

GOVERNMENT NOTICE No. 176

REPUBLIC OF TRINIDAD AND TOBAGO

THE NURSES AND MIDWIVES REGISTRATION ORDINANCE, 1960
(No. 33 of 1960)

REGULATIONS

MADE BY THE COUNCIL WITH THE APPROVAL OF THE MINISTER UNDER
SECTION 41 OF THE NURSES AND MIDWIVES REGISTRATION ORDINANCE,
1960

THE NURSES AND MIDWIVES REGISTRATION
REGULATIONS, 1977

1. These Regulations may be cited as the Nurses and Midwives Citation
Registration Regulations, 1977.

2. (1) In these Regulations—

Definitions

- "a recognised place of training" means a place of training or affiliated place of training referred to in section 40 of the Ordinance;
- "Approved School of Midwifery" means a school designated by the Council with the approval of the Minister under section 40 of the Ordinance as a recognised place of training for midwives or for instruction in obstetric nursing;
- "Approved School of Nursing" means a school designated by the Council with the approval of the Minister under section 40 of the Ordinance as a recognised place of training for nurses;
- "Approved Training Centre" means a school designated by the Council with the approval of the Minister under section 40 of the Ordinance as a recognised place of training for nursing assistants;
- "instructor" means a person responsible for the teaching of student nurses, pupil-midwives or trainees in a recognised place of training and in the case of pupil-midwives, for that part of the training that takes place in the homes of patients;
- "President" means the President of the Council;
- "pupil-midwife" means a woman admitted to an Approved School of Midwifery for training as a midwife;
- "Register of Midwives" means the Register of Midwives kept in accordance with section 20 of the Ordinance;

“Register of Nurses” means the Register of Nurses kept in accordance with section 15 of the Ordinance;

“Roll of Nursing Assistants” means the Roll of Nursing Assistants kept in accordance with section 33 of the Ordinance;

“Secretary” means the Secretary of the Council;

“student nurse” means a person admitted to an Approved School of Nursing for training as a nurse;

“the Council” means the Nursing Council established by the Nurses Registration Ordinance and continued under the Ordinance;

“the Minister” means the member of the Cabinet to whom responsibility for the subject of Health is assigned;

“the Ordinance” means the Nurses and Midwives Registration Ordinance, 1960;

“trainee” means a person admitted to an Approved Training Centre for training as a nursing assistant.

No. 33 of
1960

(2) The concept of a school for the training of nurses and of midwives and a centre for the training of nursing assistants embraces the classroom, such wards and departments of the recognised place of training as may offer patient care and such services as may be outside the institution and approved by the Council for offering to the student nurse, the pupil-midwife or the trainee experiences in public health, community services and such other experiences whereby the stipulated programme of training may be accomplished.

SCHOOLS OF TRAINING

Approved
schools of
training

3. The Secretary shall prepare and keep a list of schools, hospitals and institutions from time to time designated by the Council with the approval of the Minister under section 40 of the Ordinance, as recognised places of training or as affiliated places of training for nurses or midwives or nursing assistants, as the case may be.

Designation
of
institution
for training
nurses

4. An institution may be designated to be a recognised place of training for nurses if the Council is satisfied as regards the following criteria:—

- (a) provision at the institution of not less than a total of two hundred and fifty beds, comprising—
 - (i) not less than eighty medical beds;
 - (ii) not less than sixty surgical beds (including eye, ear, nose and throat surgery);
 - (iii) not less than fifty paediatric beds (medical and surgical); and
 - (iv) not less than twenty beds each for gynaecological, obstetric and orthopaedic patients;

- (b) a sufficient variety of patients in the clinical area of the institution;
- (c) opportunities exist at the institution for adequate supervision and guidance of nursing students so as to ensure a high standard of patient care;
- (d) the staff of the institution includes—
 - (i) a sufficient number of registered nurses for the guidance and supervision of student nurses in the day, the afternoon and in the night in the ratio of at least one registered nurse to not more than ten student nurses in the practice area;
 - (ii) persons qualified to teach and lecture in the various aspects of nursing and on all matters relating thereto in the ratio of one instructor to not more than thirty students in the classroom;
 - (iii) a person who, in the opinion of the Council, is qualified and prepared for directing and supervising the staff of the institution so as to ensure that the programme of training for the nursing examinations provided for in these Regulations is satisfactorily covered; and
 - (iv) persons qualified in medical, surgical and related specialties and registered under the Medical Board Ordinance, 1960; No. 35
of 1960
- (e) equipment and facilities for teaching and study exist at the institution and are in the opinion of the Council adequate for the preparation of persons as nurses; and
- (f) the institution is associated with a district service approved by the Council for the provision of experiences in the field of public health and community services.

5. An institution may be designated to be a recognised place of training for midwives if the Council is satisfied as regards the following criteria— Designation
of
institution
for training
midwives

- (a) at least one thousand confinements take place annually at the institution;
- (b) at least twenty-five per cent of the number of maternity beds at the institution are allocated to ante-natal care;
- (c) the staff of the institution includes a sufficient number of—
 - (i) midwives;
 - (ii) persons experienced in obstetrics, gynaecology, paediatrics and anaesthetics who are registered under the Medical Board Ordinance, 1960; and No. 35 of
1960
 - (iii) persons qualified to teach and lecture on the various aspects of maternal and child care and on all matters relating thereto;
- (d) equipment and facilities for teaching and study exist at the institution and are in the opinion of the Council adequate for the preparation of persons as midwives;

- (e) the appurtenances of a school exist under the direction of a person who, in the opinion of the Council, is qualified for supervising and putting into effect the aims and objectives of a school of midwifery; and
- (f) the institution is associated with a district domiciliary service approved by the Council for the provision of training in the delivery and care of mothers and infants in their own homes.

Designation
of
institution
for training
nursing
assistants

6. An institution may be designated to be a recognised place of training for nursing assistants if the Council is satisfied as regards the following criteria—

- (a) provision at the institution of not less than one hundred beds, comprising—
 - (i) not less than fifty medical beds;
 - (ii) not less than twenty surgical beds;
 - (iii) not less than fifteen paediatric beds; and
 - (iv) not less than fifteen elective beds;
- (b) a sufficient variety of patients in the clinical area of the institution;
- (c) facilities exist at the institution for the supervision of the trainees by registered nurses during the entire course of the programme of training;
- (d) equipment and facilities for teaching and study including registered nurses prepared and qualified for carrying on teaching processes in the ratio following—
 - (i) in the classroom, one nurse to not more than thirty trainees; and
 - (ii) in the practice areas, one nurse to not more than ten trainees,
 exist at the institution and are in the opinion of the Council adequate for the preparation of persons as nursing assistants;
- (e) the staff of the institution includes a person who has been prepared for directing and supervising the staff of the institution and has been exposed to or suitably orientated in the training of nursing assistants.

TRAINING OF NURSES

Qualifica-
tions for
admission
as student
nurse

7. Subject to these Regulations, a person may be admitted to an Approved School of Nursing as a student nurse if—

- (a) he is not less than eighteen years of age and not more than thirty-five years of age;
- (b) he has passed at least five subjects at ordinary level of the General Certificate of Education, two of such subjects being English Language and a subject which shows a proficiency in mathematics; and
- (c) he has passed the aptitude test (oral or written) of the Council.

8. (1) An application to take the aptitude test shall be made to the Council in the form set out as Form 1 in the First Schedule. Application to take aptitude test

- (2) An applicant shall forward with his application—
- (a) the fee prescribed in the Second Schedule;
 - (b) a certificate as to character in the form set out as Form 1 in the Third Schedule; and
 - (c) such other documents as are specified in the application form or as may be required by the Council.

9. An applicant who is successful in the aptitude test shall be awarded a certificate by the Council as evidence of his eligibility to seek admission to an Approved School of Nursing as a student nurse. Certificate for admission to Approved School of Nursing

10. (1) A person who is admitted to an Approved School of Nursing as a student nurse shall, within fourteen days of entry thereto or such other period as the Council may in its discretion allow, apply to the Council through the appropriate authority of the Approved School of Nursing in the form set out as Form 1 in the Fourth Schedule, for registration as a student nurse. Registration as student nurse

- (2) An applicant shall forward with his application—
- (a) the fee prescribed in the Second Schedule; and
 - (b) such other documents as are specified in the application form or as may be required by the Council.

(3) No person shall be admitted to the nursing examinations of the Council unless he is registered with the Council as a student nurse.

11. (1) The name of a student nurse may be removed from the Register of Student Nurses for failure— Removal of name from Register of Student Nurses

- (a) except during such leave as may be permitted under these Regulations, to devote the whole of the period of training to preparation for his examinations and future responsibilities as a nurse;
- (b) to complete the programme of training within the stipulated period; and
- (c) to enter the nursing examinations in accordance with these Regulations.

(2) Where a student nurse resigns or terminates his training at any stage prior to taking an examination which he is required to enter, the appropriate authority of the Approved School of Nursing shall, within fourteen days of such resignation or termination, notify the Council in that behalf, and the name of the student nurse shall be removed from the Register of Student Nurses.

(3) Where in the opinion of the appropriate authority of an Approved School of Nursing the attitude or performance of a student nurse is unsatisfactory or he is otherwise unsuited to be a nurse, a report shall be made to the Council with a recommendation for the removal of the name of the student nurse from the Register of Student Nurses.

(4) The Council on considering the report and recommendation under paragraph (3) and any explanation offered by the student nurse may request such further reports as it may consider necessary for determining whether the name of the student nurse should be removed from the Register of Student Nurses.

(5) If on consideration of the report and recommendation and any explanation offered by the student nurse the Council is satisfied that the attitude or performance of the student nurse is unsatisfactory or that he is otherwise unsuited to be a nurse, his name shall be removed from the Register of Student Nurses.

(6) The name of a student nurse shall be removed from the Register of Student Nurses—

- (a) after the second unsuccessful attempt at the assessment examination held at the end of the first six months of training;
- (b) after the second unsuccessful attempt at the practical or written preliminary examination;
- (c) after the third unsuccessful attempt at the practical or written final examination;
- (d) after failing to complete the preliminary examination at the end of two years from the date of entry to training; or
- (e) after failing to complete the final examination at the end of five years from the date of entry to training.

Nursing
Examina-
tions of
the Council

12. (1) The following examinations shall be held by the Council for persons in Approved Schools of Nursing who are registered as student nurses with the Council—

- (a) an assessment examination which shall be held at the end of six months from the date of entry to training;
- (b) a preliminary examination consisting of—
 - (i) a practical examination which shall be held not less than six months from the date of entry to training; and
 - (ii) a written examination which shall be held not less than six months after successful completion of the assessment examination; and
- (c) a final examination consisting of—
 - (i) a practical examination which shall be held not less than four months prior to the written examination referred to in clause (ii); and
 - (ii) a written examination (hereinafter referred to as "the qualifying examination") which shall be held not less than thirty-six months from the date of entry to training.

(2) No student nurse may enter the written preliminary examination or the qualifying examination unless he has passed the practical preliminary examination or the practical final examination, as the case may be.

(3) A student nurse who fails the preliminary examination, either written or practical or the final examination, either written or practical in whole or in one subject is deemed to have failed the preliminary examination or the final examination, as the case may be.

13. The period of training of a student nurse shall extend over a period of three years from the date of entry to training. Duration of programme of training

14. The syllabus of subjects—

- (a) for the Certificate in General Nursing, is as set out in Part I of the Fifth Schedule; and Syllabus of subjects for general and psychiatric nursing
- (b) for the Certificate in Psychiatric Nursing, is as set out in Part II of the Fifth Schedule.

15. The training of a student nurse shall include—

- (a) theoretical, practical and clinical instructions covering the subjects as prescribed in the syllabus; Content of programme of training
- (b) attendance at not less than seventy-five per cent of the lectures on each subject in the syllabus; and
- (c) maintenance of a Record Book of practical nursing experiences which shall be presented by the student nurse at the practical nursing examinations, preliminary and final.

16. (1) The student nurse shall, whether in training for the Certificate in General Nursing or the Certificate in Psychiatric Nursing, cover during the first six months of training a programme of fundamental nursing principles (hereinafter referred to as "the Fundamental Nursing Programme") as applied to— Plan of training

- (a) *Social Science*—Psychology applied to Nursing; Sociology applied to Nursing;
- (b) *Nursing Arts*—Nursing heritage; Fundamentals of Nursing (principles); Emergency Nursing Care (First Aid);
- (c) *Biological Sciences*—Human Anatomy and Physiology; Personal and Community Health; and
- (d) *Physical Science*—Principles of physics and chemistry as applied to Nursing.

(2) The student nurse, whether in training for the Certificate in General Nursing or the Certificate in Psychiatric Nursing, shall cover over a period of not more than twenty-four months calculated from the date of entry to training the subjects set out in the syllabus for the preliminary examination, that is to say—

- (a) Principles and Practice of Nursing;
- (b) Introduction to the study of structure and function of man;
- (c) Personal and Community Health;
- (d) Introduction to the study of Human Behaviour; and
- (e) Emergency Care.

(3) The student nurse in training for the Certificate in General Nursing, shall cover over a period of not less than thirty-six months calculated from the date of entry to training the subjects set out in the syllabus for the final examination, that is to say—

- (a) Principles and Practice of Nursing related to specific Medical and Surgical conditions in children and adults;
- (b) Pharmacology;
- (c) Introduction to Psychiatric and Mental Health Nursing;
- (d) Introduction to the study of Man and his environment;
- (e) Professional Adjustments and Ethics; and
- (f) Elements of Ward Administration.

(4) The student nurse in training for the Certificate in Psychiatric Nursing shall cover over a period of not less than thirty-six months calculated from the date of entry to training the subjects set out in the syllabus for the final examination, that is say—

- (a) Principles and Practice of Psychiatric Nursing;
- (b) Psychiatry—Science and Treatment of Mental Disorders;
- (c) Introduction to the study of Psychological concepts;
- (d) Community Health;
- (e) Physical illness and psycho-physiological disturbances;
- (f) Pharmacology;
- (g) Nutrition;
- (h) Professional Adjustments and Ethics; and
- (i) Elements of Ward Administration.

(5) The student nurse in training for the Certificate in General Nursing, shall receive theoretical and clinical experiences covering those aspects of the syllabus for the Certificate in General Nursing. The clinical experiences shall be as set out hereunder—

Maximum period of training	156 weeks		
Minimum experience requirements	112 weeks		
The Fundamental Nursing Programme	26 weeks		
Medical Nursing	12 weeks		
Surgical Nursing	12 weeks		
Paediatric Nursing	12 weeks		
Gynaecological Nursing	6 weeks		
Psychiatric Nursing	6 weeks		
Community Health Nursing	6 weeks		
Obstetric Nursing	6 weeks		
Operating Theatre Nursing	6 weeks		
Casualty and Out Patient's Department	6 weeks		
Ear, Nose, Throat and Eye Nursing	6 weeks		

Communicable Diseases Nursing	...	...	4 weeks
Orthopaedic Nursing	...	...	4 weeks
Neuro-surgical Nursing	...	...	4 weeks
Elective Nursing	...	...	4 weeks
Block (classroom)	...	...	18 weeks
		Total	<u>112 weeks</u>

(6) For the purposes of paragraph (5), instruction in obstetric nursing shall extend over a period of not less than four weeks and shall include—

- (a) the female reproductive organs and the breasts;
- (b) the physiology and management of normal pregnancy;
- (c) the physiology, mechanism and management of normal labour;
- (d) the physiology and management of the puerperium;
- (e) an introduction to common complications which may arise in pregnancy, labour and the puerperium;
- (f) the physiology and care of the normal infant, breast and artificial feeding;
- (g) an introduction to common complications affecting the infant;
- (h) an introduction to the care of the premature infant;
- (i) the taking and recording of histories and examining pregnant women;
- (j) the observing of not less than six normal labours, including reception and admission treatment, care and comfort given during labour, the complete delivery and immediate care of mother and infant;
- (k) the observing of the nursing care of not less than six mothers and infants within the first nine days of the lying-in period; and
- (l) the making of one or more visits with a domiciliary midwife and attending a district pre-natal clinic.

(7) For the purposes of paragraph (6) "lying-in period" means a period being not less than nine days nor more than twenty-eight days after the end of the labour during which the continued attendance of a midwife is requisite.

(8) Where facilities for obstetric or gynaecological nursing experiences are not available to the male student nurse in training for the Certificate in General Nursing, the Council may waive the requirements of clinical experiences set out in paragraph (4), if the student nurse receives additional experiences in other areas so as to compensate for any deficiency in the total requirement of experiences.

(9) The student nurse in training for the Certificate in Psychiatric Nursing shall receive theoretical and clinical experiences

covering those aspects of the syllabus for the Certificate in Psychiatric Nursing. The clinical experiences shall be as set out hereunder—

Maximum period of training	156 weeks
Minimum experience requirements	112 weeks
The Fundamental Nursing Programme	26 weeks
Admission (disturbed)	9 weeks
Admission (acutely ill)	12 weeks
Convalescent Ward	8 weeks
Long-term Ward	8 weeks
Children's Ward	8 weeks
Psychogeriatrics Ward	6 weeks
Alcoholics	6 weeks
Occupational Therapy	4 weeks
Recreational Therapy	4 weeks
Psychiatric Unit	4 weeks
Community Mental Health	10 weeks
Public Health	3 weeks
Medical/Surgical Nursing	8 weeks
Paediatrics	4 weeks
Block (classroom)	18 weeks
Total	112 weeks

**Normal
leave**

17. A student nurse may be granted the following periods of leave—

- | | |
|----------------------------|----------|
| (a) Vacation leave | 10 weeks |
| (b) Sick leave | 6 weeks |
| (c) Emergency leave | 2 weeks |

**Break in
training**

18. (1) An interruption of the programme of training of a student nurse exceeding four consecutive weeks is deemed to be a break in the training of the student nurse.

(2) The appropriate authority of an Approved School of Nursing shall notify the Council of any break in the training of the student nurse.

(3) The report of the appropriate authority under paragraph (2) shall be accompanied by a medical certificate or other documentary evidence of illness satisfactory to the Council.

(4) In the event of a student nurse accruing an unsatisfactory pattern of leave the student nurse may be required to undergo further experience beyond the minimum experience stipulated in these Regulations before sitting the qualifying examination.

(5) No student nurse may be admitted to the qualifying examination unless the record of leave as shown on the form of application is satisfactory to the Council.

19. (1) The Council may from time to time initiate programmes of training (hereinafter referred to as "post-basic programmes") so as to enable—

Post-basic programmes for registered nurses

- (a) persons registered as general nurses to qualify for registration as psychiatric nurses;
- (b) persons registered as psychiatric nurses to qualify for registration as general nurses;
- (c) persons registered as general or psychiatric nurses to qualify for registration in any new or special class or branch of nursing as the Council may specify.

(2) A person whose certificate of registration is deemed to be suspended or cancelled under Part II of the Ordinance—

- (a) shall not be admitted to a post-basic programme until his registration is restored;
- (b) shall, if he is attending a post-basic programme, cease to attend the programme until his registration is restored;
- (c) shall, if he has passed the qualifying examination, not be registered as a nurse in any other branch of nursing until his former registration is restored.

20. An application for admission to a post-basic programme at an Approved School of Nursing shall be made to the appropriate authority of the Approved School of Nursing.

Entry to post-basic programme

21. (1) A person who is admitted to a post-basic programme at an Approved School of Nursing shall within fourteen days of entry thereto or such further period as the Council may in its discretion allow, apply through the appropriate authority of the Approved School of Nursing to the Council in the form set out as Form 2 in the Fourth Schedule, for registration as a post-basic student nurse.

Registration as post-basic student nurse

(2) An applicant shall forward with an application—

- (a) the fee prescribed in the Second Schedule; and
- (b) such other documents as are specified in the application form or as may be required by the Council.

(3) A post-basic student nurse shall not be permitted to enter the qualifying examination unless he is registered with the Council as a post-basic student nurse.

22. The post-basic programme shall extend over a period of not less than eighteen months of which not more than three weeks shall be vacation or other leave.

Duration of post-basic programme

Removal of
name from
Register of
Post-Basic
Student
Nurses

23. The name of a post-basic student nurse shall be removed from the Register of Post-Basic Student Nurses after the lapse of two and one-half years.

