paul's Hospital, the Recovery Room was located on the top floor, under the cross, in the picture. The operating rooms were on the top floor extending to the right.

The classroom was then moved to the floor above the OR level in combination with a 'viewing gallery' over one of the operating rooms. This was great as the students could be taught patient care and then without disrupting the activities in the operating room, could view patient care, the importance of 'team work' and the operative procedure. Strong binoculars were available to view closely the anatomy as the surgeon proceeded with the surgery.

Now the classroom had a blackboard, individual chairs with wide arm rest for writing, a desk for the Instructor, supply cupboards, plus a window for natural light. (The chair and desk are in the writer's possession. The date



under the chair is 1898 and was informed that the chair was used at the beginning of St. Paul's School of Nursing. The new instructor found these chairs in the basement and had ten bought to the classroom for individual students,



instead of using regular chairs. The desk is oak

and has a secret locked drawer. When the new OR was opened (1983) all this furniture was replaced)

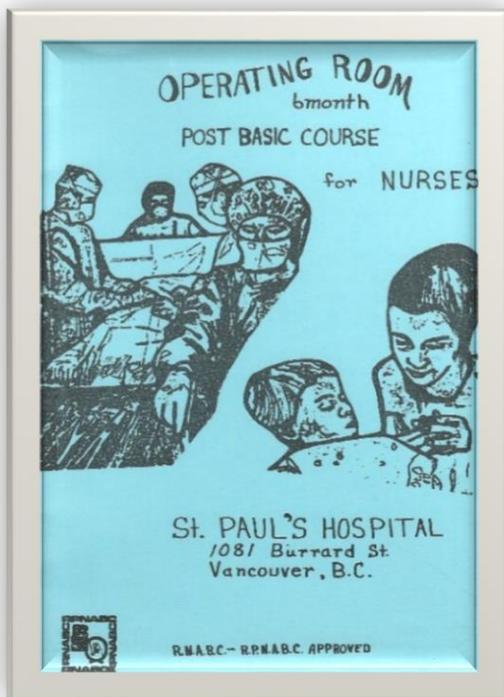
By the late 1960's St. Paul's hospital was an acute referral hospital having 577 bed capacity and 19 operating rooms. Services available were general surgery, gyne, orthopedics, neurosurgery, plastics, vascular, urology, ophthalmology, otolaryngology and cardio-vascular surgery.

The summer of 1972, Joan Flower suddenly retired. She married a man with the same last name, no relative. He was retired and she was soon to retire anyway. At the time Gloria Stephens was Team Leader of Plastics, Orthopaedics and Neurosurgery and she very frequently lectured the students in these areas as well as performing clinical demonstrations. Consequently, she was asked to accept the position as instructor for the program. There was a program in session which had a month to completion and Gloria was suddenly thrown into the course, which by the way, the students did not appreciate and became a very unhappy group. Instead of going away for a holiday that summer, Gloria worked at home putting together a Master Plan of lectures and started working on objectives. The only thing that was handed to Gloria was one thin scribbler with a few notes.

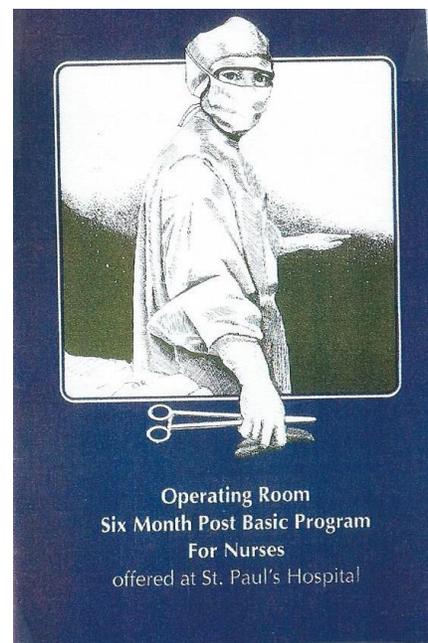


The first thing was to establish a budget for the program as until

now any expenses came from the general fund and was often told, no funds available. Consequently, the first information booklet was hand prepared, including the hand-drawn cover by Gloria.

