



2017 PRESIDENTIAL TEACHING AWARD NOMINEE

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PERSONAL VALUES

Becoming part of the Incarnate Word family was a fortuitous event. I walked in the front door and was greeted like an old friend. People here *want* you to be welcome. They *want* you to fit. Everyone's values and opinions are important on this campus. Everyone's goals are the same: to improve the world around us one small step at a time.

I try to model the same values in my classroom and in my clinical interactions. I model UIW's love for the community and our five tenets: service, education, teaching, faith, and innovation. My students need to see and hear how professional nurses interact in a variety of nursing environments. This is so important to me because the classes I teach are very abstract to nurses. The language used and the theories discussed are not focused on what is considered to be typical nursing skills. I teach students how to lead change processes, how to manage conflict, and how to take ownership of their nursing practice. I value this chance to show them how to love nursing as much as I do, to be passionate about their power to make a difference. Today that difference may be to one specific patient, but tomorrow it could change the way we provide care to *all* our patients. They can do this by leading change processes on their units, by bringing the research to the bedside and changing policies. They can do this by serving the community as an advocate, by paying attention and being informed of legislative changes, and by using their right to vote. I believe in empowering students to stand up for what they believe and to speak for those who can't, and by doing so they lead the decisions that directly affect their families and the community.

GOALS FOR STUDENTS

I have several goals for students in my classes, but most important is they leave able to address concerns in their workplace by leading teams to change them. Many times nurses voice frustration with their work. They have very little authority over their practice environment, but they can work to change the things that cause them frustration (Brown, Wickline, Ecoff, & Glaser, 2009; Van Oostveen, Mathijssen, & Vermeulen, 2015).

Students in my classes spend a significant portion of time seeking out guidance from the literature, gathering data, and developing an evidence-based, cost-effective plan to address the problem. This is so important because we cannot waste time and money on projects that do not address the true cause of the problem and do not include the right people in the planning. Our clinical partners need nurses who are ready to serve as leaders. My goal is to make sure they have the tools they need to transition into that role successfully. This summer I am speaking at the Sigma Theta Tau International Honor Society Research Congress in Dublin, Ireland on my own practice improvement project. I hope to continue using examples like this to show my students they *can* make true and significant changes in their practice areas.

I also want my students to value their roots and remember the mission of UIW. I want them to remember why they chose UIW and what it means to be a UIW nurse. I have great pride in their

accomplishments and even greater faith in their abilities to make the world a better place one patient interaction at a time.

STUDENT ENGAGEMENT AND TEACHING STYLE

If someone were to visit my classroom, they would see a little bit of traditional lecture, a little bit of technology, some interactive group work, and a lot of laughter. I feel strongly that students cannot learn if they are too nervous. I want to be approachable. I do this through humor and personal examples. I try hard to maintain an open-door policy for all students and guests. I believe that a welcoming presence eases tensions, opens doors, and is a small way to honor our mission.

I want students in class and I do whatever I can to keep their interest and to ensure they have access to the tools they need. I encourage those that cannot attend for whatever reason to “pipe in” through the use of technology like Facetime, Skype, or Zoom. I don’t want those that are sick to feel pressured not to meet their own health needs, but I do want them to know they have options if they don’t want to miss. If that means that I set up a separate computer where they can patch in and follow along, then by all means; I want them to be able to join us.

In my classroom, I use many examples from my own experiences in nursing management, some that went well and some that did not. I think this helps students see it is okay to fail. We still learn something and we can continue to improve. I love incorporating technology into the classroom, but sometimes an old-fashioned chalkboard does the trick even better. Drawing out connections between concepts makes a huge difference in helping them understand. Frequently one can find small groups working through a root cause analysis or a case study. Students write out their action plan on large sticky notes around the room. It is wonderful to see them brainstorming and using a variety of tools to work through the problem together. In the last two years, I have received the Med Center Rotary Nurse Excellence Award and the Sigma Theta Tau/Texas Nurses Association District 8 Nightingale Award for my teaching and leadership in nursing at UIW. I was immensely honored to receive them, but truly, my proudest moments are when I see my students present their finished nursing program plans. The work they do is so innovative, and it is exciting to see that our students really do understand what it takes to be a nursing leader.

Ultimately, my teaching philosophy comes down to three things: 1) Be present. 2) Be welcoming. 3) Be a guide. I want to make sure that all people at UIW feel welcome in my classroom and in my work. I want to be available when needed, whether that is for a student, a colleague, or for someone who is lost and trying to find the way around campus. I want to show students nursing can be what they want it to be. If they find themselves in a place where they are discouraged and cannot find their way, I want them to know where to find the light and the direction within themselves to make the changes necessary to improve it. They have the tools. They have the abilities. I have faith in each one of them to use these as they go forward and make a difference.

REFERENCES

- Brown, C. E., Wickline, M. A., Ecoff, L., & Glaser, D. (2009). Nursing practice, knowledge, attitudes, and perceived barriers to evidence-based practice at an academic medical center. *Journal of Advanced Nursing* 65(2), 371-381.
- Van Oostveen, C. J., Mathijssen, E., & Vermeulen, H. (2015). Nurse staffing issues are just the tip of the iceberg: A qualitative study about nurse’ perceptions of nurse staffing. *International Journal of Nursing Studies*, 52, 1300-1309.