Plan of
post-basic
programme

24. (1) A registered general nurse seeking to qualify for registration as a psychiatric nurse shall receive theoretical and clinical experiences covering those aspects of the syllabus for the Certificate in Psychiatric Nursing set out hereunder—

Admission Ward ...	...	...	...	18 weeks
Convalescent ...	...	...	...	8 weeks
Convalescent (long-term) ...	...	...	...	8 weeks
Children's Ward ...	...	...	...	8 weeks
Psychogeriatrics Ward ...	...	...	...	6 weeks
Alcoholics Treatment Centre ...	...	...	...	2 weeks
Psychiatric Unit ...	...	...	...	4 weeks
Occupational Therapy Department ...	...	...	...	4 weeks
Recreational Therapy Department ...	...	...	...	4 weeks
Public Health ...	...	...	...	3 weeks
Psychiatric Social Work Department and Out-Patient's Clinic ...	...	...	...	2 weeks
Block ...	...	...	...	7 weeks
Orientation ...	...	...	...	1 week
Vacation Leave ...	...	...	...	3 weeks
Total				78 weeks

(2) A registered psychiatric nurse seeking to qualify for registration as a general nurse shall receive theoretical and clinical experiences covering those aspects of the syllabus for the Certificate in General Nursing set out hereunder—

	<i>The Female Nurse</i>	<i>The Male Nurse</i>
General Medicine ...	14 weeks	14 weeks
General Surgery ...	7 weeks	9 weeks
Paediatrics ...	10 weeks	12 weeks
Casualty ...	4 weeks	4 weeks
Out-Patient's Department ...	2 weeks	2 weeks
Ear, Nose and Throat ...	3 weeks	3 weeks
Eyes ...	3 weeks	3 weeks
Gynaecology ...	4 weeks	nil
Orthopaedics ...	3 weeks	3 weeks
Neurosurgery ...	4 weeks	4 weeks
Operating Theatre ...	4 weeks	4 weeks
Public Health ...	3 weeks	3 weeks
Block ...	14 weeks	14 weeks
Vacation Leave ...	3 weeks	3 weeks
Total		78 weeks
Total		78 weeks

25. (1) Subject to subsection (2) the written examinations other than the assessment examination for student nurses and post-basic student nurses shall be held at Approved Schools of Nursing in the months of May and November in each year. Holding of examinations

(2) In the event of an emergency or other incident occurring which in the opinion of the Council renders it expedient to advance, defer or postpone such examinations, the Council may after giving due notice to that effect to the appropriate authorities of Approved Schools of Nursing advance, defer or postpone such examinations.

26. The assessment examination may be taken by a student nurse if— Qualifications for taking assessment examination

(a) he is shown not to have exceeded the stipulated entitlement of leave permitted over the period of the programme of training; and

(b) he is declared by the appropriate authority of the Approved School of Nursing to have displayed conduct and performance of a satisfactory standard.

27. (1) An application to take the assessment examination shall be made to the Council in the form set out as Form 2 in the First Schedule, not less than three weeks before the commencement of the examination. Application to take assessment examination

(2) The applicant shall forward with his application the examination fee prescribed in the Second Schedule.

(3) The application shall include evidence satisfactory to the Council that there has been compliance by the applicant with regulation 10.

28. The preliminary examination may be taken by a student nurse if— Qualifications for taking preliminary examination

(a) he has been successful in the assessment examination;

(b) he is shown by transcripts submitted by the appropriate authority of the Approved School of Nursing to have satisfied the requirements of theoretical and clinical experiences calculated from the date of entry to the programme of training to the date of making application to take the preliminary examination;

(c) he is shown not to have exceeded the stipulated entitlement of leave permitted over the period of the programme of training; and

(d) he is declared by the appropriate authority of the Approved School of Nursing to have displayed conduct and performance of a satisfactory standard.

29. (1) An application to take the preliminary examination shall be made to the Council in the form set out as Form 3 in the First Schedule, not less than three weeks before the commencement of the examination. Application to take preliminary examination

(2) The applicant shall forward with his application the examination fee prescribed in the Second Schedule.

(3) The application shall include evidence satisfactory to the Council that there has been compliance by the applicant with Regulation 10.

Qualifications for taking qualifying examination

30. (1) The qualifying examination may be taken by a student nurse if—

- (a) he has been successful in the preliminary examination and the final practical examination;
- (b) he is shown by transcripts submitted by the appropriate authority of the Approved School of Nursing to have satisfied the requirements of theoretical and clinical experiences calculated from the date of entry to the programme of training to the date of making application to take the examination;
- (c) he is shown not to have exceeded the stipulated entitlement of leave permitted over the period of the programme of training; and
- (d) he is declared by the appropriate authority of the Approved School of Nursing to have displayed conduct and performance of a satisfactory standard.

(2) The qualifying examination may be taken by a post-basic student nurse if—

- (a) he holds a valid certificate of registration under section 17(1) of the Ordinance and is undergoing the post-basic programme of training;
- (b) he is shown by transcripts submitted by the appropriate authority of the Approved School of Nursing to have satisfied the requirements of theoretical and clinical experiences calculated from the date of entry to the programme of training to the date of making application to take the examination;
- (c) he is shown not to have exceeded the stipulated entitlement of leave permitted over the period of the programme of training; and
- (d) he is declared by the appropriate authority of the Approved School of Nursing to have displayed conduct and performance of a satisfactory standard.

Application to take final examination

31. (1) An application to take the final examination shall be made to the Council not less than three weeks before the commencement of the examination.

(2) The application shall be made—

- (a) in the case of a student nurse who is completing the general nursing programme, in the form set out as Form 4 in the First Schedule;

- (b) in the case of a student nurse who is completing the psychiatric nursing programme, in the form set out as Form 5 in the First Schedule;
- (c) in the case of a post-basic student nurse who is completing the general nursing programme, in the form set out as Form 6 in the First Schedule; and
- (d) in the case of a post-basic student nurse who is completing the psychiatric nursing programme, in the form set as Form 7 in the First Schedule.

(3) The applicant shall forward with his application the examination fee prescribed in the Second Schedule.

(4) The application shall include evidence satisfactory to the Council that there has been compliance by the applicant with Regulation 10 or Regulation 21, as the case may be.

32. A student taking the practical or written examinations of the Council is required— Uniform

- (a) to wear the full uniform of the Approved School of Nursing in which the programme is being undertaken;
- (b) to be of neat and tidy appearance and with an avoidance of extremes with respect to hair, nails, footwear and length of clothing.

33. A student taking the practical or written examinations of the Council who arrives at the examination centre more than fifteen minutes after an examination has commenced may be refused permission to take the examination. Punctuality
at examina-
tions

34. (1) A student whose name is on the list of candidates for an examination of the Council who absents himself from the examination and fails to submit in writing an explanation for such absence, satisfactory to the Council, may be deemed to have had one unsuccessful attempt at the examination. Absence
from an
examina-
tion

(2) A medical certificate in support of absence from an examination shall be delivered to the Council within two days of the date on which the absence occurred.

35. (1) A student failing one subject of an examination is permitted to re-sit the subject at the next following examination unless expressly required by the Council to pursue further training in the particular subject for a specific period. Re-sit of
examina-
tion

(2) No student may re-sit the whole or one subject of an examination unless the record of leave and experience calculated from the date of the last application to the date of the application to re-sit the whole or one subject of the examination is satisfactory to the Council.

36. (1) Notwithstanding anything in these Regulations the Council may refuse to register as a student nurse or to admit to the nursing examinations or to the Register of Nurses or to issue a certificate to any person whom it considers to be physically, mentally or morally unfit to be a nurse. Exclusion
from
training or
registration

(2) Where a person proposing to become a student nurse or being a student nurse presents to the Council a birth or baptismal certificate or other document in accordance with these Regulations, which has been falsified in any way, the Council shall be entitled to postpone his registration as a student nurse or his admission to the examinations or to refuse to register him as a student nurse or to admit him to the examinations or to the Register of Nurses.

Disqualifi-
cation for
examina-
tion and
registration

37. Where it is brought to the notice of the Council that a student nurse who is a candidate for the preliminary or final examination, or who has been successful in the qualifying examination and is an applicant for admission to the Register of Nurses, has been convicted of felony or misdemeanour or has been guilty of conduct which, had he been a registered nurse, would in the opinion of the Council have rendered him liable to disciplinary proceedings in accordance with the procedure prescribed in these Regulations, the Council may make such reasonable investigations as may be necessary, and may, after affording him an opportunity to offer an explanation, refuse to admit him to the preliminary or final examination or to the Register of Nurses, as the case may be.

Notification
of results
of examina-
tions

38. A student nurse or a post-basic student nurse who has taken the qualifying examination shall be informed by the Council of his results at such examination.

Award of
certificate

39. A student nurse or a post-basic student nurse who is successful in the qualifying examination shall be awarded the Certificate of General Nursing or the Certificate of Psychiatric Nursing, as the case may be, by the Council.

REGISTRATION OF NURSES

Registration
as a nurse

40. (1) An application for registration as a general nurse in the Register of Nurses shall be made to the Council.

(2) The application shall be made—

- (a) in the case of a person who has been successful in the qualifying examination in general nursing, in the form set out as Form 3 in the Fourth Schedule; and
- (b) in the case of a person trained in general nursing outside Trinidad and Tobago and seeking registration under section 16(3), (4) or (5) of the Ordinance, in the form set out as Form 4 in the Fourth Schedule and shall be accompanied by a certificate as to character in the form set out as Form 2 in the Third Schedule.

(3) An application for registration as a psychiatric nurse in the Register of Nurses shall be made to the Council.

(4) The application shall be made—

- (a) in the case of a person who has been successful in the qualifying examination in psychiatric nursing, in the form set out as Form 5 in the Fourth Schedule; and

- (b) in the case of a person trained in psychiatric nursing outside Trinidad and Tobago and seeking registration under section 16(3), (4) or (5) of the Ordinance, in the form set out as Form 6 in the Fourth Schedule and shall be accompanied by a certificate as to character in the form set out as Form 3 in the Third Schedule.

(5) An applicant shall forward with his application the registration fee prescribed in the Second Schedule.

41. (1) Subject to these Regulations, a certificate of registration to practise as a general or psychiatric nurse may be continued in force on payment of the annual registration fee prescribed in the Second Schedule. Annual registration fee

(2) The annual registration fee shall become due on the 30th September in each year subsequent to the year in which a person was registered.

(3) Where a certificate of registration is deemed to be suspended under section 17(2) of the Ordinance for non-payment of any annual registration fee the validity of the certificate may be restored upon application made in writing to the Council and on payment of any unpaid annual registration fee and the fine prescribed in the Second Schedule.

42. (1) Subject to paragraph (2), on the expiration of a period of suspension of the registration of a nurse under section 18 of the Ordinance, the Council shall upon application made in writing to the Council and on payment of any unpaid annual registration fee, restore the registration of the applicant. Restoration of registration after suspension

(2) The Council may in its discretion as a condition to restoring the registration of the applicant under paragraph (1) require the applicant to pay any fees incurred by the Council in taking disciplinary proceedings against him.

43. (1) A person may at any time after two years from the date of cancellation of his certificate under section 18 of the Ordinance apply in writing to the Council for restoration of his registration. Restoration of registration after cancellation

(2) The application shall be made in writing and shall state any ground upon which it is made and the names and addresses of two persons acceptable to the Council who are able and willing to give oral or written information as to the character of the applicant, the nature of his employment since the date of cancellation of his registration and such other information as the Council may require.

(3) Subject to paragraph (4), where the Council proposes to restore the registration of the applicant, the registration may be restored on payment of the registration fee.

(4) The Council may in its discretion as a condition to restoring the registration of the applicant require him to pay any fees incurred by the Council in taking disciplinary proceedings against him.

(5) An applicant whose application under paragraph (1) for restoration of his registration is rejected by the Council may from time to time make a further application, but no application made before two years of the rejection of any application shall be entertained by the Council.

TRAINING OF MIDWIVES

Qualifications
for admission
as a pupil
midwife

44. Subject to these Regulations, a person may be admitted to an Approved School of Midwifery as a pupil-midwife if—

- (a) she is registered as a nurse in the Register of Nurses;
- (b) she has passed—
 - (i) at least five subjects at ordinary level of the General Certificate of Education, two of such subjects being English Language and a subject which shows a proficiency in mathematics; and
 - (ii) the aptitude test (oral or written) of the Council.

Disqualifi-
cation for
admission to
training as
midwife

45. A person shall not be eligible for training as a pupil-midwife if she is under twenty-one years of age, or except at the discretion of the Council, if she is over fifty years of age.

Registration
as pupil-
midwife

46. (1) A person who is admitted to an Approved School of Midwifery as a pupil-midwife shall within fourteen days of entry thereto or such other period as the Council may in its discretion allow, apply through the appropriate authority of the Approved School of Midwifery to the Council in the form set out as Form 7 in the Fourth Schedule, for registration as a pupil-midwife.

- (2) An applicant shall forward with her application—
 - (a) the fee prescribed in the Second Schedule; and
 - (b) such other documents as are specified in the application Form or as may be required by the Council.

(3) No pupil-midwife shall be admitted to the midwifery examinations of the Council unless she is registered with the Council as a pupil-midwife.

Removal of
name from
the Register
of pupil-
midwives

47. (1) The name of a pupil-midwife may be removed from the Register of Pupil-Midwives for failure—

- (a) except during such leave as may be permitted under these Regulations, to devote the whole of the period of training to preparation for her examinations and future responsibilities as a midwife;
- (b) to complete the programme of training within the stipulated period; and
- (c) to enter the first examination following the end of the programme of training.

(2) Where a pupil-midwife resigns or terminates her training at any stage prior to taking an examination which she is required to enter, the appropriate authority of the Approved School of Midwifery shall, within fourteen days of such resignation or termination, notify the Council in that behalf, and the name of the pupil-midwife shall be removed from the Register of Pupil-Midwives.

(3) Where in the opinion of the appropriate authority of an Approved School of Midwifery the attitude or performance of a pupil-midwife is unsatisfactory or she is otherwise unsuited to be a midwife, a report shall be made to the Council with a recommendation for the removal of the name of the pupil-midwife from the Register of Pupil-Midwives.

(4) The Council on considering the report and recommendation under paragraph (3) and any explanation offered by the pupil-midwife may request such further reports as it may consider necessary for determining whether the name of the pupil-midwife should be removed from the Register of Pupil-Midwives.

(5) If on a consideration of the report and recommendation and any explanation offered by the pupil-midwife the Council is satisfied that the attitude or performance of the pupil-midwife is unsatisfactory or that she is otherwise unsuited to be a midwife, her name shall be removed from the Register of Pupil-Midwives.

48. The period of training of a pupil-midwife shall extend over a period of—

- Duration of
programme
of training
- (a) not less than one year in the case of a person referred to in regulation 44(a); and
- (b) not less than two years in the case of a person referred to in regulation 44(b).

49. (1) A one-year pupil-midwife shall receive theoretical and clinical experiences covering those aspects of the syllabus for the midwifery examinations. The clinical experiences shall be as set out hereunder—

Plan of
training

Maximum period of training ...	52 weeks	
Minimum experience requirements	50 weeks	
	(2,200 hours)	
Labour Ward		10 weeks
Gynæcology (abortions)		2 weeks
Premature Unit and General Nursery		8 weeks
Lying-in Ward		8 weeks
Ante-natal Ward		10 weeks
Family Planning, Ante-natal and Post-natal Clinics		6 weeks
District Puerperium		2 weeks
Child Welfare Clinics		2 weeks
Milk Kitchen		2 weeks
Total		<u>50 weeks</u>

(2) A two-year pupil-midwife shall receive theoretical and clinical experiences covering those aspects of the syllabus for the midwifery examinations. The clinical experiences shall be as set out hereunder—

Maximum period of training ...	111 weeks
Minimum experience requirements	90 weeks
	(3,960 hours)
A: Paediatric—Medical	4 weeks
Paediatric—Surgical	4 weeks
Paediatric—Infectious	2 weeks
Gynæcology (pure)	2 weeks
	<hr/>
	12 weeks
	<hr/>
B: Gynæcology (abortions)	4 weeks
Labour Ward	20 weeks
Premature Unit and General Nursery	12 weeks
Lying-in Ward	12 weeks
Ante-natal Ward	12 weeks
Family Planning, Ante-natal and Post-natal Clinics	8 weeks
District Puerperium	4 weeks
Child Welfare Clinic	4 weeks
Milk Kitchen	2 weeks
	<hr/>
	78 weeks
	<hr/>
Total Minimum Clinical experiences ...	90 weeks

Syllabus of subjects

50. The syllabus of subjects for the Certificate and Licence to practise as a Midwife is as set out in Part 3 of the Fifth Schedule.

Content of programme of training

51. (1) The training of a pupil-midwife shall include—

- (a) theoretical, practical and clinical instruction and attendance upon, and the nursing of cases;
- (b) attendance at a minimum of eighty per cent of the lectures on the subjects in the syllabus;
- (c) conduct of ante-natal examination on not less than sixty pregnant women;
- (d) practical instruction in the care and supervision of women during the course of pregnancy;
- (e) witnessing not less than ten labours and being in attendance upon not less than sixty such labours, making full examinations during the course of labour, personally delivering the infants, placenta and membranes and making full records thereof; and
- (f) delivery in the patient's own home or in any approved place outside of the Approved School of Midwifery of such cases as may be prescribed from time to time.

(2) All practical instructions shall be carried out by the pupil-midwife under the supervision of a midwife.

52. (1) A pupil-midwife shall maintain and keep a record of experiences received during the course of training and in addition, a special book of records (hereinafter referred to as a "Case Book") in accordance with these Regulations.

Records to be maintained by pupil-midwife

(2) A Case Book shall record selected patient-care experiences of the pupil-midwife including reports covering the assessment and management of such number of cases as may be prescribed by these Regulations, that is to say—

- (a) the history of each case;
- (b) the progress of each labour managed and the puerperal care including family planning.

(3) A minimum of six cases shall be recorded in the Case Book of the pupil-midwife of which not less than three shall be of cases referred to in regulation 51(f).

53. Midwifery examinations both written and practical shall be held in the months of January and July in each year.

Midwifery examinations

54. (1) A one-year pupil-midwife who proposes to enter at the end of a one-year period of training—

Commencement of training

- (a) the January midwifery examinations, shall commence training not later than the first week in November of the first half of the biennial preceding the January midwifery examinations;
- (b) the July midwifery examinations, shall commence training not later than the first week in May of the first half of the biennial preceding the July midwifery examinations.

(2) A two-year pupil-midwife who proposes to enter at the end of a two-year period of training—

- (a) the January midwifery examinations, shall commence training not later than the first week in November of the first third of the triennial preceding the January midwifery examinations;
- (b) the July midwifery examinations, shall commence training not later than the first week in May of the first third of the triennial preceding the July midwifery examinations.

55. A two-year pupil-midwife may be granted vacation leave covering a period of three weeks on completion of the first year of training.

Normal leave

56. (1) An interruption of the programme of training of a pupil-midwife for a period covering more than seven consecutive working days is deemed to be a break in the training of the pupil-midwife.

Break in training

(2) The appropriate authority of an Approved School of Midwifery shall notify the Council of any break in the training of a pupil-midwife.

(3) Subject to paragraph (5), where a break in the training of a pupil-midwife was caused by illness or other emergency, the Council may on application made by the pupil-midwife and approved by the appropriate authority of the Approved School of Midwifery allow the training prior to the break to be counted towards the prescribed period of training on such terms and conditions as the Council may think fit and in particular any deficiency caused by such break shall be compensated for before the pupil-midwife applies for entry to the midwifery examinations.

(4) Where such break was caused other than by illness or normal vacation leave, the Council having regard to the duration of such break may disallow the period of training prior to the break to be counted as part of the prescribed period of training.

(5) Where a break was caused by illness the application under paragraph (3) shall be accompanied by a medical certificate or other documentary evidence of illness satisfactory to the Council.

Application
to take
midwifery
examinations

57. (1) An application to take the midwifery examinations shall be made to the Council not less than three weeks before the commencement of the examinations.

(2) The application shall be made—

(a) in the case of a one-year pupil-midwife, in the form set out as Form 8 in the First Schedule; and

(b) in the case of a two-year pupil-midwife, in the form set out as Form 9 in the First Schedule.

(3) The applicant shall forward with her application the examination fee prescribed in the Second Schedule.

(4) The application shall include evidence satisfactory to the Council that there has been compliance by the applicant with regulation 44.

Presentation
of Case
Book to
examiner

58. The pupil-midwife shall, at the oral and practical parts of the midwifery examinations, present to the examiner her Case Book duly completed and signed by the Instructor of the Approved School of Midwifery authorised in that behalf and the examiner may question the pupil-midwife on any aspect of the records entered in her Case Book.

Resit of
examination

59. (1) A pupil-midwife who is unsuccessful at the first examination following the end of her programme of training shall enter the next scheduled examination and if again unsuccessful may be allowed to enter the next scheduled examination.

(2) A pupil-midwife who fails to enter an examination as provided in paragraph (1) for cause unsatisfactory to the Council, shall be deemed to have had one unsuccessful attempt at the examination.

60. (1) Notwithstanding anything in these Regulations the Council may refuse to register as a pupil-midwife or to admit to the examination or to the Register of Midwives or to issue a certificate to, any person whom it considers to be physically, mentally or morally unfit to be a midwife.