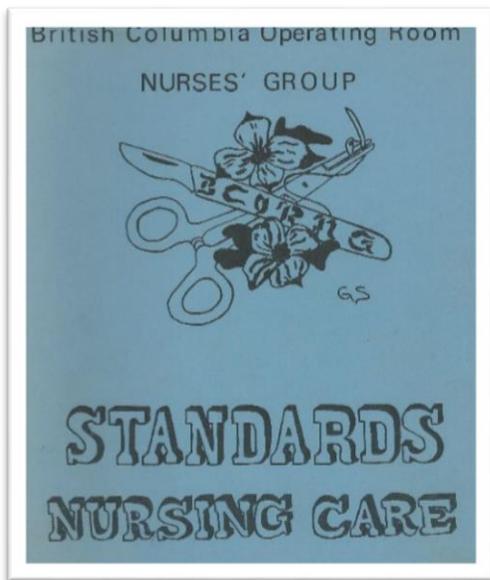


The next pamphlet was professionally printed, the information included was updated as well.



The need for a more specialized nurse in the OR became apparent and the program was structured and content was adjusted to meet this challenge. The program consisted of 457 hours of formal lectures and 491 hours of clinical experience, which included both the scrub and circulating roles in all the services. Anaesthesia lectures were added including clinical time with the anaesthetist. Also a session of role play with an anaesthetist in handling a cardiac arrest. Lectures and clinical experience was also added for the Recovery Room. There was a component of OR Management strategies as well. This was included because in order to be an effective 'circulating nurse', one requires management skills as well as knowledge pertaining to the specific operative procedure. Now the patient care was followed from 'Pre-op. visits' to the Recovery Room. This was necessary as in the smaller hospitals the OR nurse is required to function in all these areas. Also, at this time a new position for the operating room nurse was developed titled 'Nurse Liaison' who did pre-operative visits and related to the relatives how the surgery was progressing etc. Patients were now carefully monitored by the operating room nurse through the phases: Preoperative, Transportation & Admission, Induction, Operative & Post-Operative phases. Nursing care does not stop as the patient arrives in the OR, through the OR door, to be reassumed when the patient leaves the OR through that same door to the Recovery Room.

The program was six months long, Monday to Friday and eight hour days. The entrance fee at this time was \$200.00 payable to St Paul's hospital. The student did not receive a stipend. The average size of the class was ten. Approximately 1500 students graduated from this program up to 1996 and not sure of the number after this date. There was no lack of applicants as many times there would be 30 or more applicants for the ten positions but this did not deter nurses from waiting to be accepted. The program was never officially advertised as the applicants came 'by word of mouth'. Every nurse was interviewed before accepted and not all were accepted for various reasons, mostly a sense that the person would not be suited as an OR nurse. This was always discussed with the prospective student and many times a tour of the OR and viewing a surgery helped in making the decision.



Around this time (1972) the BC Operating Room Nurses Group (BCORNG) under the chairmanship of Gloria Stephens published "Standards of Nursing Care" in the operating room, (the first in Canada; praise was received from the Director of Nursing of John Hopkins hospital, Baltimore, Doris Armstrong, stating: "outstanding booklet and magnificent piece of work you and your committee to be highly commended for its excellence". (The letter is in possession of the writer). It was important that these standards were reflected into the OR Program. (St. Paul's Printing Department printed about 200 copies of the booklet, free of charge, for BCORNG to distribute)

As an aside; the Instructor always stressed to the students the importance of supporting the nursing profession by becoming involved in some activity. Many students took this seriously and became executive members and committee members of the BCORNG.