Exclusions from training or registration

(2) Where a person proposing to become a pupil-midwife or, being a pupil-midwife presents to the Council a birth or baptismal certificate or other document in accordance with these Regulations, which has been falsified in any way, the Council shall be entitled to postpone her registration as a pupil-midwife, or her admission to the examinations or to refuse to register her as a pupil-midwife or to admit her to the examinations or to the Register of Midwives.

61. Where it is brought to the notice of the Council that a pupil-midwife who is a candidate for the midwifery examinations, or who has been successful in the midwifery examinations and is an applicant for admission to the Register of Midwives, has been convicted of felony or misdemeanour or has been guilty of conduct which, had she been a midwife, would in the opinion of the Council have rendered her liable to disciplinary proceedings in accordance with the procedure prescribed in these Regulations, the Council may make such reasonable investigations as may be necessary, and may, after affording her an opportunity to offer an explanation, refuse to admit her to the examinations or to the Register of Midwives, as the case may be.

Disqualification for examinations and registration

62. A pupil-midwife, who has taken the midwifery examinations shall be informed by the Council of the results of such examinations.

Notification of results of examinations

63. A pupil-midwife who is successful in the midwifery examinations shall be awarded the Certificate of Midwifery by the Council.

Award of certificate

64. (1) An application for registration as a midwife in the Register of Midwives shall be made to the Council.

Registration as a midwife

(2) The application shall be made—

- (a) in the case of a person who has been successful in the midwifery examinations, in the form set out as Form 8 in the Fourth Schedule; and
- (b) in the case of a person trained in midwifery outside Trinidad and Tobago and seeking registration under section 21(3) of the Ordinance, in the form set out as Form 9 in the Fourth Schedule and shall be accompanied by a Certificate as to character in the form set out as Form 4 in the Third Schedule.

(3) The applicant shall forward with her application the registration fee prescribed in the Second Schedule.

65. (1) Subject to these Regulations, a licence to practise as a midwife may be continued in force on payment of the annual registration fee prescribed in the Second Schedule.

Annual registration fee

(2) The annual registration fee shall become due on the 30th September in each year subsequent to the year in which a person was registered.

(3) Where a licence to practise as a midwife is deemed to be suspended under section 22(2) of the Ordinance for non-payment of any annual registration fee the validity of the licence may be restored upon application made in writing to the Council and on payment of any unpaid annual registration fee and the fine prescribed in the Second Schedule.

Restoration
of registra-
tion after
suspension

66. (1) Subject to paragraph (2), on the expiration of a period of suspension of the registration of a midwife under section 23 of the Ordinance, the Council shall, upon application made in writing to the Council and on payment of any unpaid annual registration fee, restore the registration of the applicant.

(2) The Council may in its discretion as a condition to restoring the registration of the applicant under paragraph (1) require her to pay any fees incurred by the Council in taking disciplinary proceedings against her.

Restoration
of registra-
tion after
cancellation

67. (1) A person may at any time after two years from the date of cancellation of her registration as a midwife under section 23 of the Ordinance apply in writing to the Council for restoration of her registration.

(2) The application shall be made in writing and shall state any ground upon which it is made and the names and addresses of two persons acceptable to the Council who are able and willing to give oral or written information as to the character of the applicant, the nature of her employment since the date of cancellation of her registration and such other information as the Council may require.

(3) Subject to paragraph (4), where the Council proposes to restore the registration of the applicant the registration may be restored on payment of the registration fee.

(4) The Council may in its discretion as a condition to restoring the registration of the applicant require her to pay any fees incurred by the Council in taking disciplinary proceedings against her.

(5) An applicant whose application under paragraph (1) for restoration of her registration is rejected by the Council may from time to time make a further application, but no application made before two years of the rejection of any application shall be entertained by the Council.

TRAINING OF NURSING ASSISTANTS

Qualifica-
tions for
selection
as trainee

68. Subject to these Regulations, a person may be admitted to an approved training centre as a trainee if—

- (a) he is of good character;
- (b) he is not less than eighteen years of age and not more than forty-five years of age;

- (c) he has passed the Primary School Leaving Certificate Examination or an equivalent examination or has satisfied the Council that he has attended an approved secondary school for a minimum of two years.

69. (1) An application for entry to the nursing assistant training course shall be made to the Council in the form set out as Form 10 in the Fourth Schedule. Listing as
trainee

- (2) An applicant shall forward with his application—
 - (a) the fee prescribed in the Second Schedule; and
 - (b) such other documents as are specified in the application form or as may be required by the Council.

(3) The applicant shall also cause to be forwarded directly to the Council by the person or authority completing the forms—

- (a) a certificate as to character in the form set out as Form 5 in the Third Schedule; and
- (b) a certificate of commencement of the nursing assistant training course in the form set out as Form 6 in the Third Schedule.

(4) No person shall be admitted to the assessment tests of the Council for the Certificate of Enrolment as a Nursing Assistant unless he is listed with the Council as a trainee.

70. (1) The name of a trainee may be removed from the List of Trainees for failure— Removal of
name from
the List of
Trainees

- (a) except during such leave as may be permitted under these Regulations, to devote the whole of the period of training to preparation for his assessment tests and future responsibilities as a nursing assistant;
- (b) to complete the programme of training within the stipulated period; and
- (c) to enter the first assessment test following the end of the first six months of the programme of training.

(2) The name of a trainee shall at the end of two years from the date of admission to the List of Trainees be removed therefrom unless the Council in its discretion having regard to representations made by the appropriate authority of the Approved Training Centre has permitted the name to remain on the List of Trainees for a further period not exceeding six months.

(3) Where a trainee resigns or terminates his training at any stage prior to taking an assessment test which he is required to enter, the appropriate authority of the Approved Training Centre shall, within fourteen days of such resignation or termination, notify the Council in that behalf, and the name of the trainee shall be removed from the List of Trainees.

(4) Where in the opinion of the appropriate authority of an Approved Training Centre the attitude or performance of a trainee is unsatisfactory or he is otherwise unsuited to be a nursing assistant, a report shall be made to the Council with a recommendation for the removal of the name of the trainee from the List of Trainees.

(5) The Council on considering such report and recommendation under paragraph (4) and any explanation offered by the trainee may request such further reports as it may consider necessary for determining whether the name of the trainee should be removed from the List of Trainees.

(6) If on consideration of the report and recommendation and any explanation offered by the trainee the Council is satisfied that the attitude or performance of the trainee is unsatisfactory or that he is otherwise unsuited to be a nursing assistant, his name shall be removed from the List of Trainees.

Syllabus of subjects

71. The syllabus of subjects for the Certificate of Enrolment as a Nursing Assistant is as set out in Part 4 of the Fifth Schedule.

Calculation of leave

72. Leave of a trainee shall be calculated on a forty-four hour week basis. Any break in training exceeding two weeks at a time shall be reported to the Council by the appropriate authority of the Approved Training Centre.

Minimum experience and training required

73. (1) No trainee shall be admitted to the written assessment test unless he has completed a minimum of 1,056 hours of theoretical and practical experience over a period of not less than six months from the date of entry to the Approved Training Centre.

(2) No trainee shall be admitted to the practical assessment test unless he has completed a minimum of 2,068 hours of theoretical and practical experience over a period of twelve months from the date of entry to the Approved Training Centre.

(3) No trainee shall be admitted to the Roll of Nursing Assistants unless he has completed 4,092 hours of theoretical and practical experience.

Admission to assessment tests

74. (1) An application to sit the written assessment test shall be made to the Council in the form set out as Form 10 in the First Schedule not less than three weeks before the commencement of the test.

(2) A trainee who has been unsuccessful in the written assessment test may apply to resit the test once only, subject however to his also applying to sit the practical assessment test.

(3) An application to sit the practical assessment test shall be made to the Council in the form set out as Form 11 in the First Schedule not less than three weeks before the commencement of the test.

(4) The applicant shall forward with his application under paragraph (1) or (3) the assessment test fee prescribed in the Second Schedule.

(5) A trainee who has been unsuccessful in the practical assessment test may apply to re-sit the test once only, subject however to the trainee undergoing a further period of six months' training prior to the making of his application.

75. (1) The period of internship for all trainees shall be of a duration of twelve months from the date of passing the practical assessment test. Period of
internship

(2) No trainee shall spend more than three months in any one section or unit of an Approved Training Centre.

(3) During the period referred to in paragraph (1)—

(a) the training of a trainee shall cover a minimum of 2,024 hours; and

(b) at least eleven weeks shall be spent in units approved by the Council for experiences in a public health situation and shall follow the general pattern, that is to say—

In General Health Care ...	4 weeks
In Maternal and Child Care	4 weeks
In Family Planning ...	1 week
In Immunization Programmes	2 weeks

(4) The content of training received by a trainee during the period of internship shall be recorded by the appropriate authority of the Approved Training Centre on the form set out in the Sixth Schedule and attached to the trainee's application for enrolment as a nursing assistant.

76. (1) Notwithstanding anything in these Regulations the Council may refuse to list as a trainee or admit to the assessment tests or to the Roll of Nursing Assistants or to issue a certificate to any person whom it considers to be physically, mentally or morally unfit to be a nursing assistant. Exclusion
from
training
or enrol-
ment

(2) Where a person proposing to become a trainee or being a trainee presents to the Council a birth or baptismal certificate or other document in accordance with these Regulations, which has been falsified in any way, the Council shall be entitled to postpone his listing as a trainee or his admission to the assessment tests or to refuse to list him as a trainee or to admit him to the assessment tests or to the Roll of Nursing Assistants.

77. Where it is brought to the notice of the Council that a trainee has, either during the course of his training or after completion of his internship, been convicted of felony or misdemeanour or has been guilty of conduct which had he been a Nursing Assistant, would in the opinion of the Council have rendered him liable to disciplinary proceedings in accordance with the procedure prescribed in these Regulations, the Council may after giving him an opportunity to state his case, and after making such reasonable investigations as may be necessary, refuse to admit him to the assessment tests or to the Roll of Nursing Assistants, as the case may be. Disqualifi-
cation for
assessment
tests and
enrolment

Notification
of results of
assessment
tests

78. A trainee who has taken an assessment test shall be informed by the Council of his results at such assessment test.

ENROLMENT OF NURSING ASSISTANTS

Enrolment
as nursing
assistant

79. (1) An application for enrolment as a nursing assistant shall be made to the Council.

(2) The application shall be made—

(a) in the case of a person who has successfully completed his period of internship, in the form set out as Form 11 in the Fourth Schedule; and

(b) in the case of a person trained as a nursing assistant outside Trinidad and Tobago, in the form set out as Form 12 in the Fourth Schedule.

(3) The applicant shall forward with his application the fee prescribed in the Second Schedule.

(4) An applicant who is admitted to the Roll of Nursing Assistants shall be awarded the Certificate of Enrolment as a Nursing Assistant by the Council.

Annual
enrolment
fee

80. (1) Subject to these Regulations, a certificate of enrolment as a nursing assistant may be continued in force on payment of the annual enrolment fee prescribed in the Second Schedule.

(2) The annual enrolment fee shall become due on the 30th September in each year subsequent to the year in which a person was enrolled.

(3) Where a certificate of enrolment is deemed to be suspended under section 35(2) of the Ordinance the validity of the certificate may be restored upon application made in writing to the Council and on payment of any unpaid annual enrolment fee and the fine prescribed in the Second Schedule.

(4) Where a certificate of enrolment is deemed to be suspended under section 35(2) of the Ordinance the Council may, at any time prior to an application being made for restoration of the validity of the certificate, cause to be published a notice of the suspension of such certificate.

Restoration
of enrol-
ment after
suspension

81. (1) Subject to paragraph (2), on the expiration of any period during which the name of a person was removed from the Roll of Nursing Assistants under section 36 of the Ordinance, the Council shall, upon application made in writing to the Council and on payment of any unpaid annual registration fee, restore the name of the applicant to the Roll.

(2) The Council may in its discretion as a condition to restoring the name of the applicant to the Roll of Nursing Assistants under paragraph (1) require him to pay any fees incurred by the Council in taking disciplinary proceedings against him.

82. (1) A person may at any time after two years from the date of the permanent removal of his name from the Roll of Nursing Assistants under section 36 of the Ordinance apply in writing to the Council for restoration of his name to the Roll. Restoration
of enrol-
ment after
cancellation

(2) The application shall be made in writing and shall state any grounds upon which it is made and the names and addresses of two persons acceptable to the Council who are able and willing to give oral or written information as to the character of the applicant, the nature of his employment since the date of removal of his name from the Roll and such other information as the Council may require.

(3) Subject to paragraph (4), where the Council proposes to restore the name of the applicant to the Roll, the name may be restored on payment of the enrolment fee.

(4) The Council may in its discretion as a condition to restoring the enrolment of the applicant require him to pay any fees incurred by the Council in taking disciplinary proceedings against him.

(5) An applicant whose application under paragraph (1) for restoration of his enrolment is rejected by the Council may from time to time make a further application, but no application made before two years of the rejection of any application shall be entertained by the Council.

DISCIPLINARY PROCEEDINGS

83. (1) Where the Council proposes to take disciplinary proceedings against a nurse, midwife or nursing assistant which may lead— Institution
of
disciplinary
proceedings

(a) to the suspension or cancellation of the registration of the nurse or midwife; or

(b) to the removal from the Roll of Nursing Assistants of the name of the nursing assistant,

the Council shall by notice in writing so inform the nurse, midwife or nursing assistant (hereinafter severally referred to as "the respondent") at least one week before the commencement of the inquiry.

(2) The notice shall state—

(a) the grounds on which the proceedings are based and shall give particulars of such grounds;

(b) the date, place and time of the inquiry;

(c) that the respondent is entitled to be heard in his defence and to be represented by counsel or solicitor at every stage of the inquiry; and

(d) that if the respondent fails to attend at the inquiry, without good reason, the inquiry may be proceeded with and concluded in his absence.

(3) The notice may be served on the respondent either personally or by being sent to him by registered post to the last postal address appearing in the register in which he is registered.

(4) Copies of all documents or other evidence which it is proposed to adduce in support of the charge shall be supplied to the respondent at least one week before the commencement of the inquiry.

- Appoint-
ment of
tribunal** 84. The Council shall, for the purpose of the inquiry, appoint not less than five members of the Council as a tribunal.
- Procedure
at the
inquiry** 85. The following procedure shall apply at the inquiry—
- (a) the case against the respondent may be presented by any person, including counsel or solicitor, on behalf of the Council;
 - (b) the respondent or his representative shall be given full opportunity to cross-examine any witness called by the Council;
 - (c) the respondent may testify on his own behalf and he or his representative may examine and re-examine any witness called to testify on his behalf;
 - (d) the tribunal shall cause the evidence of witnesses and all submissions made to be taken down in writing.
- Report of
tribunal** 86. On the conclusion of the inquiry the tribunal shall submit to the Council—
- (a) the record of the proceedings; and
 - (b) a report as to its findings.
- Decision of
Council** 87. (1) The Council may on consideration of the record of the proceedings and the report of the tribunal either exonerate the respondent or suspend or cancel his registration.
- (2) The decision of the Council shall be immediately notified in writing to the respondent.

GENERAL

- Loss of
certificate
of
registration** 88. (1) Subject to this regulation, where a certificate of registration as a nurse or midwife or a certificate of enrolment as a nursing assistant is lost, destroyed or mutilated a new certificate of registration or enrolment may be issued upon application made in writing to the Council and on payment of the fee prescribed in the Second Schedule.
- (2) An application for a new certificate on the grounds of loss or destruction of a certificate shall be accompanied by an affidavit attesting to the said loss or destruction and that to the best of the applicant's knowledge and belief the certificate is not in the hands of any unauthorised person.
- (3) A new certificate of registration or enrolment may be issued by the Council at the expiration of—
- (a) not less than one year following a first application on the ground of loss or destruction of a certificate; and
 - (b) not less than five years following a second or any subsequent application on the ground of loss or destruction of a certificate.
- (4) A mutilated certificate shall be submitted with an application for a new certificate on the ground of mutilation of the certificate.

89. (1) The Council may issue a badge to any person whose name is on any of its registers or roll on payment of the fee prescribed in the Second Schedule. Issue of badge

(2) The badge shall have engraved thereon the number allotted to the person in the register or roll and the nature of his registration or enrolment.

90. (1) The loss or destruction of a badge shall be reported to the Council within ten days of such loss or destruction. Loss of badge

(2) Subject to this regulation, where a badge is lost, destroyed or mutilated a new badge may be issued upon application made in writing to the Council and on payment of the appropriate fee.

(3) An application for a new badge on the ground of loss or destruction of a badge shall be accompanied by an affidavit attesting to the said loss or destruction and that to the best of the applicant's knowledge and belief the badge is not in the hands of any unauthorised person.

(4) A new badge may be issued by the Council at the expiration of—

- (a) not less than one year following a first application on the ground of loss or destruction of a badge; and
- (b) not less than five years following a second or any subsequent application on the ground of loss or destruction of a badge.

(5) A mutilated badge shall be submitted with an application for a new badge on the ground of mutilation of the badge.

91. A badge issued by the Council shall remain the property of the Council and shall be returned to the Council where the registration of the person to whom it was issued is suspended or cancelled. Badge to remain property of the Council

92. Any person may on application made in writing to the Council and on payment of the fee prescribed in the Second Schedule be furnished with a statement under the Seal of the Council certifying that a person is, or was on any date, or is not, or was not on any date, on any of its registers. Information from the register

93. (1) The Seal of the Council shall be kept in the custody of the Secretary who shall be responsible for the safe keeping thereof. Seal of the Council and signature

(2) The Seal of the Council shall be authenticated by the signature of the President and the Secretary.

(3) A record of the occasions on which and the purposes for which the Seal of the Council have been affixed, shall be kept by the Secretary and shall be signed by the President.

FIRST SCHEDULE

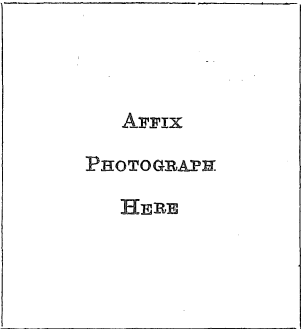
[Regulation 8(1)]

FORM 1

THE NURSING COUNCIL OF TRINIDAD AND TOBAGO

FORM OF APPLICATION FOR ADMISSION TO THE APTITUDE TEST FOR PROSPECTIVE STUDENT NURSES AND PUPIL-MIDWIVES

Fees Receipt No.	Form No.	Examination No.
---------------------------	-------------------	--------------------------



Complete this Application in your own handwriting)

1. SURNAME *(in Block Letters)*.....
(If married, place married name first, followed by the word "nee": then place your maiden name)
2. Other Name(s)
1st 2nd 3rd
3. Date of Birth.....
4. Place of Birth.....
5. Date of Marriage.....
- Full Postal Address.....
.....

I hereby apply to the Nursing Council of Trinidad and Tobago to be admitted to the Aptitude Test for prospective Student Nurses and Pupil-Midwives. I promise in the event of my being so admitted and in consideration thereof, to be bound by and to conform in all respect to, the Regulations for the time being in force.

And I also declare that the particulars which I have entered on this Form of Application are true and correct.

I now remit herewith the prescribed fee and forward the following original documents, viz:—

- (a) Certificate of Birth (with affidavit or with Certificate of Baptism)
- (b) Certificate of Marriage (if any).

I also attach my passport-sized photograph and the Council's Form of Certificate as to Character duly completed.

.....
Signature of Applicant

Date

(For Office Use Only)

DOCUMENTS RETURNED TO APPLICANT

- Certificate of Birth
- of Baptism
- of Marriage
- Affidavit
- Any other supporting document (specify):

EDUCATIONAL CERTIFICATES RETURNED
G.C.E. Certificates

CAM or LON	Year	Subject Shown (State 'O' or 'A')
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....

Any other Educational Certificates returned:—

Documents indicated above returned on.....and signed for by Owner in acknowledgement of receipt.

.....
Signature

[Regulation 27(1)]

FORM 2

Fees Receipt No.	Result	Examination No.
---------------------------	-----------------	--------------------------

**THE NURSING COUNCIL OF TRINIDAD AND TOBAGO
APPLICATION FOR ENTRY TO THE ASSESSMENT EXAMINATION
FOR STUDENT NURSES**

FROM A PERSON ENTERED ON THE COUNCIL'S REGISTER OF STUDENT NURSES AT THE
.....HOSPITAL SCHOOL OF NURSING

I,.....
*(Surname first: Block Letters. Place a comma after Surname. Followed by First Name, then Second Name, etc.)

having commenced the Programme of Training on.....
Day Month Year

do hereby make application for entry to the Assessment Examination prescribed for all persons completing the six-month initial phase of the Council's Programme of Training known as the Fundamental Nursing Programme.