In 1978 the program received full approval from the RNABC-RPNABC Continuing Education Approval Program committee. About the mid-eighties graduates of the SPH program who did not have a degree were granted credits at UBC and Victoria University should they wish to continue their education for a degree. (Several graduates took advantage of this opportunity. Unfortunately, this credit did not stay in place very long). The objectives of the program indicated the level to reach, method of evaluation and dealt with every aspect of the program.

During the 1970's military nurses were sent to St. Paul's for the program but as the need for OR nurses in the province of BC increased the military nurses were not accepted into the program. Gloria Stephens then assisted in setting up an operating room nurses program within the military through Ottawa.

At one point Marie Whitney, Director of Education at SPH, in her wisdom, decided the program should be closed. Before notification notices could be sent out the Instructor convinced the Director of Nursing, Audrey Murray, of the need for such a program and so the program continued.

In 1983 the operating room facilities were moved to the new section of St. Paul's hospital. The Director of Planning for SPH was Don Coolidge. He organized an OR Planning Committee for the new OR Suite in 1980 and named Gloria Stephens as chairman. For two years the committee worked on the new structure which was titled 'Case Cart' System in close working relationship with the Central Supply Department (CSD). The biggest 'fight'



with the government was to have two separate elevators between the OR and CSD, one for soiled items and one for sterile items and they were to be located in different sections, both in the OR and CSD. The 'sterile' elevator came from CSD into a central core and the 'soiled' elevator was in a smaller room off one of the hall. All the sterile supplies, instruments for each operative procedure was assembled in CSD in separate carts and sent to the OR. The core was staffed by an RN as a liaison with CSD. All the operating rooms were off the core – so- traffic was in one direction as the carts were taken into the OR and following the case all the soiled instruments etc. were put into the cart, moved into the hall to the 'soiled' room and down to CSG for repossessing. This was an entirely new process. The other major 'fight' was to convince the doctors that it wasn't necessary to have the instruments housed in the OR, as they were used to having. They were so concerned that their 'special' instrument would not be available. This system was more efficient and more aseptic.

The classroom facilities were improved immensely; a large room was designated as a classroom which was furnished with new tables, chairs and every type of AV equipment, blackboards, video, projector, tape recorder, library and space for demonstrations. This was well situated within the operating room suite.



Also, the Instructor had a separate room for an office with new filing cabinets, desk, phone (no computer) but a window and next door to the classroom.

Gloria Stephens in her new office.

The organization of the operating room was completely changed with the ‘Case Cart’ system. No



longer did the OR nurse make up packs, and instrument sets but it was still very important that the OR nurse knew what instruments should be in specific surgeries. Therefore, on a rotation, an OR nurse spent time in CSD to monitor. (Of course there was a special program organized to teach Aides all about CSD. This is another involved story). Another change in the program; the students had to spend time in CSD to learn instrument sets and all the various methods of sterilizing. This was a new concept to teach the students.

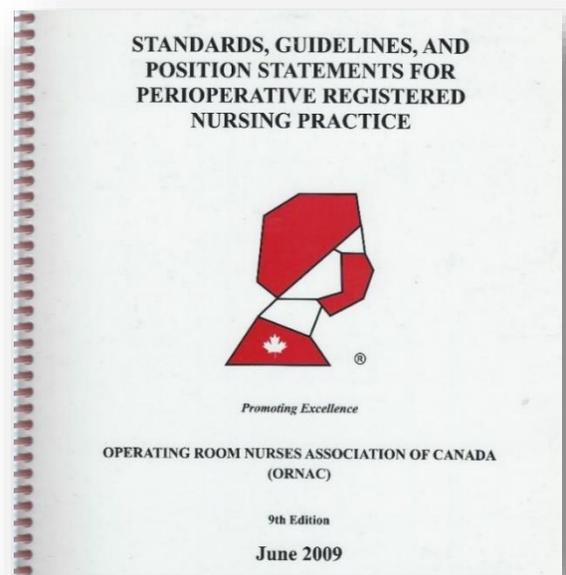
Gloria Stephens demonstrating equipment to students in the new classroom

Patients were brought to the ‘Pre-Op. Room by an Aide. This room was staffed by an RN who would admit the patient and check all the legal items and chart the patient’s condition on arrival. Every effort was made to elevate stress and make the patient as comfortable as possible. Soft

music, no ‘chatter’ and the nurse would spend time with the patient. So this was another change in OR protocol. The students were involved and spent time in the Pre-op. room.