.....
Signature of Applicant

Date

To be completed by Authority of Approved School of Nursing

Pattern of Leave taken by Applicant:—	Total (in hours)
From.....To.....	
From.....To.....	
From.....To.....	
From.....To.....	
Total Leave taken	

I HEREBY CERTIFY that this Applicant has commenced the Programme of Training on the date indicated above and that the conduct, performance and application to duty of the Applicant have been of a satisfactory standard.

Signature of Authority.....
Title.....
Date.....

*Any Name inserted here, different from that in which Student registration was effected, must be supported by documentary evidence.

For Office Use Only

Student registration checked and in order Yes No

Registered Student Nurse Number

[Regulation 29(1)]

FORM 3

Fees Receipt No.	Result	Examination No.
------------------	--------	-----------------

THE NURSING COUNCIL OF TRINIDAD AND TOBAGO

FORM OF APPLICATION FOR ENTRY TO THE PRELIMINARY NURSING EXAMINATION

as prescribed in the First Schedule to Regulations drafted under section 41 of the Nurses and Midwives Registration Ordinance, 1960

FOR COMPLETION BY A REGISTERED STUDENT NURSE OF THE.....
SCHOOL OF NURSING

I,.....
*(Surname first, Block Letters. Place a comma after Surname, followed by First Name; then Second Name, etc.)

a Registered Student Nurse of the institution named above, hereby apply to be admitted to the Preliminary Nursing Examination of the Council scheduled for

.....
(Month) (Year)

I have passed the prescribed Assessment Examination held at the end of the first six months of training held in

.....
(Month) (Year)

and have paid the Fee in the sum of \$.....in the manner stipulated.

.....
Signature of Applicant

Date

*Any name inserted here, different from that under which Student registration was effected must be supported by documentary evidence.

To be completed by Authority of Approved School of Nursing

EXPERIENCES OF APPLICANT

	<i>Theoretical</i>		<i>Clinical</i>
Lectures	No. given	No. attended	
Elementary Anatomy and Physiology			Total experiences received over the period:— From To
Personal and Communal Health			
Principles and Practice of Nursing			
Introduction to Microbiology			Total clinical experiences (in hours)
Emergency Care			
Introduction—Study of Human Behaviour			
Any Other(s)			

LEAVE TAKEN BY APPLICANT

Type of Leave	No. of Hours	Total
Sick		
Vacation		
Other Leave*		
*Do not include normal "Days off"		TOTAL=

I, Authority of the Approved School of Nursing named above, do hereby certify that this Applicant has been a Student Nurse of the school for the period commencing

.....
Day Month Year

and that the conduct and performance of the Applicant has been satisfactory. I therefore recommend the Applicant for admission to the Preliminary Examination.

Signature of Authority of School

Title

Date

[Regulation 31(2)(a)]

FORM 4

THE NURSING COUNCIL OF TRINIDAD AND TOBAGO

Fees Paid (Date)	Examination No. F/.....	Result
------------------------------	----------------------------	-----------------

FORM OF APPLICATION FOR ENTRY TO THE COUNCIL'S FINAL EXAMINATION IN GENERAL NURSING SECTION A

(To be completed in handwriting of Applicant)

HOSPITAL SCHOOL OF NURSING.....

I,.....
 (*Surname first: Block Letters. Place a comma after Surname. Followed by First Name; then Second name, etc. If married, use married name first, followed by maiden name, e.g. Smith nee Jones)

Student Nurse of the Hospital School of Nursing named above, hereby apply to be admitted to the Final Examination of the Council scheduled for.....19.....

I have paid the Fee of \$.....in the manner stipulated by the Council and have passed the Preliminary Examination of the Council as indicated, viz:—

Preliminary Examination.....
 (Month) (Year)

And I also Declare that the following particulars, under which I now place my signature are true and correct:—

- (1) Age.....Date of Birth..... Date of Marriage
- (2) Place of Birth..... Nationality.....
- (3) Private Address.....
-
- (4) Date of Entry to the Fundamental Programme.....
- (5) Date of successful completion of Fundamental Programme.....

.....
Signature of Applicant

Date

*NOTE: The names appearing at the top of this Application will be entered on the Council's Certificate of Registration when it is prepared for issue, spelled in the manner and in the form or order given by the Applicant.

Certificates incorrectly prepared through the fault of the Applicant may not be amended.

Names given, if different from those under which Applicant was registered as a Student with the Council must be supported by documentary evidence.

APPLICATION FOR ENTRY TO THE FINAL EXAMINATION IN GENERAL NURSING—CONTINUED

SECTION B

Practical Experience of Student Nurse, ^{Mr.} Miss
_{Mrs.}
 calculated in hours from to

464

Nurses and Midwives Registration Regulations, 1977

Ward Experiences	1st Year			2nd Year			3rd Year			4th Year			Totals
	Day	Evening	Night	Day	Evening	Night	Day	Evening	Night	Day	Evening	Night	
Medical, Male													
Medical, Female													
Surgical, Male													
Surgical, Female													
Paediatrics, Surgical													
Paediatrics, Medical													
Orthopaedics													
Gynaecological													
Communicable Diseases													
Eye													
Ear, Nose and Throat													
Outpatients' Department													
Nutrition													
Operating Theatre													
Casualty													
*Central Sterilizing Department													
Neuro-Surgical													
Obstetrics													
Psychiatric													
Community Health													

(* If applicable)

TOTAL WARD EXPERIENCE ...

SECTION B—Continued

Total Hours of Practical Ward Experience=

SCHOOL: 1st Year=_____hours }
 2nd Year=_____hours } Total Hours, School=
 3rd Year=_____hours }

.....
 Signature of Junior Matron compiling above data

Date

Leave taken by Student over the training period calculated in hours from.....to.....

Leave	1st Year		2nd Year		3rd Year		4th Year		Totals
	From.....	To	From.....	To	From.....	To	From.....	To	
Sick ...									
Vacation ...									
Other Leave*									
TOTAL LEAVE OF ALL TYPES ...									

*Do not include normal "Days Off"

Signature of person compiling Leave.....

Title.....

Nurses and Midwives Registration Regulations, 1977

APPLICATION FOR ENTRY TO THE FINAL EXAMINATION IN
GENERAL NURSING

SECTION C

(To be completed by Sister Tutor of the School)

RECORD OF THEORETICAL EXPERIENCES OF STUDENT NURSE:—

Mr.
Miss
Mrs.

Name of Lecture	No. given	No. attended
General and Special Measures and Procedures
Medical conditions, Diseases and their treatment, Nursing
Surgery and Surgical Nursing
Gynaecology and Gynaecological Nursing
Paediatrics and the Nursing of Sick Children
Materia Medica
Dietetics
Introduction to Physiotherapy
Introduction to Radiotherapy
Introduction to Psychotherapy
Occupational Therapy and Rehabilitation
Ear, Nose and Throat
Social Aspects of Diseases
Ophthalmology
Anaesthetics
Dermatology
Principles of Nursing
Practice of Nursing
Special Visits
Bandaging
Any Other

.....
Signature of Tutor

Date

**APPLICATION FOR ENTRY TO THE FINAL EXAMINATION IN
GENERAL NURSING—CONTINUED**

SECTION D

(To be completed by Matron of the Hospital School of Nursing)

I HEREBY DECLARE that the Student Nurse named above has been a Student of this Hospital School of Nursing for a period of.....calculated from the date of entry into the School to the date of my signing this Form of Application, and that the theoretical and practical experiences of this Student have been as indicated above. And I further declare that the conduct and application to duty of the Student over the training period are as follows:—

Nursing Skills and Performance

Professional adjustment and deportment

Theoretical Knowledge

Signature of Matron

Hospital School of Nursing

Date

[Regulation 31(2)(b)]

FORM 5

THE NURSING COUNCIL OF TRINIDAD AND TOBAGO

Fees Paid (Date)	Examination No. FM/.....	Result
------------------------------	-----------------------------	-----------------

FORM OF APPLICATION FOR ENTRY TO THE COUNCIL'S FINAL EXAMINATION IN PSYCHIATRIC NURSING

SECTION A

(To be completed in handwriting of Applicant)

HOSPITAL SCHOOL OF NURSING.....

I,.....
 (*Surname first: Block Letters. Place a comma after Surname. Followed by First Name; then Second Name, etc. If married, use married name First, followed by maiden name, e.g. Smith nee Jones)

Student Nurse of the Hospital School of Nursing named above, hereby apply to be admitted to the Final Examination of the Council scheduled for.....19.....

I have paid the Fee of \$.....in the manner stipulated by the Council and have passed the Preliminary Examination of the Council as indicated, viz:—

Preliminary Examination
 (Month) (Year)

And I also declare that the following particulars, under which I now place my signature are true and correct:—

- (1) Age.....Date of Birth..... Date of Marriage
- (2) Place of Birth..... Nationality.....
- (3) Private Address
- (4) Date of Entry to the Fundamental Programme
- (5) Date of successful completion of Fundamental Programme

.....
Signature of Applicant

Date

*NOTE: The names appearing at the top of this Application will be entered on the Council's Certificate of Registration when it is prepared for issue, spelled in the manner and in the form or order given by the Applicant.

Certificates incorrectly prepared through the fault of the Applicant may not be amended.

Names given, if different from those under which Applicant was registered as a Student with the Council must be supported by documentary evidence.

APPLICATION FOR ENTRY TO THE FINAL NURSING EXAMINATION IN PSYCHIATRIC NURSING—CONTINUED

SECTION B

PRACTICAL EXPERIENCE OF STUDENT NURSE ^{Mr.}Miss
^{Mrs.}.....

calculated in hours from to

Ward Experience	1st Year			2nd Year			3rd Year			4th Year			Totals
	Day	Evening	Night	Day	Evening	Night	Day	Evening	Night	Day	Evening	Night	
Tuberculosis, Male Ward													
Tuberculosis, Female Ward													
Admission Ward													
Geriatric Ward													
Acute Sick Ward													
Disturbed Patients Ward													
Epileptic Ward													
Convalescent Ward													
Special Treatment Ward													
Boys' Ward, Male Section													
Criminal Lunatic Ward													
Isolation Ward													
Female Villa Ward													
Occupational and Recreational Therapy													
Psychiatric Outpatients Clinic													
Any Other													
Total hours of Practical Ward Experience													

Nurses and Midwives Registration Regulations, 1977

SECTION B—Continued

Name of Student Nurse, Miss.....
 Mr.
 Mrs.

SCHOOL (in hours): 1st Year =

2nd Year =

3rd Year =

TOTAL HOURS, SCHOOL =

Date.....

.....
Signature of Junior Matron compiling above data

Leave taken by Student over the training period calculated in hours from..... to

Leave	1st Year	2nd Year	3rd Year	4th Year	Totals
	from to	from to	from to	from to	
Sick ...					
Vacation ...					
Other Leave*					

(*Do not include normal "Days Off")

Total Leave of all types

.....
Signature of person compiling Leave

Title.....

470 Nurses and Midwives Registration Regulations, 1977

APPLICATION—FINAL EXAMINATION IN PSYCHIATRIC NURSING—Contd.

SECTION C

(To be completed by Nursing Instructor)

THEORETICAL EXPERIENCES OF ^{Mr.} Mrs.
_{Miss}

Lectures	No. given	No. attended
Theory and Practice of Nursing
Psychiatric Nursing
Social aspects of Psychiatry
Legal and administrative aspects of Psychiatric Nursing
Psychology
Psychiatry
Psychiatric Medicine
Pharmacology
Physical Methods of Treatment
Psychological Methods of Treatment
Occupational Therapy
Recreational Therapy
Ward Management and Supervision

.....
Signature of Nursing Instructor

SECTION D

(To be completed by Matron or Chief Male Nurse)

I HEREBY DECLARE that the Applicant named above has pursued the stipulated Programme of training at this Hospital School of Nursing for persons seeking admission to the Register of Nurses for the mentally ill for a period of.....
 calculated from date of entry into the School to the date of my signing this Form of Application for entry to the qualifying Examinations and that the theoretical and practical experiences of this Applicant have been as indicated herein.

And I further declare that the conduct and application to duty of the Applicant over the training period are as follows:—

- Nursing Skills and Performance
- Professional Adjustment and Deportment
- Theoretical Knowledge

Date *Signature*

[Regulation 31(2)(c)]

FORM 6

Fees Paid	Examination No.	Result
-----------	-----------------	--------

THE NURSING COUNCIL OF TRINIDAD AND TOBAGO

APPLICATION FOR ENTRY TO THE FINAL EXAMINATION IN GENERAL NURSING

(from a person currently on the Council's Register as a Psychiatric Nurse

SECTION A

(To be completed in handwriting of Applicant)

Hospital School of Nursing.....

I,
[Surname First: Block Letters. If married, use married name first, followed by maiden name, e.g. Smith (nee Jones), followed by first name then second name, etc.]

having completed the prescribed programme of training and experience at the Hospital School of Nursing named above, hereby apply to be admitted to the Final Examination of the Council scheduled for.....19.....

I have paid the Fee of \$.....in the manner stipulated by the Council.

And I also declare that the following particulars, under which I now place my signature are true and correct:—

1. Age.....Date of Birth.....Date of Marriage.....
2. Place of Birth.....
3. Nationality
4. Admission to the Register of the Nursing Council of Trinidad and Tobago:—
 - (a) Number in the Part of the Register for Psychiatric Nurses
.....
 - (b) Number(s) in any other part(s) of the Register.....
5. Current registration :—
 - Psychiatric Nurse registration in full force and effect (tick off) Yes No
 - Registration(s) as mentioned in (b) above in full force and effect Yes No

6. Date of commencement of Programme of Training.....

Permanent Private Address.....

.....

.....
Signature of Applicant

Date

NOTE: The names appearing at the top of this Application will be entered on Council's Certificate of Registration when it is prepared for issue, spelled in the manner and in the form or order given by the Applicant. Certificates incorrectly prepared through the fault of the Applicant may not be replaced.

Names given, if different from those under which Applicant was registered in the Programme, must be supported by documentary evidence.

APPLICATION—FINAL EXAMINATION IN GENERAL NURSING—Contd.

SECTION B

PRACTICAL EXPERIENCE OF ^{Miss} Mrs.....
^{Mr.}

calculated in hours from.....to

Experiences	Programme of Preparation			Additional Experiences *			Total
	Day	Evening	Night	Day	Evening	Night	
Medical, Male
Medical, Female
Surgical, Male
Surgical, Female
Paediatrics, Surgical
Paediatrics, Medical
Orthopaedics
Gynaecological
Communicable Diseases
Eye
Ear, Nose, Throat
Out-patients' Department
Nutrition
Operating Theatre
Casualty
Central Sterilization
Neuro-Surgical
Obstetrics
Psychiatric
Community Health
Total Hours of Practical Experience.....							
Total Hours of School.....							

*NOTE: These three columns marked "Additional Experiences" are to be completed only for persons re-sitting the Examination.
 They should reflect additional experiences since last transcript was compiled for entry to the Examinations,

Leave taken over the training period (in hours):—

Sick

Vacation

Other Leave*

(*Do not include "Days off")

THE LAW COMMISSION

APPLICATION—FINAL EXAMINATION IN GENERAL NURSING—Continued

SECTION C

(To be Completed by Nursing Instructor)

THEORETICAL EXPERIENCES OF ^{Miss} Mrs.
^{Mr.}

Lectures	No. Given	No. Attended
General and Special Measures and Procedures
Medical conditions, Diseases and their treatment, Nursing
Surgery and Surgical Nursing
Obstetrics, Gynaecology and Gynaecological Nursing
Paediatrics and the Nursing of Sick Children
Pharmacology
Nutrition
Introduction to Physiotherapy
Introduction to Radiotherapy
Introduction to Psychiatric Nursing
Occupational Therapy and Rehabilitation
Ear, Nose and Throat
Social Aspects of Diseases
Ophthalmology
Anaesthetics
Dermatology
Principles of Nursing
Practice of Nursing
Bandaging
Community Health
Special Visits
Any Other

Date

.....
Signature of Nursing Instructor

SECTION D

(To be completed by Matron of Hospital School of Nursing)

I HEREBY DECLARE that the Applicant named above has pursued the stipulated Programme of training at this Hospital School of Nursing for persons seeking admission to the Register of General Nurses for a period of.....calculated from date of entry into the School to the date of my signing this Form of Application for entry to the qualifying Examinations and that the theoretical and practical experiences of this Applicant have been as indicated herein.

And I further Declare that the conduct and application to duty of the Applicant over the training period are as follows:—

Nursing Skills and Performance.....

Professional Adjustment and Deportment.....

Theoretical Knowledge

Signature

Title

Date

[Regulation 31(2)(d)]

FORM 7

Fees Paid	Examination No.	Result
-----------	-----------------	--------

THE NURSING COUNCIL OF TRINIDAD AND TOBAGO

APPLICATION FOR ENTRY TO THE FINAL EXAMINATION IN
PSYCHIATRIC NURSING

(from a person currently on the Council's Register as a General Nurse)

SECTION A

(To be completed in handwriting of Applicant)

Hospital School of Nursing.....

I,.....
[Surname First: Block Letters. If married, use married name first, followed by maiden name, e.g. Smith (nee Jones), Followed by first name, then second name, etc.]

having completed the prescribed programme of training and experience at the Hospital School of Nursing named above, hereby apply to be admitted to the Final Examinations of the Council scheduled for.....19.....

I have paid the Fee of \$.....in the manner stipulated by the Council.

And I also declare that the following particulars, under which I now place my signature are true and correct:—

1. Age.....Date of Birth.....Date of Marriage.....
2. Place of Birth.....
3. Nationality
4. Admission to the Register of the Nursing Council of Trinidad and Tobago:—
 - (a) Number in the Part of the Register for General Nurses.....
 - (b) Number(s) in any other Part(s) of the Register.....
5. Current registration:—

General Nurse registration in full force and effect (tick off) Yes No

Registration(s) as mentioned in (b) above in full force and effect Yes No

6. Date of commencement of Programme of Training.....

Permanent Private Address.....

.....

.....

.....
Signature of Applicant

Date

NOTE: The names appearing at the top of this Application will be entered on Council's Certificate of Registration when it is prepared for issue, spelled in the manner and in the form or order given by the Applicant. Certificates incorrectly prepared through the fault of the Applicant may not be replaced.

Names given, if different from those under which Applicant was registered in the Programme, must be supported by documentary evidence.

/1973

APPLICATION—FINAL EXAMINATION IN PSYCHIATRIC NURSING—Continued

SECTION B

PRACTICAL EXPERIENCE OF Mr. _____
 Mrs. _____
 Miss _____

calculated in hours from _____ to _____

Ward Experience	Programme of Preparation			Additional Experiences*			Total	
	Day	Evening	Night	Day	Evening	Night		
Admission ...								
Convalescent (short-stay)								
Convalescent (long-stay) including epileptics								
Psycho-geriatrics								
Children { Girls								
{ Boys								
Psychiatric Unit								
Occupational Therapy								
Recreational Therapy								
Psychiatric Out-Patients Clinic								
Psychiatric Social Work Department ...								
Community Health								
Court Orders (Criminal Lunatics) ...								
Total Hours of Practical Experience							=	
Total Hours of School ...							=	

Leave taken over the training period (in hours):—

Sick }
 Vacation } Total =
 Other Leave* }

*Do not include "Days off".

NOTE: These three columns marked "Additional Experiences" are to be completed only for persons re-sitting the Examination. They should reflect additional experiences since last transcript was compiled.

APPLICATION—FINAL EXAMINATION IN PSYCHIATRIC NURSING—
Continued

SECTION C

(To be completed by Nursing Instructor)

THEORETICAL EXPERIENCES OF ^{Mr.} Mrs. Miss

Lectures	No. given	No. attended
Theory and Practice of Nursing		
Psychiatric Nursing		
Social aspects of Psychiatry		
Legal and administrative aspects of Psychiatric Nursing		
Psychology		
Psychiatry		
Psychiatric Medicine		
Pharmacology		
Physical Methods of Treatment		
Psychological Methods of Treatment		
Occupational Therapy		
Recreational Therapy		
Ward Management and Supervision		

.....
Signature of Nursing Instructor

SECTION D

(To be completed by Matron or Chief Male Nurse)

I HEREBY DECLARE that the Applicant named above has pursued the stipulated Programme of training at this Hospital School of Nursing for persons seeking admission to the Register of Nurses for the Mentally Ill for a period of.....calculated from date of entry into the School to the date of my signing this Form of Application for entry to the qualifying Examinations and that the theoretical and practical experiences of this Applicant have been as indicated herein.

And I further declare that the conduct and application to duty of the Applicant over the training period are as follows:—

Nursing Skills and Performance.....

Professional Adjustment and Deportment.....

Theoretical Knowledge

.....
Signature

Date

[Regulation 57(2)(a)]

FORM 8

THE NURSING COUNCIL OF TRINIDAD AND TOBAGO

(Nurses and Midwives Registration Ordinance, 1960)

FORM OF APPLICATION FOR ADMISSION TO THE COUNCIL'S MIDWIFERY EXAMINATIONS

(on completion of a 1-Year programme of training in the School)

Name of Applicant's Hospital School of Midwifery.....

I,..... *MARRIED SINGLE WIDOW
(*Delete where inapplicable). [Surname first in Block letters followed by a comma; followed by other name(s). If married, place married name first followed by maiden name after word "nee", e.g. Smith (nee Jones)]

hereby apply to be admitted to the Midwifery Examinations to be held in the month of19.....I have paid the Fee of \$.....in the manner stipulated by Council and declare the following particulars to be true and correct:—

Date of registration as a Nurse } General Nurse
in Trinidad and Tobago } Psychiatric Nurse

Nurse Registration Number in } R.N.
Trinidad and Tobago } R.M.N.

Age.....Date of Birth.....Date of Marriage.....

Nationality.....Trinidad National Registration Number.....

Name of Hospital School of:—

(a) General Nursing

(b) Psychiatric Nursing

And I also declare that my registration as a Nurse in Trinidad and Tobago is in full force and effect to the year ending December,

Permanent Private Address.....

Signature of Applicant

Date

(Section to be completed by Junior Matron and countersigned by Senior Matron)

I HEREBY DECLARE that this Applicant is a Nurse registered in Trinidad and Tobago and has been a pupil of the Midwifery School of this Hospital from.....to.....

Her conduct has been at all times such as to render her a fit and proper person to be admitted to the Examination leading to her registration and licensing as a Midwife in Trinidad and Tobago. *There has been no break in training. (*Delete if inapplicable.)

(If applicable, complete the following):—

There has been a break in training from.....to.....

due to

.....

she previously sat the Council's Midwifery Examinations of.....

and of.....

Signature.....
Junior Matron

Signature.....
Senior Matron

APPLICATION FOR ENTRY TO THE MIDWIFERY EXAMINATIONS
(to be used for all applicants)

(This section is to be filled by the Midwifery Tutor)

LECTURES ATTENDED

I declare that
(Name of Applicant)

has completed the following course of training:—

Subject	Hours of Lectures	
	Doctor's	Tutor's
Anatomy and Physiology of the Pelvis and its Organs
The Foetus
Normal Pregnancy
Antenatal Care
Normal Labour
Normal Puerperium
Diseases of Pregnancy
Diseases associated with Pregnancy
Abnormal Labour
Abnormal Puerperium
Paediatric Lectures—Newborn infant, Premature infant
Obstetric Emergencies
Obstetric Operations and Instruments
Anaesthesia and Analgesia
Vital Statistics
Public Health and Social Services
Venereal Diseases
Mothercraft
Laws relating to the practice of Midwifery
Others
TOTAL

*Preliminary Training School Experience Sheet attached.

Signed..... Lecturer Signed..... Midwifery Tutor

(*Cross out if not applicable) Date.....

Mrs.
PRACTICAL EXPERIENCE OF APPLICANT Miss.....

(Note: This Section is to be completed by the Midwifery Tutor and Junior Matron)

Wards	Days	Hours	Deliveries Witnessed	No.
*Gynaecological: Pure	Forceps	.....
Abortions	Vacuum	.....
			Caesarean Sections	.....
*Paediatric: Medical		
Surgical		
Infectious		
			Deliveries Performed	No.
Antenatal	Home	.....
Labour	Hospital	.....
Lying-in	B.B.A.	.....
Nursery: General	Vaginal Examinations	.....
Premature	Palpations	.....
Isolation		
<i>Clinics</i>			RECORD OF LEAVE	
Antenatal	Type of Leave	Days
Post-natal		Hours
Family Planning	Vacation	.....
Child Welfare	Sick	.....
Venereal Diseases	Pregnancy	.....
District Puerperium	Public Holidays	.....
Milk Kitchen	Not on Duty	.....
Obstetric Theatre	TOTAL LEAVE	.....
TOTAL		

(*To be completed for applicants who are not Registered General Nurses)

Signed.....
 Title.....
 Date.....

Date
Signature of Junior Matron

[Regulation 57(2)(b)]

FORM 9

THE NURSING COUNCIL OF TRINIDAD AND TOBAGO
(Nurses and Midwives Registration Ordinance, 1960)

FORM OF APPLICATION FOR ADMISSION TO THE COUNCIL'S
MIDWIFERY EXAMINATIONS

(on completion of a 2-Year programme of training in the School)

Name of Applicant's Hospital School of Midwifery.....

I,.....
*MARRIED
SINGLE
WIDOW

**Delete where inapplicable. Surname first in Block Letters followed by a comma, followed by other name(s). If married, place married name first followed by maiden name after word "nee" e.g. Smith (nee Jones)*

hereby apply to be admitted to the Midwifery Examinations to be held in the month of
.....19..... I have paid the Fee of \$.....

in the manner stipulated by Council and declare the following particulars to be true and correct, viz:—

Age.....Date of Birth.....Date of Marriage.....

Nationality Trinidad National Registration Number.....

Date of entry to Hospital School of Midwifery.....

Private Permanent Address

Date Signature

Section to be completed by Junior Matron and countersigned by Senior Matron

I HEREBY DECLARE that the Applicant named above who is not a Registered Nurse has gained.....weeks' experience on the General Wards of this Hospital and has been a Pupil on the Obstetric Unit from.....to.....

I further declare that her conduct has been at all times such as to render her a fit person to be admitted to the Examinations leading to her registration and licensing as a Midwife in Trinidad and Tobago.

There has been a break in training from.....to.....

She previously sat the Midwifery Examinations of—
.....and of

Signed..... Signed.....
(Junior Matron) (Senior Matron)

Date

APPLICATION FOR ENTRY TO THE MIDWIFERY EXAMINATIONS

(to be used for all applicants)

(This section is to be filled by the Midwifery Tutor)

LECTURES ATTENDED

I declare that
 (Name of Applicant)

has completed the following course of training:—

Subject	Hours of Lectures	
	Doctor's	Tutor's
Anatomy and physiology of the Pelvis and its Organs		
The Foetus		
Normal Pregnancy		
Antenatal Care		
Normal Labour		
Normal Puerperium		
Diseases of Pregnancy		
Diseases associated with Pregnancy		
Abnormal Labour		
Abnormal Puerperium		
Paediatric Lectures—Newborn infant, Premature infant		
Obstetric Emergencies		
Obstetric Operations and Instruments		
Anaesthesia and Analgesia		
Vital Statistics		
Public Health and Social Services		
Venereal Diseases		
Mothercraft		
Laws relating to the practice of Midwifery		
Others		
TOTAL		

*Preliminary Training School experience sheet attached.

Signed.....
Lecturer

Signed.....
Midwifery Tutor

Date

(*Cross out if not applicable)

PRACTICAL EXPERIENCE OF APPLICANT Mrs.....
Miss

(Note: This Section is to be completed by the Midwifery Tutor and Junior Matron)

Wards	Days	Hours	Deliveries Witnessed	Number
*Gynaecological: Pure			Forceps	
Abortions			Vacuum	
			Caesarean Sections	
*Paediatric: Medical				
Surgical				
Infectious				
			Deliveries Performed	Number
Antenatal			Home	
Labour			Hospital	
Lying-in			B.B.A.	
Nursery: General			Vaginal Examinations	
Premature			Palpations	
Isolation				
<i>Clinics</i>				
Antenatal				
Post-natal				
Family Planning				
Child Welfare				
Venereal Diseases				
District Puerperium				
Milk Kitchen				
Obstetric Theatre				
TOTAL				
			Record of Leave	
			Type of Leave	Days
				Hours
			Vacation	
			Sick	
			Pregnancy	
			Public Holidays	
			Not on Duty	
			TOTAL LEAVE	

(*To be completed for applicants who are not Registered General Nurses)

Signed.....

Title.....

Date.....

Date

Signature of Junior Matron

FORM 10

[Regulation 74(1)]

THE NURSING COUNCIL OF TRINIDAD AND TOBAGO
(Nurses and Midwives Registration Ordinance, 1960, Part IV)

FORM OF APPLICATION FOR ENTRY TO COUNCIL'S
WRITTEN ASSESSMENT TEST

(of persons listed as a Trainee in an Approved Training Centre)

Name of Training Centre.....

I,.....
[Insert Surname first: If married, place married name, then maiden name after the word "nee", e.g. Smith (nee Jones). Then insert other name(s)].

hereby make application for entry to Council's Written Assessment Test scheduled for19.....

I have paid the Fee of \$.....in the manner stipulated by the Council and declare that the particulars under which I now place my signature are correct.

Age.....Date of Birth.....Nationality.....

Date of commencement of training.....

Permanent Private Address

.....

Date *Signature of Applicant*

(To be completed by Authority of the Training Centre)

The theoretical and practical experience of the Trainee named above is as follows:—

EXPERIENCE (in Hours)		
Practical	Theoretical	Total

And I hereby declare that his/her conduct has/has not been at all times such as to make him/her a fit person to be admitted to the Written Assessment Test leading to enrolment as a Nursing Assistant.

There has been a break in his/her training from.....to.....
due to

Signature

Title

Date

[Regulation 74(5)]

FORM 11

THE NURSING COUNCIL OF TRINIDAD AND TOBAGO
(Nurses and Midwives Registration Ordinance, 1960)

Form of Application for Entry to Council's Practical Assessment Test

Name of Training Centre.....

I,.....
[Insert Surname first: if married, place married name, then maiden name after the word "nee", e.g. Smith (nee Jones). Then insert other name(s)]

hereby make application for entry to Council's Practical Assessment Test scheduled for19.....

I have paid the Fee of \$.....in the manner stipulated by the Council and declare that I have passed the Written Assessment Test of.....

.....
Signature of Applicant

Date

To be completed by authority of the Training Centre

I hereby declare that the Applicant named above has completed not less than twelve (12) months theoretical and practical experience in this Training Centre and that he/she has acquired the level of attainment as outlined below over the period:—

- From.....to
- Practical Nursing Skills and Performance.....
- Professional adjustment and deportment.....
- Theoretical knowledge
- Confidential assessment of applicant

And I also declare that his/her conduct has/has not been at all times such as to make him/her a fit person to be admitted to the Practical Assessment Test leading to enrolment as a Nursing Assistant after successful completion of the twelve (12) months compulsory practical programme.

There has been a break in his/her training from.....to.....
due to

Signature

Title

Date

THE NURSING COUNCIL OF TRINIDAD AND TOBAGO

(TRAINEE FORM No. 6)

TRANSCRIPT OF TRAINING AND EXPERIENCE OF—

.....
(Name of Applicant)

in training at the Centre over the period—
from.....to

Theory during course	Hours	Practical Experience during course	Hours
1. Fundamentals of Nursing including:—		Assisting in the care and rehabilitation of:—	
(a) Admission of patients—hospital regulations and routine treatment	Patients on Medical Wards	.....
(b) (i) personal hygiene—care of hands, head, feet, toes	Patients on Surgical Wards	.....
(ii) Bathing—bed, bath-room, special	Patients on Obstetric Wards	.....
(c) Nursing Procedures:—		Newborn patients	.....
(i) Taking—temperature, pulse, respiration	Patients on Paediatric Wards	.....
(ii) specimen collection	Convalescents, the Aged	.....
(iii) observation	Patients on Psychiatric Wards	.....
(iv) recording	Experience in—	
(v) reporting	Out-patients' Department	.....
(vi) preparation of patient for examination	Emergency Care	.....
(vii) preparation and use of equipment	Food Service Department	.....
(viii) enemas	Any Other (specify area)	.....
(ix) administration of medicines
(x) suppositories
(xi) pre- and post operative care
(xii) last offices
2. Anatomy and Physiology as applied to Nursing and Medical treatment	TOTAL HOURS	.....
3. Emergency measures application to—		I HEREBY CERTIFY that the Trainee named above has completed the Experience as set out on this Transcript.	
(a) Haemorrhages	
(b) Shock	Signature of Authority of Centre	
(c) Fractures	
(d) Sprains and Strains	Official Title	
(e) Unconsciousness	
4. Food and Food Service:—		
(a) adults	Date	
(b) children	
(c) helpless and special	
Preparation of artificial feeds	
5. Ward hygiene—cleaning and dusting	
TOTAL HOURS	

SECOND SCHEDULE

I EXAMINATION FEES

	\$ c.
On application for entry to the Aptitude Test	15 00
On application for entry to the Assessment Examination	15 00
On application to re-sit part of the Assessment examination	5 00
On application for entry to the written Preliminary Examinations	25 00
On application for entry to the practical Preliminary Examinations	25 00
On application to re-sit an area of the written or practical Preliminary Examinations	10 00
On application to enter the practical Final Examinations	40 00
On application to re-sit an area of the practical Final Examinations	10 00
On application to enter the written Final Examinations	35 00
On application to re-sit the written Final Examinations	35 00
On application to enter the Midwifery Examinations	50 00
On application to enter the Trainee Written Assessment	25 00
On application to enter the Trainee Practical Assessment	25 00

II REGISTRATION IN TRAINING PROGRAMMES

On application for registration as a Student Nurse	10 00
On application for registration as a post-basic Student Nurse	20 00
On application for registration as a Pupil-Midwife	20 00
On application for listing as a Trainee	10 00

III FEES OF ADMISSION TO REGISTER AND ROLL

On application for admission to the Register—	
Under the provisions of sections 16(2), 21(2) of the Ordinance	40 00
Under the provisions of sections 16(3), (4), (5), (6) and 21(3) of the Ordinance	50 00
On application for admission to the Roll—	
Of a person trained in Trinidad and Tobago	40 00
Of a person trained outside Trinidad and Tobago	50 00

IV ANNUAL REGISTRATION AND ENROLMENT FEES

In respect of a certificate as a General Nurse	10 00
In respect of a certificate as a Psychiatric Nurse	10 00
In respect of a licence as a Midwife	10 00
In respect of a certificate as a Nursing Assistant	10 00

V FINES

	\$ c.
For failure to pay the annual registration fee, for each year of lapse or part thereof	20 00
For failure to pay the annual enrolment fee, for each year of lapse or part thereof	20 00

VI SERVICES

Use of Seal	15 00
On application for changes on the Register or Roll	10 00
On application for issue of fresh certificate of registration, of enrolment or of passing the aptitude test	10 00
On application for issue of transcript with Seal	25 00

THIRD SCHEDULE

[Regulation 8(2)(b)]

FORM 1

THE NURSING COUNCIL OF TRINIDAD AND TOBAGO

Aptitude Test for prospective Student Nurses and Pupil-Midwives
CERTIFICATE AS TO CHARACTER

APPLICATION FORM NO.....

THIS IS TO CERTIFY THAT I have known.....
of.....
who is applying to enter the Aptitude Test for prospective Student Nurses and Pupil-
midwives personally, for a period of
and that he/she is of good character.

Further remarks
.....
.....
.....
.....
.....
.....
.....
.....

Name of person testifying.....
(In Block Letters)

Occupation of person testifying.....

Address of person testifying.....
.....
.....

Date

.....
Signature of person testifying

- NOTE: This Form should be completed by one of the following:—
- (i) The Principal or Vice-Principal of Applicant's School;
 - (ii) The religious leader of Applicant, e.g., Priest, etc.
 - (iii) A member of the Trinidad and Tobago Police Service to whom Applicant is *well known*.

[Regulation 40(2)(b)]

FORM 2

THE NURSING COUNCIL OF TRINIDAD AND TOBAGO
(Nurses and Midwives Registration Ordinance, 1960)

Reference No:—
AR/

CERTIFICATE AS TO CHARACTER

(Confidential)

To: The Secretary,
The Nursing Council of Trinidad and Tobago

I CERTIFY that I have known.....
of
who is applying for Registration as a Nurse, personally, for
(period of acquaintance)
and that he/she is of good character.

Further remarks
.....
.....

Alternatively—If applicant is not personally known to testifying authority, complete the following:—

I CERTIFY that.....
of
who is applying for Registration as a Nurse was attached to this institution as a
.....over the period.....
and that the records show that he/she

.....
.....
.....

(1) Name of person testifying.....
(In Block Letters)

(2) Address of person testifying.....
.....
.....

(3) Occupation/official title of person
testifying

(4) Signature of person testifying

NOTE: This Certificate must on completion be returned directly to—
The Secretary, The Nursing Council of Trinidad and Tobago, 89, Frederick
Street, Port-of-Spain, Trinidad, Trinidad and Tobago, West Indies.

[Regulation 40(4)(b)]

FORM 3

THE NURSING COUNCIL OF TRINIDAD AND TOBAGO
CERTIFICATE AS TO CHARACTER

Ref. No. : AR/

(Confidential)

To: The Secretary,
The Nursing Council of Trinidad and Tobago

I certify that I have known.....
 of.....who is
 applying for Registration as a Psychiatric Nurse, personally for.....
and that he/she is of good character.
 (State period of acquaintance)

Further remarks.....

1. Name of person testifying.....
(In Block Letters)
2. Address of person testifying.....
3. Occupation of person testifying.....
4. Date.....
5. Signature of person testifying.....

NOTE: This Certificate must be returned *Directly* to
 The Secretary,
 The Nursing Council of Trinidad and Tobago,
 89, Frederick Street, Port-of-Spain,
 Trinidad and Tobago, W.I.

[Regulation 64(2)(b)]

FORM 4

THE NURSING COUNCIL OF TRINIDAD AND TOBAGO
(Nurses and Midwives Registration Ordinance, 1960)

Reference No:
AR/.....

CERTIFICATE AS TO CHARACTER

(Confidential)

To: The Secretary,
The Nursing Council of Trinidad and Tobago

I CERTIFY THAT I have known
of
who is applying for Registration and Licensing as a Midwife, personally, for.....
.....and that she is of good character.
(period of acquaintance)

Further remarks
.....
.....

Alternatively—If applicant is not personally known to testifying authority, complete the following:—

I CERTIFY THAT.....
of
who is applying for Registration and Licensing as a Midwife was attached to
this institution as a.....over the period
.....to.....and that the records show that she

- (1) Name of person testifying.....
(in block letters)
- (2) Address of person testifying.....
.....
.....
- (3) Occupation/official title of
person testifying
- (4) Signature of person testifying.....

NOTE: This Certificate must on completion be returned Directly to—The Secretary,
The Nursing Council of Trinidad and Tobago, 89, Frederick Street, Port-of-Spain, Trinidad,
Trinidad and Tobago, West Indies.

FORM 5

THE NURSING COUNCIL OF TRINIDAD AND TOBAGO
(Nurses and Midwives Registration Ordinance, 1960—Part IV)

CERTIFICATE AS TO CHARACTER OF APPLICANT

(For persons selected to undergo Nursing Assistant Training
in Approved Training Centres)

(Confidential)

THIS IS TO CERTIFY THAT I have known.....
of
(Address)

who anticipates entry to Council's Nursing Assistant programme at an Approved Training
Centre, and that I have been acquainted with her/him for a period of.....

I now state what I know of her/him as follows:—

- Living habits
- Education
- Health
- Interpersonal Relationships
- Any Others
-
-

Name of person testifying*.....
(In Block Letters)

Occupation of person testifying.....

Address of person testifying.....
.....

Date
Signature of person testifying

*NOTE: This Form when completed is to be returned Directly by the person completing to the Secretary, The Nursing Council of Trinidad and Tobago, 89, Frederick Street, Port-of-Spain.

This Form is to be completed by any one of the following:—

- A Registered Medical Practitioner; or
- A Registered Nurse; or
- A Principal of Applicant's School; or
- Applicant's Parish Priest.

FORM 6

[Regulation 69(3)]

THE NURSING COUNCIL OF TRINIDAD AND TOBAGO
(Nurses and Midwives Registration Ordinance, 1960, Part IV)

CERTIFICATE OF COMMENCEMENT OF NURSING ASSISTANT COURSE

I, Authority of

.....
(Name of Approved Training Centre)

do HEREBY CERTIFY that the person named on this Certificate commenced the Council's NURSING ASSISTANT Course on the date indicated and I have had evidence that she/he has made application in the prescribed manner for listing with the Council as a Trainee of this Centre.

.....
Full name of Trainee (Surname first in Block Letters. If married, place married name first followed by maiden name after word "nee")

Date of Commencement of training.....

Signature

Title

Date

FOURTH SCHEDULE

[Regulation 10(1)]

Qualified by Letter of Exemption, No.....of

Qualified byRevised Test—Year.....