To evaluate the student’s progress there was a mid-term written exam with a pass mark of 70%; orally each student had to demonstrate the set-up and use of special equipment; and present in class a surgical topic of their choice of some aspect of patient care. Each student was interviewed periodically throughout the program to determine their conception of their progress. This method of evaluation was repeated at the end of the program. Also, at the end the students were asked to evaluate the program content and method of instruction. The feedback was often used to revise the program.

About the mid 1980’s the Operating Room Nurses Association of Canada (ORNAC) published “Standards of Patient Care” which became the standard practice for every hospital in Canada. The Operating Room Nurse title was changed to ‘Perioperative Nurse’. The ORNAC standards are the basis for the certification exams from CNA for Perioperative Nurses, so therefore very important. Thus, these standards were considered when the objectives and content for the St. Paul’s program were written. (The writer was chairman of the ORNAC Standards committee and was President 1990-1993). The standards are continually updated.



On completion of the program the hospital provided a special decorated cake and ‘Tea’ in the OR lounge at 2PM, so most of the staff could participate, as the success of the program was really due to the support that the OR staff gave to the students when doing their clinical work. Family and friends were welcomed. At this time Certificates and the SPH OR Pin were given to the students. Frequently a nursing staff member was asked to present either the certificate or the pin, which they perceived as an honour and other times the Director of Nursing may do the honours. The surgeons would be in attendance, if working at the time and often would say a tribute to the students.

With this program, the community can be assured that a well-qualified, efficient and caring registered operating room nurse will be guiding and organizing their care while experiencing an operative procedure. (The writer’s quote:” an OR nurse is the caring conscious counter part of an unconscious patient”)

Gloria Stephens retired 1996 and was replaced by Susan Wynne, an ex-student of St. Paul's OR Program under Gloria Stephens and a St. Paul's graduate, who just completed her Masters at UBC.



In the late 1990's, once again the program had to be revised due to services within St Paul's being radically changed, such as Neurosurgery now in the Vancouver General hospital, ophthalmology was moved out and so on. St. Paul's became the Open Heart and vascular surgery centre. Even general surgeries were reduced. Therefore, for the students to receive clinical experiences in these areas coordination between several hospitals had to be organized, which was made with considerable effort on the Instructor, Susan Wynne. Instructors had to be hired in each of the hospitals used for clinical experience. Now the OR Program had three instructors with St Paul's responsible for the program. An addition to the Instructor's office was a computer, which made lecture adjustments and other documentation, much easier. This practice for clinical experience was carried on for several years quite successfully.

About 2008 St. Paul's appointed Sherrill Bishop as Program Director (not a nurse) and she decided to organize a Regional OR Program which was not a popular move. St. Paul's OR Program in its entirety, became the basis of this new OR program. The basics of operating room nursing was an on-line course, #101 consisting of 26 modules and during this time frame each student had four days experience in an operating room. The total program was 20 weeks instead of the 26 weeks of the St. Paul's program. The 'circulating role' was not included. The clinical experience was shared between SPH, VGH, Lions Gate, Richmond, and UBC hospitals with one instructor per hospital to monitor two or more students at a time. The title of the program "Vancouver Coastal Health Perioperative Course". Students are taken in twice a year and the class can range from 16 to 18 as the students are spread over several hospitals. About this time Susan Wynne retired as Instructor of the St. Paul's Program.

So this is the conclusion of the once vital Operating Room Post-Basic Program for Registered Nurses, supported by St. Paul's hospital for over 75 years, benefitting and serving the local community patients as well as throughout BC and even across Canada.

NOTE: Transcripts of the original program may be found in the St. Paul's Archives.