FORM I

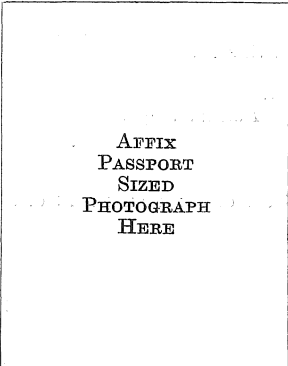
THE NURSING COUNCIL OF TRINIDAD AND TOBAGO

APPLICATION FOR REGISTRATION AS A STUDENT NURSE

(To be completed in Handwriting of Applicant)

A: I, Surname (In Block Letters: if married, write Married Name First: then write Maiden Name after word "nee".)

(Other Name(s) 1st 2nd 3rd



now in training at the Hospital School of Nursing do hereby apply for registration with the Council as a Student Nurse, and I declare that all the particulars I insert below are true and correct:—

State whether Married, Single or Widow.....

Date of Birth.....

Nationality.....

Tick off the qualification whereby you secured entry to training, viz:—

- Received Council's Education Test Certificate [] Received Council's Letter of Exemption [] Received Council's permission to continue training commenced overseas/elsewhere []

If you had on a previous occasion commenced training, state:—

- (a) Name of the Hospital School of Nursing..... (b) Date of entry to the School referred to in (a) above..... (c) Date of termination of such training.....

Name the Programme of Training for which you are now making application for registration:

Signature of Applicant.....

Full Permanent Postal Address.....

B: (To be completed by the Authority of the Hospital School of Nursing)

I HEREBY CERTIFY that the Applicant named above was admitted to this Hospital School of Nursing on the.....day of.....19.....

And having been considered a suitable candidate for training, I now make application for her/him to be placed on the List of Student Nurses maintained by the Nursing Council of Trinidad and Tobago and remit herewith the Fees prescribed for Student Nurse registration.

Signature.....

Official Title

(For Office Use only)

Receipt for Fees paid..... Registered Student Number

Date of submission of Application.....

Any Change of Name subsequent to becoming qualified for selection as a Student Nurse:—

.....

.....
Secretary of Council

Date.....

FORM 2

[Regulation 21(1)]

Registration Fee Receipt

Registered Student

No.....

No.....

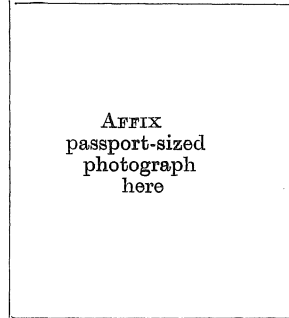
THE NURSING COUNCIL OF TRINIDAD AND TOBAGO
(Nurses and Midwives Registration Ordinance, 1960)

APPLICATION FOR REGISTRATION AS A STUDENT OF A POST-BASIC PROGRAMME

at theHospital School of Nursing

A. [To be completed in handwriting of Applicant]

- 1. Surname*.....
(In Block Letters: If married, insert Married Name first, then write Maiden Name after the word "nee".)
- 2. Other Name(s).....
- 3. State whether Married, Single, Widow(ed).....
- 4. Date of Birth.....Nationality.....
- 5. Tick off the qualification whereby you secured entry to the Programme:—
Registered General Nurse
Registered Psychiatric Nurse
- 6. Date of registration as a Nurse in Trinidad and Tobago.....
- 7. Number of Trinidad and Tobago Certificate of Registration.....
- 8. State the Programme for which you are making application:—
.....



I DECLARE that all the Particulars I have entered above are true and correct and that my registration as a Nurse in Trinidad and Tobago is in full force and effect

Signature.....

Full Permanent Postal Address

*(NOTE:—If the name under which application is being made is different from that under which Nurse registration was effected, documentary evidence of such change must be submitted, e.g., Certificate of Marriage, etc.)

B. (To be completed by the Authority of the Service area in which applicant is employed)

I HEREBY CERTIFY that the Applicant named above was admitted to.....

.....on.....
(Name department of Service) (Date of Appointment)

and having been considered a suitable candidate for further training, I now endorse her/his application for registration in the Programme as stated.

Signature.....

Official Title.....

C. (To be completed by the Authority of the Hospital School in which Programme is pursued)

I HEREBY CERTIFY that the Applicant named above was admitted to the.....
.....Hospital School of Nursing on the
.....day of.....19.....
and on his/her behalf, I now make application for admission to the Council's Register of
Students for the purpose of the Programme specified and remit herewith Fees of Student
registration.

Signature.....

Official Title.....

Date.....

(Regulation 40(2)(b))

FORM 4

THE NURSING COUNCIL OF TRINIDAD AND TOBAGO
(Nurses and Midwives Registration Ordinance, 1960)

AR/

Fees
Paid \$.....
Date

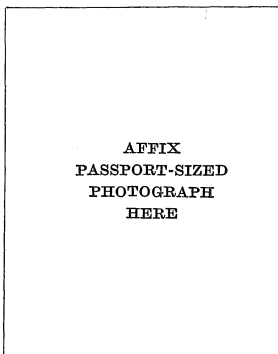
FORM OF APPLICATION FOR ADMISSION TO THE REGISTER
OF GENERAL NURSES
(from Applicants trained Overseas)

I HEREBY request The Nursing Council of Trinidad and Tobago to grant me the necessary Certificate of Registration in evidence of my name having been placed on the Register of GENERAL NURSES maintained by the Council.

I promise in the event of my being so registered and in consideration thereof, to be bound by, and to conform in all respects to the Rules and Regulations for the time being in force.

I now submit documents attesting to my identity and qualifications and the Fee as prescribed by the Council.

And I declare that the particulars hereunder to which I affix my signature are true and correct:—



A. Particulars of Identity

Full Name (Surname first).....
Block Letters

.....

If married, Maiden Name.....

Date of Birth

Date of Marriage

Place of Birth

Nationality

Full Postal Permanent Address

.....

B. Professional qualifications:

Name and Address of Training Institution:—

.....

.....

Period of Training:— From.....To.....

Name and Address of Nurse registering body in State/Province where above training was undergone:—

.....

.....

Date of Nurse registration by above body:.....

Number of Certificate of Registration:—.....

Certificate of Registration in force
(tick off) YES *NO
(*State reason fully at back of this Form)

Professional qualifications (other than General Nurse):

.....Date:
.....Date:
.....Date:

C. Basic Education:

Category of basic Education (tick off):
Primary Secondary University

Educational Certificates/Diplomas/Degree, etc. gained:—

.....
.....
.....

Have you taken the Council's Aptitude Test (tick off)?
YES NO

D. General experiences:

Outline, giving dates, General Nurse experiences received within the last TWO (2) years:

.....
.....
.....
.....
Any Other
.....

Explain—cancellation of Certificate of Registration, Certification by waiver, etc.

Signature of Applicant
Date.....

For Use of Office only

Original documents returned to Applicant on
viz.
.....
.....

Signature of Applicant.....

FORM 5

(Regulation 40(4)(a))

Fee Rec. No:.....

THE NURSING COUNCIL OF TRINIDAD AND TOBAGO
[Nurses and Midwives Registration Ordinance, 1960 (Sec. 16(2))]

Application for the grant of a Certificate of Registration as a Psychiatric Nurse to a person passing the Council's qualifying Examinations.

The Secretary,
The Nursing Council of Trinidad and Tobago

- (1) Surname (Block Letters).....
(2) Other Name(s)
(3) State whether single, married or widow.....
(4) If married, state maiden name.....
(5) Full postal permanent address.....

I HEREBY request the Nursing Council of Trinidad and Tobago to grant me the necessary Certificate of Registration stating that my name has been placed on the Register of Psychiatric Nurses (R.M.N) maintained by the Council. I promise in the event of my being so registered and in consideration thereof, to be bound by, and to conform in all respects to the Rules and Regulations for the time being in force.

I HEREBY declare that I am over the age of 21, that I:
(tick off where applicable)

- (a) have presented Certificate of Birth with application for entry to qualifying Examination
(b) have presented Certificate of Marriage with application for entry to qualifying Examination
OR
(c) having changed my name due to marriage subsequent to passing Council's qualifying Examination, I now present Certificate of Marriage in support of same
OR
(d) having omitted to enter all my names on the application for entry to the qualifying Examination, I now present document(s) in support of Additional names

and now enclose the Fee prescribed by the Council for admission to its Register.

Date of Application,..... Signature of Applicant

(To be completed by the Authority of the Approved School of Training)

I **HEREBY** certify that the Applicant named above has successfully completed the prescribed course of training at the St. Ann's Hospital School of Nursing and is thus entitled to be admitted to the Register maintained by the Council and I further declare that he/she is a fit and proper person to assume the responsibilities of a Registered Psychiatric Nurse.

.....
Signature

.....
Official Title

FORM 6

(Regulation 40(4)(b))

AR/.....

Fees:—
Rec. No.....
Date.....

THE NURSING COUNCIL OF TRINIDAD AND TOBAGO
(Nurses and Midwives Registration Ordinance, 1960)

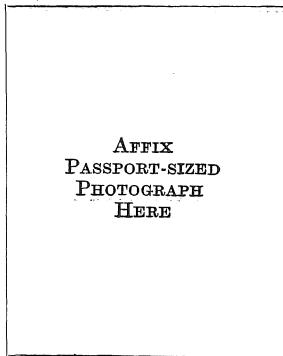
FORM OF APPLICATION FOR ADMISSION TO THE REGISTER OF
PSYCHIATRIC NURSES
(for Applicants trained Overseas)

I HEREBY request The Nursing Council of Trinidad and Tobago to grant me the necessary Certificate of Registration in evidence of my name having been placed on the Register of Psychiatric Nurses maintained by the Council:

I Promise in the event of my being so registered and in consideration thereof, to be bound by and to conform in all respects to the Rules and Regulations for the time being in force:

I now submit documents attesting to my identity and qualifications and the Fee as prescribed by the Council:

And I declare that the particulars hereunder to which I affix my signature are true and correct:—



A: Particulars of Identity:

(Full Names) Surname (Block Letters):

1st Name.....2nd Name.....

3rd Name.....4th Name.....

If Married, Maiden Name:.....

Date of Birth.....Date of Marriage.....

Place of Birth.....

Nationality.....

Full Postal Permanent Address:.....

.....

B: Professional qualifications:

Name and Address of Institution of Training:

.....
.....

Period of Training:

From.....To.....

Name and Address of Registering body in State/Province where above training was undergone:—

.....
.....

Date of registration by the above body.....

Number of Certificate of Registration.....

Is the above Certificate of Registration in force? (tick off)
Yes *No

*State reason fully below:

.....
.....
.....
.....
.....

Professional qualifications (other than Psychiatric Nurse)—

Qualification

Date obtained

.....
.....
.....
.....

C. Basic Education

Primary From.....To.....

Certificate gained.....

Secondary From.....To.....

*Certificate/Diploma gained.....

University From.....To.....

Degree/Diploma gained

Have you taken the Aptitude Test for Prospective Student Nurses of this Council?
(tick off):—

Yes

No.

(*If a G.C.E. Certificate, state *number* of Subject passes gained.)

D: General Experiences

Outline, giving dates, experiences received as a Psychiatric Nurse within the last two
(2) years

.....From.....To.....

.....From.....To.....

.....From.....To.....

.....From.....To.....

.....From.....To.....

Any Other Experiences

.....From.....To.....

.....From.....To.....

.....From.....To.....

Signature of Applicant.....

Date.....

For Use of Office Only

Original documents returned to Applicant on.....

Personally By Registered Airmail By Registered Inland Mail

(Tick off as applicable)

Certificate of Registration, No.....of.....Certificate of Birth

Certificate of Marriage Certificate of Baptism

Any Other Document or Documents:

.....
.....
.....

Signature of Owner of Documents

OR

Signature of Mailing Clerk.....

(1977)

FORM 7

(Regulation 46(1))

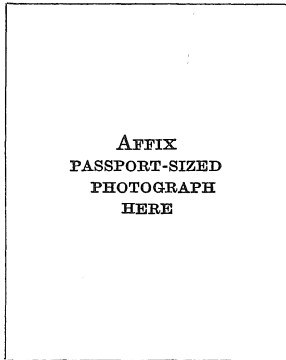
THE NURSING COUNCIL OF TRINIDAD AND TOBAGO
[Nurses and Midwives Registration Ordinance, 1960—Part V, Sec. 41(2)(a)]

APPLICATION FOR REGISTRATION AS A PUPIL MIDWIFE OF THE

..... Hospital School of Midwifery

A: (To be completed in Applicant's handwriting)

- 1. Surname.....
(In Block Letters: If married, write Married Name First:
then write Maiden Name after the word "nee")
2. Other Name(s).....
3. State whether Married, Single or Widow.....
4. Date of Birth.....
5. If married, Date of Marriage.....
6. Nationality.....
7. Place a tick against the qualification whereby you
secured entry to training as a Pupil Midwife, viz:—



Registered Nurse of Trinidad and Tobago, i.e.

- R.N. Number..... ..
R.M.N. Number..... ..
E.P.M. Number..... ..
Received Council's Aptitude Test Certificate

8. If previously you received training in a Hospital School of Nursing, state—

- (a) Name of Hospital School of Nursing.....
(b) Date of entry to the above Hospital School.....
(c) Date of termination of training.....

9. State length of the Midwifery Course for which you are now applying for registration

.....

I DECLARE that all the particulars I have entered above are true and correct and hereby make application for registration as a Pupil Midwife with the Council.

Signature of Applicant.....

Full Permanent Postal Address.....

.....

B: (To be completed by Authority of School of Midwifery)

I HEREBY CERTIFY that the Applicant named above was admitted to this Hospital School of Midwifery

on the.....day of19.....

and having been considered a suitable candidate for training, I now make application for her to be placed on the List of Pupil Midwives maintained by The Nursing Council of Trinidad and Tobago and remit herewith the Fees prescribed for pupil midwife registration.

Signature.....

Fee Receipt No;

(For Office Use Only)

The Particulars entered above by Applicant are true and correct as certified by the records of The Nursing Council of Trinidad and Tobago.

Signature.....
Secretary

Registered Pupil Midwife No.

(To be completed by the Authority of the Approved Hospital School of Midwifery)

I HEREBY CERTIFY that the Applicant named above has successfully completed the prescribed course of training at the.....
Hospital School of Midwifery

and is thus entitled to be admitted to the Register maintained by the Council and to receive the Council's Licence to Practise as a Midwife and I further declare that she is a fit and proper person to assume the responsibilities of a Licensed Midwife.

Signature

Official Title

(Regulation 64(2)(b))

FORM 9

THE NURSING COUNCIL OF TRINIDAD AND TOBAGO
(Nurses and Midwives Registration Ordinance, 1960)

AR/

Fees:—
Rec. No.
Date

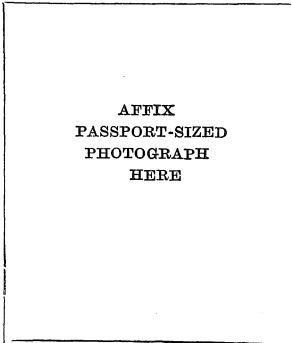
APPLICATION FOR REGISTRATION AND LICENCE TO PRACTISE
(as a midwife under the provisions of section 21(3) of the Ordinance)

To: The Secretary,
The Nursing Council of Trinidad and Tobago

I HEREBY request The Nursing Council of Trinidad and Tobago to grant me the necessary Certificate of Registration and Licence to Practise as a Midwife.

I now submit documents attesting to my identity and qualifications and the Fee as prescribed by the Council:

And I declare that the particulars hereunder to which I affix my signature are true and correct:—



A. Particulars of Identity:

Full Name (Surname)
(Block Letters)

1st Name 2nd Name

3rd Name 4th Name

If Married, Maiden Name

Date of Birth Date of Marriage

Place of Birth

Nationality

Full Postal Permanent Address

.....

B. Professional qualifications:

Name and Address of Institution of Training:—

.....

.....

Period of Training:—

From..... To.....

Name and Address of Licensing body in State/Province where above training was undergone:

.....

Date of Licensing by the above body:.....

Number of Licence as a Midwife:

Is the above Licence in force? (tick off)

YES *NO

*State reason fully below:—

.....

Professional qualifications (other than Licensed Midwife):—

<i>Qualification</i>	<i>Date obtained</i>
.....
.....
.....
.....

C: Basic Education:

Primary: FromTo

Certificate gained:

Secondary: From.....To.....

*Certificate/Diploma gained:.....

University: FromTo.....

Degree/Diploma gained:

Have you taken the Aptitude Test for Prospective Student Nurses and Midwives of this Council? (tick off):—

YES NO

(*If a G.C.E. Certificate, state number of Subject Passes gained)

D. Employment to the present time:

State places of employment to date, giving dates:—

Names and Addresses	From	To
.....		
.....		
.....		
.....		
.....		
.....		
.....		
.....		
.....		
.....		
.....		
.....		
.....		
.....		

Signature of Applicant:.....

Date:.....

For Use of Office Only

Original documents returned to Applicant on

Personally By Registered Airmail By Registered Inland Mail
(Tick off as applicable)

Certificate of Licence to Practise as a Midwife, No. of

Certificate of Birth with affidavit Certificate of Marriage

Certificate of Baptism

Any other document or documents:

.....

Signature of owner of documents:

or

Signature of Mailing Clerk:

(Regulation 69(1))

FORM 10

THE NURSING COUNCIL OF TRINIDAD AND TOBAGO
(Nurses and Midwives Registration Ordinance, 1960, Part IV).

APPLICATION FOR ENTRY INTO COUNCIL'S NURSING ASSISTANT
TRAINING COURSES

(To be completed in Applicant's handwriting)

I HEREBY make application for approval of Council for entry into the Nursing Assistant Training Course at

.....
(Name of Training Centre)

I now state the following particulars:

(1) Name in full (Surname first, Block Letters)

.....

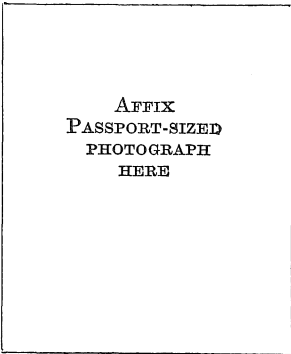
(2) State whether married, single or widow.....

(3) If married, state maiden name.....

(4) Date of Birth.....

(5) Date of Marriage.....

(6) Education:



Name of School	Attendance		Certificate gained
	From	To	

In support of the particulars, I attach (tick off)

Certificate of Birth Certificate of Baptism

Affidavit Certificate of Marriage

Primary School Leaving Certificate

Testimonials regarding education (state number: 1, 2, 3, etc.).....

(7) State whether you have ever applied to write Council's Aptitude Test (Yes or No).....

If "Yes", state:—Passed, Failed, did not sit.....
I DECLARE all the particulars entered above to be true and correct and remit the prescribed Fees with this Application.

Signature.....Date.....

Full Postal Permanent Address.....

.....

(For Office Use Only)

Documents indicated received.....Receipt No.....

Certificate of Birth

Certificate of Marriage

Affidavit

Certificate of Baptism

Primary School Leaving Certificate

Testimonial(s)

Trainee registration number

Application approved on

Signature of Owner.....

.....
Secretary of Council

THE LAW COMMISSION

(Regulation 79(2)(b))

FORM 12

THE NURSING COUNCIL OF TRINIDAD AND TOBAGO
(Nurses and Midwives Registration Ordinance, 1960)

89, Frederick Street, Port-of-Spain

Trinidad, Trinidad and Tobago, West Indies

Application No.

Rec. No.
Date received:

APPLICATION FOR ENROLMENT AS A NURSING ASSISTANT
IN TRINIDAD AND TOBAGO

I. (To be completed in handwriting of Applicant)

I HEREBY make application to be Enrolled by the Nursing Council of Trinidad and Tobago under the provisions of section 33 of the Nurses and Midwives Registration Ordinance, 1960, and the grant to me of a Certificate of Enrolment stating that my name has been placed on the Roll of Nursing Assistants maintained by the Council.

I promise in the event of my being so enrolled and in consideration thereof, to be bound by, and to conform in all respects to the Rules and Regulations thereto applying.

In support of this application I now submit the following particulars:—

PERSONAL INFORMATION

(1) Surname
(in Block Letters)

(2) Other name(s)
1st 2nd 3rd

(3) If married, state maiden name

(4) Date of Birth Nationality

(5) Full Postal Permanent Address

.....

GENERAL EDUCATION:

Basic Education: (tick off)

Primary School Secondary School Any Other

From..... To..... From..... To..... From.....To.....

Certificates held

.....

.....

Have you ever sat the Aptitude Test of this Nursing Council?

Yes No

PROFESSIONAL EDUCATION:

Name and Address of Hospital of Training

.....

Training Programme:— From..... To.....

If your programme is recognized by a State Agency, give name and address of the State Agency:

.....

Post-enrolment Programme (if any):.....

Certificate/Diploma(s) held for post-enrolment programme(s):

.....

NURSING ASSISTANT ENROLMENT

Certificate to practice as a Nursing Assistant in country of training:—

Number..... Date of Issue.....

Certificate awarded by State Agency after examination: YES NO

If Certificate is (or was) suspended, please explain:

.....

.....

Signature of Applicant.....

Date.....

II. (To be completed by Authority of Centre where Applicant received training) Kindly supply the information as outlined below on behalf of this Applicant. Return this form directly to the Office of The Nursing Council of Trinidad and Tobago, 89, Frederick Street, Port-of-Spain. Application Forms returned to the Applicant are not acceptable.

I HEREBY CERTIFY that

..... (Name of Applicant)

commenced training at (Name of Hospital of Training)

on Her/his programme was completed on

Duration of programme

Type of programme

.....

Information on Centre of Training:—

Bed Capacity

Average Occupation: *Male* *Female* *Children*

	<i>Male</i>	<i>Female</i>	<i>Children</i>
Medical Services			
Surgical Services			
Paediatric			
Geriatric			
Mothers and Infants			
Psychiatric			
Any Other			

Service Personnel: Administrative Staff

Registered Nurses

Enrolled Nurses

Nursing Students

Trained Instructors
(teachers)

.....
.....
.....
.....
.....

Applicant was assessed in the following before receiving her certificate of training:—

<i>Date</i>	<i>Written</i>	<i>Oral</i>	<i>Practical</i>
.....			
.....			
.....			
.....			

If Nursing Assistant Certificate was granted by endorsement or by waiver, please explain:—

.....

.....

.....

Hospital approved for the training of persons for State certification as—(tick off)

- Registered Nurses Any Other:
- Enrolled Nurses
(Nursing Assistants)
- Midwives

TRANSCRIPT OF TRAINING AND EXPERIENCE OF APPLICANT OVER THE PERIOD

commencing to

THEORETICAL EXPERIENCE	HOURS	PRACTICAL EXPERIENCE	HOURS
Fundamentals of Nursing		Assisting in the care and rehabilitation of patients in the following areas:—	
Anatomy and Physiology as applied to Nursing and Medical treatment		Medical	
Emergency Methods (First Aid)		Surgical	
Food and Food Service		Obstetric	
Ward Hygiene		Paediatric	
Personal and Communal Health		Psychiatric	
Any Other		Geriatric	
		Assisting in the following Departments (Firms):—	
		Out-patients'	
		Casualty	
		Community Health Service	
		Maternal and Child Care	
		Family Planning	
		Domiciliary Nursing Care	
		Prevention and Control of Infectious Diseases	
		Any Other (specify)	
TOTAL HOURS		TOTAL HOURS	

TOTAL EXPERIENCE (Theoretical and Practical)

CERTIFICATE OF TESTIFYING AUTHORITY

I CERTIFY that

.....
(Name of Applicant)

who is now making application for Enrolment as a Nursing Assistant in Trinidad and Tobago has completed the programme and received the training and experience as outlined above and has acquired the following levels of attainment:—

Practical Nursing Skills and performance

Professional adjustment and deportment

Theoretical knowledge

Assessment of Applicant (from personal acquaintance; if from confidential records, please specify)

.....
.....
.....
.....

*I THEREFORE RECOMMEND/DO NOT RECOMMEND this Applicant for admission to the Roll of Nursing Assistants maintained by The Nursing Council of Trinidad and Tobago.

Name of Authority
(in Block Letters)

Occupation/Title

Address of Authority testifying

.....

Signature of Authority testifying.....

Date.....

SEAL (or stamp)
of Training Centre:



*Delete where inapplicable

(Regulation 14(a))

FIFTH SCHEDULE

PART I

SYLLABUS OF SUBJECTS FOR THE CERTIFICATE IN GENERAL NURSING

THE PRELIMINARY EXAMINATION

I. PRINCIPLES AND PRACTICE OF NURSING

Introduction

Broad outline—history and development of nursing, national and international.
 Definition of "Nurse"; nature of Nursing.
 The Nursing Process
 Essential qualities and attitudes required of the Nurse;
 Standards of ethical conduct, legal responsibilities of the Nurse;
 Role of the Nurse in the hospital team; internal and external relationships;
 The hospital as a unit—aims and functions.

General Care of Environment of Patient

Plan of ward routine
 Methods of cleaning ward and annexes
 Adequate floor spacing
 Ventilation and light
 Cleanliness of the ward as it affects the safety and comfort of the patient and other personnel
 Care of soiled linen
 Disposal of hospital refuse
 Disinfection
 Sterilization
 Disinfestation
 Elimination of noise
 Care, storage and handling of food
 Care of hospital equipment.

General Care of the Patient

Reception and Admission, Discharge and Transfer
 Observation, reporting and recording—
 general appearance and mental state
 position in bed
 skin, mouth, eyes, ears, behaviour, sleep, pain, cough
 excreta
 Personal cleanliness and hygiene
 Bathing the patient (adults and children)
 bed
 bathroom
 Tepid sponging
 Vital signs:—temperature, pulse, respiration, blood pressure
 Patient's property:—care of clothing and other belongings including valuables.
 Feeding patients
 Measuring and recording fluid intake and output
 Recording weight and height
 Care of pressure areas and prevention of pressure sores
 Bedmaking
 Body mechanics
 Methods of lifting and moving patients
 Positions used in Nursing
 Getting patients into and out of bed
 Giving and removing bedpans and urinals
 Collection, disinfection and disposal of excreta
 Collection of specimens for ward and laboratory
 Urine testing
 Uses and application of heat, cold and medicated preparations
 Inhalations, steam, dry
 Administration of oxygen
 Enemata, suppositories
 Passing a flatus tube
 Last offices.

Care of Patient—Special conditions

Confined to bed
 Fever
 Pain
 Incontinence of bladder and bowel
 Unconsciousness
 Before and after anaesthesia
 Terminal illness

Principles of asepsis, sterilisation and disinfection

Aseptic technique
 Simple surgical dressings—preparation, procedure
 Removal of sutures and clips
 Methods of securing dressings
 Methods of disposal of soiled dressings.

Introduction to Pharmacology

Weights and Measures
 Calculation of dosages
 Rules for, and methods of, administration of drug
 Legislation regarding Dangerous Drugs.

II. INTRODUCTION TO THE STUDY OF STRUCTURE AND FUNCTION OF MAN**The Human Body**

The body as an integrated whole, anatomical terms, body cavities and their contents.
 The Cell as a unit of life, its composition, structure and functions.
 Tissues—varieties occurring in the body, differentiation of structure relevant to functions.
 Organs—systems: gross and microscopic structure and functions.

The body as an erect and moving organism:—

The skeleton, joints, muscles—their structure and relationship to movements:

1. The skeleton, its divisions into axial as a pillar appendicular as moving appendages
 its adaptation to position, protection and function.
 Muscle as a component which provides energy for movement of the skeleton and is also responsible for activity in other organs and systems.
2. The circulatory system as a means for transport of respiratory, nutritive, metabolic, secretory and excretory substances:—
 - (a) the blood as a fluid—components, development, structure, function;
 - (b) the heart and conducting mechanism as a source of energy;
 - (c) the blood vessels as channels for transport;
 - (d) factors upon which circulation of the blood depends;
 - (e) factors which conserve the quality and quantity within the circuit.
3. The lymphatic system as a connecting link with the transport system:—
 - (a) structure
 - (b) function
 with special emphasis on its protective functions.
4. The respiratory system as the mechanism which provides for collection, utilization and excretion of gases:—
 - (a) gross and microscopic structure and related function
 - (b) nervous control.
5. The alimentary system as the mechanism which prepares food in a form whereby it is digested, absorbed, metabolized and unwanted or surplus substances excreted:—
 - (a) gross and microscopic structure, adaptations and functions
 - (b) accessory organs—positions, structure and functions.

6. The excretory system—gross and microscopic, structure and functions as related to the elimination of surplus and unwanted substances via kidneys, skin, lung and colon.
7. The endocrine system: principal glands—position, structure and functions in relation to their integration, regulation and utilization by means of hormones and enzymes.
8. The nervous system as the control centre which maintains the organism in a state of equilibrium with its internal and external environment through the activities of brain, spinal cord and special senses:—
 - (a) position, structure and function of the
 - central nervous system
 - peripheral nervous system
 - autonomic nervous system;
 - (b) the special senses:—
 - Eye and mechanism of sight
 - Ear and mechanism of hearing
 - Touch, taste, smell.
9. The reproductive system: reproduction and control of the species
Male and female reproductive organs; position, structure and function; the menstrual cycle.

III. PERSONAL AND COMMUNITY HEALTH

Introduction

Organizational structure of the Health Service; Available Health, Social and other Services contributing to health care in Trinidad and Tobago; Role of the Nurse in the integrated Health team.

Brief review of the historical development of Public Health Nursing;

Personal Health

Education of the individual *re* responsibility for promoting and maintaining his/her own health through

- care of the body
- physical fitness, rest, sleep, diet, exercise;
- habits, mental hygiene and mental health;
- choice of clothing.

Community Health

1. Public authorities responsible for provision and maintenance of health facilities such as:—

- Water, Housing, Clean Air, Refuse disposal.

2. Agencies and personnel concerned with physical, mental and social welfare of the community.

3. Factors contributing to health promotion and maintenance, disease prevention:—

(a) Nutrition

- Sources of food
- Food values, nutritional requirements, components, functions in health and in illness;
- Planning menus within available resources;
- Care, preparation, presentation, preservation and storage of food and milk;
- Types of diets;
- Instruction in health and illness;
- Diseases spread by milk and food.

(b) Air

- Composition and sources
- Natural and artificial ventilation in home and institutions;
- Effects of overcrowding in home and institutions;
- Air pollution—causes of excess pollution, control of pollution.

(c) Water

- General sources, areas of collection, contamination, pollution;
- Provision and maintenance of safe and adequate supply;
- Uses in the body and in community services;
- Diseases spread by water and their prevention.

- (d) *Heat*
Transmission of heat and regulation of temperature.
- (e) *Light*
Natural and artificial.
- (f) *Refuse*
Types, collection, methods of disposal, treatment and control in home, hospital, community;
Diseases associated with poor sanitary conditions.
- (g) *Housing and the Home*
Housing bye-laws;
Influence of home and economic background as it relates to disease prevention and control;
Safety measures and accident prevention.
- (h) *Prevention and control of infestation*
Prevention, treatment of infestation and control of pests, vermin, parasites.

IV. INTRODUCTION TO THE STUDY OF HUMAN BEHAVIOUR

Human Behaviour

A. STUDY OF INDIVIDUAL BEHAVIOUR

1. Analysis of Individual Behaviour

- (a) Human growth and development
- (b) Developmental tastes and stages
- (c) Personality structure and development
- (d) Basic needs of individual
- (e) Anxiety and stress
- (f) Patterns of adjustment.

2. Learning and motivation

B. STUDY OF BEHAVIOUR IN GROUPS

- Types of groups
- Dynamics
- Institutions
 - family
 - religion
 - education
 - military
 - economic
 - political
- Community
- Society
- Culture
- Communication skills
- Relationships—human, interpersonal—nurse/patient.

C. MENTAL HEALTH

- Concepts of mental health
- Role of the nurse in promoting mental health
- Positive mental health
 - individual

V. ELEMENTARY MICROBIOLOGY APPLIED TO NURSING

Introduction

- Brief history of microbiology
- Micro-organisms—role in life, classification, sources, growth and reproduction
- Infection and modes of entry, methods of transmission, prevention and control, method of destruction of pathogenic bacteria.
- Natural defences of the body—immunity, types of immunity, administration and use of biochemical reagents (vaccines, sera, toxoids)
- Susceptibility and sensitivity tests (use of cultures)

Communicable Diseases

Regulations governing communicable diseases—notification, control, surveillance of contacts.

Responsibility of Statutory Authorities in relation to maintenance of health, prevention and control of disease.

VI. EMERGENCY CARE**General Principles****A. PRINCIPLES OF CARE IN**

- (a) Haemorrhage
- (b) Shock
- (c) Asphyxia
- (d) Cardiac Arrest
- (e) Injuries—skin—wounds, } use
 scalds, } of
 burns } bandages
 bone—fractures } and
 joints—sprains } splints
- (f) Unconsciousness
- (g) Poisoning
- (h) Drowning
- (i) Fits
- (j) Bites and Stings
- (k) Foreign Bodies.

B. MAJOR DISASTERS—FIRES, EARTHQUAKE, HURRICANES, ETC.**THE FINAL EXAMINATIONS**

Principles and practice of Nursing related to specific Medical and Surgical conditions in

- (a) Children
- (b) Adults.

Cardiovascular system

1. Care of the individual with conditions affecting the cardiovascular system:—

- (a) Acute and long-term conditions of the blood and blood-forming organs;
- (b) Acute and long-term conditions of the blood vessels and lymphatics;
- (c) Acute and long-term conditions of the heart and conducting mechanisms.

Diagnostic examinations and related nursing care

General principles of care and rehabilitative measures.

Respiratory system

2. Care of the individual with conditions affecting the respiratory system:—

- (a) Acute and long-term conditions of the upper respiratory tract;
- (b) Acute and long-term conditions of the respiratory passages, lung tissue and pleura.

Diagnostic examinations and related nursing care.

General principles of care in respiratory diseases and rehabilitative measures.

Alimentary system

3. Care of the individual with conditions affecting the alimentary system and accessory organs:—

- (a) Acute and long-term conditions of the lips, mouth, oesophagus, stomach and duodenum; the remainder of the small intestine, large intestines and anus;
- (b) Acute and long-term conditions affecting liver and biliary tract.

Diagnostic examinations and related nursing care.

General principles of care in gastro-intestinal tract disorders and rehabilitative measures.

Urinary system

4. Care of the individual with conditions affecting the urinary system:—

Acute and long-term conditions involving kidneys, ureters, bladder, urethra.

Diagnostic examinations and related nursing care;

General principles of care in urinary conditions and rehabilitative measures.

The Skin

5. Care of the individual with conditions affecting the skin:—
Diseases of the skin

Diagnostic examinations and related nursing care;
General nursing care of patients with skin conditions.

Joints and connective tissues

6. Care of the individual with conditions affecting joints and connective tissue:—
Common disorders affecting the muscle/skeletal system.

Diagnostic examinations and related nursing care;
General principles of care and rehabilitative measures.

The Breast

7. Care of the individual with conditions affecting the breast:—
(a) Acute and chronic infections of the breast;
(b) Malignant and non-malignant conditions of the breast.

Diagnostic examinations and related nursing care;
General principles of care and rehabilitative measures.

The Reproductive system (female)

8. Care of the individual with conditions affecting the female reproductive system:—
Common disorders affecting organs comprising the system

Diagnostic examinations and related nursing care;
General principles of care and rehabilitative measures.

The Reproductive system (male)

9. Care of the individual with conditions affecting the male reproductive system:—
Acute and long-term conditions of the external and internal genitalia.

Diagnostic examinations and related nursing care;
General principles of care and rehabilitative measures.

Ear, Nose, Throat

10. Care of the individual with conditions affecting the ears, nose and throat:—
(a) Acute and long-term conditions affecting the outer, middle and inner ear;
(b) Acute and long-term conditions of nose and sinuses;
(c) Acute and long-term conditions of the throat.

Diagnostic examinations and related nursing care;
General principles of care and rehabilitative measures.

Eyes

11. Care of the individual with conditions affecting the eye and related structures:—
Acute and long-term disorders of the eyes.

Diagnostic examinations and related nursing care;
General principles of care and rehabilitative measures.

The Endocrine Glands

12. Care of the individual with common conditions affecting the endocrine glands:—
Effects on patients of under- and over- secretion.

Diagnostic examinations and related nursing care;
General principles of care and rehabilitative measures.

The Central Nervous system

13. Care of the individual with conditions affecting the central nervous system:—
(a) Acute and long-term conditions affecting the brain, and its coverings, the spinal cord and nerves;
(b) Head injuries.

Diagnostic examinations and related nursing care;
General principles of care and rehabilitative measures.

Communicable Diseases

14. Care of the individual with a communicable disease:—
Common communicable diseases and their control.

General principles of care and rehabilitative measures.

B. PHARMACOLOGY**Introduction**

1. Introduction to Pharmacology—
 - (a) The socio-legal status of drugs and drug therapy, general information on drugs;
 - (b) Methods of drug administration;
 - (c) The role of the Nurse in drug therapy.

Drugs

2. Drugs used in a variety of Clinical conditions.
3. Drugs used in the treatment of common Medical-Surgical conditions.
4. Drugs used in relation to specific types of patients.
5. Indications for use, action, dosage, contra-indications; Precautions and adverse effects, overdose symptoms and treatment.

C. INTRODUCTION TO PSYCHIATRIC AND MENTAL HEALTH NURSING**The Mentally Ill**

History of psychiatry and psychiatric nursing
Medico-Legal aspects
Principles of psychiatric nursing
Communication skills in psychiatric nursing
Abnormal patterns of behaviour
Methods of care of the mentally ill
Community Mental Health Nursing

D. INTRODUCTION TO THE STUDY OF MAN AND HIS ENVIRONMENT**Community Care**

The scope of Community Health Care:
National and International Health Organizations
Health Acts
Services
Principles:
Individual and Community Health
Heredity, environment—effects on health
Statistics
Epidemiology:—prevention and control of infectious diseases, immunization
Population control, Family Life Education
Continuity of care.

E. PROFESSIONAL ADJUSTMENTS/ETHICS**Adjustment and Ethics**

Scope and character of Nursing profession
Professional relations
Professional organizations
Current trends in Nursing.

F. ELEMENTS OF WARD ADMINISTRATION**Introduction to Ward Administration**

Basic principles of administration applied to nursing
Supervisory techniques
Teaching techniques¹
Nursing Care planning
Inventories, costing
Care of equipment,

PART 2

(Regulation 14(b))

SYLLABUS OF SUBJECTS FOR THE CERTIFICATE IN PSYCHIATRIC
NURSING

The Preliminary Examination

I: PRINCIPLES AND PRACTICE OF NURSING

Introduction:

Broad outline—history and development of nursing, national and international.
Definition of 'Nurse'; nature of Nursing.

The Nursing Process.

Essential qualities and attitudes required of the Nurse.

Standards of ethical conduct, legal responsibilities of the Nurse.

Role of the Nurse in the hospital team; internal and external relationships.

The hospital as a unit—aims and functions.

General Care of Environment of the Patient:

Plan of ward routing

Methods of cleaning ward and annexes

Adequate floor spacing

Ventilation and light

Cleanliness of the ward as it affects the safety and comfort of the patient and other
personnel

Care of soiled linen

Disposal of hospital refuse

Disinfection

Sterilization

Disinfestation

Elimination of noise

Care, storage and handling of food

Care of hospital equipment.

General Care of the Patient:

Reception and Admission, Discharge and Transfer

Observation, reporting and recording

—general appearance and mental state

—position in bed

—skin, mouth, eyes, ears, behaviour, sleep, pain, cough

—excreta

Personal cleanliness and hygiene

Bathing the patient (adults and children)

—bed

—bathroom

Tepid sponging

Vital signs:—temperature, pulse, respiration, blood pressure

Patient's property:—care of clothing and other belongings including valuables

Feeding patients

Measuring and recording fluid intake and output

Recording weight and height

Care of pressure areas and prevention of pressure sores

Bedmaking

Body mechanics

Methods of lifting and moving patients

Positions used in Nursing

Getting patients into and out of bed

Preliminary Examination—Continued

Giving and removing bedpans and urinals
 Collection, disinfection and disposal of excreta
 Collection of specimens for ward and laboratory
 Urine testing
 Uses and application of heat, cold and medicated preparations
 Inhalations, steam, dry
 Administration of oxygen
 Enemata, suppositories
 Passing a flatus tube
 Last offices.

Care of the Patient—Special conditions:

Confined to bed
 Fever
 Pain
 Incontinence of bladder and bowel
 Unconsciousness
 Before and after anaesthesia
 Terminal illness
 Dying.

Principles of asepsis, sterilisation and disinfection

Aseptic technique
 Simple surgical dressings—preparation, procedure
 Removal of sutures and clips
 Methods of securing dressings
 Methods of disposal of soiled dressings.

Introduction to Pharmacology

Weights and Measures
 Calculation of dosages
 Rules for, and methods of, administration of drugs
 Dilution of lotions and uses
 Legislation regarding Dangerous Drugs.

II: INTRODUCTION TO THE STUDY OF STRUCTURE AND FUNCTION OF MAN**The Human Body**

The body as an integrated whole, anatomical terms, body cavities and their contents.
 The Cell as a unit of life, its composition, structure and functions.
 Tissues—varieties occurring in the body, differentiation of structure relevant to functions.

Organs—systems: gross and microscopic structure and functions.

The body as an erect and moving organism:—

The skeleton, joints, muscles—their structure and relationship to movements:

1. The skeleton, its divisions into axial as a pillar appendicular as moving appendages
 its adaptation to position, protection and function.
 Muscle as a component which provides energy for movement of the skeleton and is also responsible for activity in other organs and systems.
2. The circulatory system as a means for transport of respiratory, nutritive, metabolic, secretory and excretory substances:—
 - (a) the blood as a fluid—components, development, structure, function;
 - (b) the heart and conducting mechanism as a source of energy;
 - (c) the blood vessels as channels for transport;
 - (d) factors upon which circulation of the blood depends;
 - (e) factors which conserve the quality and quantity within the circuit.

Preliminary Examination—Continued

3. The lymphatic system as a connecting link with the transport system:—
 - (a) structure
 - (b) function
 with special emphasis on its protective functions.
4. The respiratory system as the mechanism which provides for collection, utilization and excretion of gases:—
 - (a) gross and microscopic structure and related function;
 - (b) nervous control.
5. The alimentary system as the mechanism which prepares food in a form whereby it is digested, absorbed, metabolized and unwanted or surplus substances excreted:—
 - (a) gross and microscopic structure, adaptations and functions;
 - (b) accessory organs—positions, structure and functions.
6. The excretory system—gross and microscopic, structure and function as related to the elimination of surplus and unwanted substances via kidneys, skin, lung and colon.
7. The endocrine system: principal glands—position, structure and functions in relation to their integration, regulation and utilization by means of hormones and enzymes.
8. The nervous system as the control centre which maintains the organism in a state of equilibrium with its internal and external environment through the activities of brain, spinal cord and special senses:—
 - (a) position, structure and function of the
 - central nervous system
 - peripheral nervous system
 - autonomic nervous system;
 - (b) the special senses:—
 - Eye and mechanism of sight
 - Ear and mechanism of hearing
 - Touch, taste, smell.
9. The reproductive system: reproduction and control of the species. Male and female reproductive organs; position, structure and function; the menstrual cycle.

III: PERSONAL AND COMMUNITY HEALTH**Introduction:**

- Organizational structure of the Health Service;
- Available Health, Social and other Services contributing to health care in Trinidad and Tobago;
- Role of the Nurse in the integrated Health team.
- Brief review of the historical development of Public Health Nursing.

Personal Health:

- Education of the individual *re* responsibility for promoting and maintaining his/her own health through—
 - care of the body
 - physical fitness, rest, sleep, diet, exercise;
 - habits, mental hygiene and mental health;
 - choice of clothing.

Preliminary Examination—Continued**Community Health:**

1. Public authorities responsible for provision and maintenance of health facilities such as:—

Water, Housing, Clean Air, Refuse disposal.

2. Agencies and personnel concerned with physical, mental and social welfare of the community.

3. Factors contributing to health promotion and maintenance, disease prevention:—

(a) Nutrition:—

Sources of food
Food values, nutritional requirements, components, functions in health and in illness;
Planning menus within available resources;
Care, preparation, presentation, preservation and storage of food and milk;
Types of diets;
Instruction in health and illness;
Diseases spread by milk and food.

(b) Air:—

Composition and sources
Natural and artificial ventilation in home and institutions;
Effects of overcrowding in home and institutions;
Air pollution—causes of excess pollution, control of pollution.

(c) Water:—

General sources, areas of collection, contamination, pollution;
Provision and maintenance of safe and adequate supply;
Uses in the body and in community services;
Diseases spread by water and their prevention.

(d) Heat:—

Transmission of heat and regulation of temperature.

(e) Light:—

Natural and artificial.

(f) Refuse:—

Types, collection, methods of disposal, treatment and control in home, hospital, community;
Diseases associated with poor sanitary conditions.

(g) *Housing and the Home:*

Housing bye-laws;
Influence of home and economic background as it relates to disease prevention and control;
Safety measures and accident prevention.

(h) *Prevention and control of infestation:*

Prevention, treatment of infestation and control of
pests,
vermin,
parasites.

IV: INTRODUCTION TO THE STUDY OF HUMAN BEHAVIOUR**Human Behaviour:**

(i) *Individual*

- (a) Human Growth and Development
 - (b) Developmental stages and tasks
 - (c) Personality development
 - (d) Basic needs of the individual
 - (e) Anxiety and stress
 - (f) Patterns of adjustment
- Learning and motivation, study habits, etc.

THE FINAL EXAMINATIONS

- (i) Principles and Practice of Psychiatric Nursing;
- (ii) Psychiatry—Science and Treatment of Mental Disorders;
- (iii) Introduction to Study of Psychological Concepts;
- (iv) Community Health;
- (v) Physical Illness and Psycho-Physiological Disturbances;
- (vi) Pharmacology;
- (vii) Nutrition;
- (viii) Professional Adjustments/Ethics; and
- (ix) Elements of Ward Administration.

I: PRINCIPLES AND PRACTICE OF PSYCHIATRIC NURSING

- (1) History of Psychiatric Nursing
- (2) Introduction to Psychiatric Nursing—Principles, functions of the Nurse
- (3) Communication skills in Psychiatric Nursing—observation, recording and reporting, talking with patients, listening, etc.
- (4) Nurse/Patient relationship
- (5) Ward Management—creating a therapeutic environment
- (6) Role of the Nurse in admission and discharge procedures
- (7) Role of the Nurse in Psychiatric treatments—
 - psychotherapy
 - physical therapy
 - drug therapy
 - adjunctive therapy
 - occupational therapy
 - recreational therapy
- (8) Patterns of Behaviour
 - overactive
 - underactive
 - withdrawn
 - suspicious
 - addicted
 - ritualistic
 - hysterical
- (9) Nursing Care and Management of
 - (a) Special patients
 - suicidal
 - violent and destructive
 - patients with feeding problems
 - patients with degraded and depraved habits
 - senile
 - alcoholic
 - anti-social
 - epileptic
 - mentally handicapped.
 - (b) Children
 - (c) Adolescents
- (10) Rehabilitation of the Patient.

II: PSYCHIATRY—SCIENCE AND TREATMENT OF MENTAL DISORDERS

- (1) History of Psychiatry
- (2) Concepts of Mental Health
- (3) Aetiology of Mental Disorders
- (4) Classification of Mental Disorders
- (5) Examination of the Psychiatric patient
- (6) Special investigations and tests
- (7) Symptoms of Mental Disorders

Final Examination—Continued

- (8) Common psycho-pathological conditions
- Neuroses
 - Psychoses
 - Behaviour disorders in children and adolescents
 - Psycho-physiological disorders
 - Mental Subnormality
 - Personality Disorders
 - Epilepsy
- (9) Psychiatric Treatments—principles of
- physical therapy
 - psycho therapy
 - drug therapy
 - adjunctive therapies—recreational therapy
 - occupational therapy
- (10) Psychiatric Team
- Members of the Psychiatric Team and their roles.
- (11) Legal Aspects of Psychiatry:—
- (a) Mental Health Act, 1975:—
 - (i) Interpretations as per Mental Health Act, 1975;
 - (ii) Provisions for Admission, Discharge and continued detention;
 - (iii) Provisions for maintaining civil liberties for personal freedom of patients
 - Psychiatric Hospital Tribunal—establishment, composition and functions
 - Mental Health Review Tribunal—establishment, composition and functions
 - Powers and duties of Psychiatric Hospital Director
 - Protection of property of patients
 - (vi) General provisions
 - Ill treatment
 - Sexual Intercourse
 - Escape
 - Designation of Mental Health Officers.
 - (b) Other Civil Rights as affected by Mental Illness:—
 - Testamentary capacity
 - Marriage and Divorce
 - Voting privileges
 - Criminal responsibility
 - (c) Relevant Regulations made under the Mental Health Act, 1975.
- (12). Community Mental Health
- (1) Overview
 - Concept of Community Mental Health
 - Importance and need for Community Health Programme.
 - (2) Planning for Community Mental Health
 - Major Models
 - Personnel preparation
 - Role
 - Need for ancillary services.
 - (3) Delivery of Services
 - (4) Community Mental Health Service in Trinidad and Tobago.

Final Examination—Continued

(13). Social Aspects of Psychiatry

Functions and role of Psychiatric Social Worker
 Family and Community responsibilities
 Community facilities—grants, social assistance, etc.

III: INTRODUCTION TO STUDY OF PSYCHOLOGICAL CONCEPTS

Introduction—Principles on which psychology is based;
 Developmental stages and tasks;
 Personality Development—main Theories
 Instincts and Emotions;
 Anxiety and Stress and coping mechanisms;
 Learning Process;
 Perception and Thought processes;
 Intelligence
 Nature of statistical concepts
 Assessment techniques;
 Group Dynamics.

IV: COMMUNITY HEALTH

Aims of Community Health Nursing
 Structure of Community Health Nursing Service
 Available Community Health Services
 Team concept in Community Health Nursing
 Role of Community Health Nurse
 Role of associated agencies
 Related function with Community Mental Health Services
 Epidemiology
 Family Life Education and Population Control
 Continuity of care

V: PHYSICAL ILLNESS AND PSYCHO-PHYSIOLOGICAL DISTURBANCES

Nature and cause of disease
 Inflammatory response
 Acute circulatory failure
 Aetiology, clinical features, treatment and nursing care of patients suffering from diseases:
 —social
 —infectious
 —parasitic
 —skin
 —cardio-vascular
 —respiratory
 —gastro-intestinal
 —genito-urinary
 —neurologic
 —endocrine
 —metabolic
 —collagen

VI: PHARMACOLOGY

1: Introduction

Definitions
 Types of Drugs
 General information on drug therapy
 Characteristics
 Drug standardization
 Factors in relation to drug action
 Terms in relation to drugs—tolerance, etc.

Final Examination—Continued

- 2: Laws relating to use and control of drugs
- 3: Administration of Drugs
 - Methods
 - Problems
 - Role and responsibility of the Nurse.
- 4: Specific groups of Drugs
- 5: Common drugs—indications for use, action, dosage, contra-indications, precautions, adverse effects. Overdose—symptoms, treatment.

VII: NUTRITION

- (1). Food as a basic health need:—
 - (a) Definitions
 - (b) Factors which influence choice of food
 - (c) Nutrition—national and international issues
 - (d) Role of the nurse in ensuring good nutrition.
- (2) Food and food values
 - Nutritional needs
- (3) Overweight and underweight.
- (4) Obesity and its effect on health
- (5) Diet in treatment of disease
 - (a) Nutritional deficiencies
 - (b) Ward diets—types
 - planning
 - in specific conditions

VIII: PROFESSIONAL ADJUSTMENTS/ETHICS

Scope and character of Nursing profession
Professional relations
Professional organizations
Current trends in Nursing

IX: ELEMENTS OF WARD ADMINISTRATION

Basic principles of administration applied to nursing
Supervisory techniques
Teaching techniques
Nursing Care planning
Inventories, costing
Care of equipment.

(Regulation 50)

PART 3

SYLLABUS OF SUBJECTS FOR THE CERTIFICATE AND LICENCE
TO PRACTISE AS A MIDWIFE

In this Syllabus of Subjects, the term "The Fundamental Nursing Programme" refers to the course of training and instruction received by student nurses in Approved Training Institutions in the first Six Months of entry to training as may be in force from time to time.

1. *The Fundamental Nursing Programme*2. *The Pelvis*

Anatomy
Types of Pelvis
Measurements
Pelvic floor
Disproportion

The Genital Organs

Anatomy and Physiology

The Pelvic Organs

Anatomy, physiology and pathology of uterus and cervix, fallopian tubes, ovaries, bladder, urethra, ureters, kidney.
Pelvic colon and rectum
Relation of these organs to each other.

The Foetus

Conception
Implantation
Growth
Physiology
Circulation
Placenta, membranes and cord with abnormalities of the placenta.

Foetal Skull

Anatomy—internal and external
Physiology
Moulding and intra-cranial accidents
Caput succedaneum
Cephalhaematoma

The Breasts

Anatomy
Physiology of lactation.

Normal Pregnancy

Diagnosis
Physiology
Management

Diseases due to Pregnancy

Causes, prevention, signs, symptoms and treatment
Accidents of early pregnancy
Hyperemesis gravidarum
Hydramnios

Diseases associated with Pregnancy

Signs, symptoms, treatment of:—
Hypertension
Cardiac disease
Diabetes
Pulmonary tuberculosis
Cystitis
Pyelitis

Pyelonephritis
Chronic nephritis—uraemia
Diseases of the blood and anaemia
Fibroids
Vaginal discharges
Prolapse and retroversion
Renal and bladder disorders
Haemorrhoids and varicose veins.

Ante-natal care

Psychology of the pregnant woman
Management—diet, clothes, hygiene, advice, treatment of minor ailments
History taking
Examination
Changes during pregnancy

Normal Labour

Physiology
Mechanism
Management of all stages

Abnormal Labour

Abnormal uterine action
Prolonged labour
Trial of labour
Malpresentation—breach, face, brow, shoulder, compound presentations
Multiple pregnancy—management of pregnancy—labour, puerperium
Post partum haemorrhage—prevention, cause, treatment

Obstetric emergencies

Presentation and prolapse of cord—diagnosis, signs, management.
Signs, symptoms and management of—
 Ruptured uterus
 Inversion of uterus
 Obstetric shock
Abortions—ectopic, hydatidiform mole
Antepartum haemorrhage

Normal puerperium

Physiology
Psychology
Management
Breast and artificial feeding.

Abnormal puerperium

Prevention, cause, signs, symptoms, treatment of :—
 Puerperal sepsis and pyrexia
 Urinary tract infection and disorders
 Breast infections
 Thrombophlebitis, phlebothrombosis, pulmonary embolism
 Pelvic floor injury
 Psychiatric disorders.

The New-born Infant

Physiology—changes at birth
Management—immediate care, examination
Resuscitation—asphyxia neonatorum
Birth injuries—fractures, cerebral damage, nerve injuries (physiological)
Disorders—vomiting, thrush, jaundice, omphalitis, sore buttocks, diarrhoea
RH and ABO incompatibility (jaundice in the new-born)
Infections—diagnosis, causes, treatment
Congenital abnormalities
Still births, perinatal mortality
Pulmonary disorders
Care of the Caesarian section baby.

The Premature Infant

Causes and prevention
Physiology
Management
Disorders.

3. *Drugs and Solutions used in Midwifery.*
4. *Obstetric Operations and Instruments:—*
 - Artificial rupture of membranes
 - Versions
 - Episiotomy
 - Forceps delivery
 - Caesarian sections
 - Cervical suturing
 - Vacuum extraction
 - Amniocentesis
 - Exchange blood transfusion and blood substitutes
 - Others.
5. *Anaesthesia and Analgesia*
6. *Statistics*
 - Population
 - Birth
 - Mortality
 - Importance of record keeping
7. *Population control*
 - Family life education
 - Principles of interviewing and counselling
 - Principles of teaching/learning processes
8. *Public Health and Social Services:—*
 - Duties of officers
 - Duties of liaison officers
 - Administration of the service
9. *Venereal Diseases*
 - Prevention
 - Signs and symptoms
 - Dangers
 - Management
 - Pathology
 - Treatment—prophylactic and curative.
10. *Professional ethics*
 - Laws governing the practice of Midwifery in Trinidad and Tobago.*

PART 4

SYLLABUS OF SUBJECTS FOR THE CERTIFICATE OF ENROLMENT
AS A NURSING ASSISTANT

Ethics

The organizational chart.
The Hospital as a unit
The role of the Nursing Assistant in the team
Hospital etiquette
Identification of other members of the team.

Psychology

Basic developmental psychology
Essential qualities of the Nursing Assistant and his/her relationship with other members of the team
Human behaviour in illness—special needs of patients
Relationship with relatives and visitors
Liaison with other Government Health Services.

First Aid Application to Anatomy and Physiology

Circulatory System

Pressure Points
Haemorrhage
Shock, collapse, syncope

Respiratory System

Cyanosis and dyspnoea
Choking, rope hanging
Haemoptysis, artificial respiration

Muscular System

Sprains and strains
Bites and stings
Burns and scalds

Endocrine System

Coma—Insulin, Diabetic

Urinary System

Uraemia, Coma

Alimentary System

Unconsciousness
Poisoning
Epilepsy

Skeletal System

Fractures
Dislocations

Patient Care and Ward Hygiene

Patient Care

Care of the body in relation to health and disease, e.g. bed bathing
Combing the hair—treating verminous head and shampooing the hair
Care of hands, feet, nails, bowels; Positions used in nursing patients

Physical and Mental Well-being

Physical

Food-serving
 feeding (convalescing)
Water storage, sources, purification, etc. and its use in the human body
Air and ventilation—importance to health
Recreation
Rest
Exercise.

Mental

Reassurance of patient
Nursing Assistant/patient relationship on Wards.

Ward Hygiene—Bacteriology Applied

Ward refuse and disposal (dangers associated with dust)
Correct methods of dusting and cleaning furniture, sinks, baths, sluices, toilets
Excreta—prevention of infection
Collection of specimens—urine, faeces, sputum
Bacteria—types, sources
Handling and care and cleansing of equipment and appliances used in hospitals,
e.g., glass instruments, sharp and blunt instruments, rubber goods, enamel ware,
stainless steel and polythene.

Hospital Procedures

Assisting in making special beds and ordinary beds
Care of the convalescent
Use of bed cradles, sand bags, back rests, drainage bottles
Filling and placing hot water bottles
 Danger and precautions in the usage of electric appliances
Verbal report on patients to supervising nurse
Taking temperatures, pulse and respiration
Care of thermometer
Assisting with Oxygen therapy. Recognition of international coding *re* colour of
 cylinders
Soap and water (simple) Enema
Names, strengths, uses:—
 Disinfectants and Antiseptics—precautions to be observed
Poisons and their care—Recognition of poisons
Use, preparation and administration of:—
 (1) Ice Bags
 (2) Fomentations—Kaolin, medical
 (3) Enema tray—preparation
 (4) Prepare shaving tray
 (5) Pressure area treatment
 (6) Mouth tray—washes and gargles
 (7) Moist inhalations.

Observing and reporting the following signs and symptoms of:—

- (1) Diabetic Coma
- (2) Epileptic Fit
- (3) Shock.

Assist with:—

- (1) Tepid sponging
- (2) Last Offices.

Rules and Methods of Administering simple medications:—

Types and upkeep of instruments in common use, including cleansing and sterilization of basic equipment;

Invalid cookery
Infant and Invalid Feeding
Routine urine testing—Lectures and demonstration on albumin, sugar, acetone
Simple dressings—assisting treatment nurse.

August 12, 1968.

THE LAW COMMISSION

(Regulation 75(4))

SIXTH SCHEDULE

THE NURSING COUNCIL OF TRINIDAD AND TOBAGO

TRANSCRIPT FOR COMPULSORY PRACTICAL EXPERIENCE
PRIOR TO ENROLMENT

Name of Training Centre.....

Name of Trainee.....

Period of experience calculated from.....to.....

The following represents *Supervised Practical Experience (in hours)* during the final period of training.

1. Assisting in the care and rehabilitation of patients suffering from:—					
Medical Conditions ...	...	...	...	...	.....
Surgical Conditions	...	...	...	...	.....
2. Assisting in the care and rehabilitation of patients with:—					
Obstetric Conditions	...	...	...	...	.....
Paediatric Conditions	...	...	...	...	.....
Geriatric Conditions	...	...	...	...	.....
Psychiatric Conditions	...	...	...	...	.....
3. Assisting in the following Departments:—					
Out-Patients'	...	...	...	...	.....
Casualty ...	...	...	...	...	.....
4. Community Health—Assisting with:—					
(i) Dispensary Services	...	...	...	...	.....
(ii) Pre-and Post-natal Care	...	...	...	...	.....
(iii) Child Welfare ...	...	...	...	...	.....
(iv) Family Planning	...	...	...	...	.....
(v) Control of Infectious Diseases	...	...	...	...	.....
(vi) Rehabilitation ...	...	...	...	...	.....
5. Assisting with Any Others (to be specified):—					
(i) .....	.....	.....	.....	.....	.....
(ii) .....	.....	.....	.....	.....	.....
(iii) .....	.....	.....	.....	.....	.....
(iv) .....	.....	.....	.....	.....	.....
TOTAL HOURS	...	...	...	...	.....

6. Total experience (theoretical and practical) from Commencement of Training (in hours)=.....

7. Leave taken during Final period of Training:—

Vacation	...	...	.....
Sick	...	...	.....
Other	...	...	.....

TOTAL

I CERTIFY that the experience recorded above has been received by this Applicant in this Training Centre and in institutions approved for offering supervised limited experience, viz:—

.....
.....
.....

Signature of Authority of Centre.....

Title

Date

Made this 12th day of May, 1977.

JEAN N. F. GRAYSON
*President, Nursing Council of Trinidad
Tobago*

Approved this 20th day of June, 1977

KAMALUDDIN MOHAMMED
Minister of Health