My Teaching Philosophy: Changing Healthcare Practice Environments through Inspired Staff and Leadership Development

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There is one single and simple reason for my approach to teaching- high quality compassionate, innovative patient care. It is all about the patient. As an educator of nurses and a change agent of culture, I understand that everything that I do ultimately reaches the bedside and impacts the quality of the care, the way in which we deliver the care, and the physical and emotional state of the patient. This is my source of motivation for striving to support healthy work environments, highly educated and skilled nurses, a service excellence culture that respects patient perspectives, and effective communication among interdisciplinary team members. Engaging staff at all levels of the organization in self-reflection and performance improvement efforts while embracing a changing healthcare system is not without barriers. I have identified four values statements that assist me in staying focused and drive my organizational development strategies.

The four core values that are foundational to my approach to teaching and all interaction with humans are respect, trust, communication, and quality. All human beings deserve respect. Regarding one another as esteemed members of a community is necessary for all other effective interaction. Inherent in this value is appreciation of differences, acceptance of unique perspectives and regard for learning. Trust implies an expectation that individuals have confidence in one another. I believe in vulnerability based trust in education. Everyone makes mistakes. Forthcoming sharing of experiences and challenges creates an environment in which the learner can be honest about their needs without fear of losing respect. Role modeling trust is an essential part of being an effective educator, for it is through this learning process that learners recognize how to be trustworthy and extend this value to others. Communication is the source of all connection and communion between people. Open, two-way communication provides the link that enables the building of relationships. Once a therapeutic relationship is developed, it fosters trust, provides for sharing of valuable information and builds effective teams who learn together. Quality is essential for everything that we wish to do well, however, I value quality as it relates to the quintessential character of human beings; our individuality, the substance, the virtue that makes us each uniquely valuable. As educators it is our responsibility to present nursing professionally, with integrity and acknowledgement of the contributions nursing brings to healthcare. Nursing research is an essential component of advancing healthcare quality and the professional practice of nurses. Healthcare providers who embody these values in education and collaboration with other disciplines support environments where patient care is exceptional and the work place is harmonious and rewarding.

This approach to teaching lends itself nicely to the cognitive development theory of learning. Cognitive learning theory presumes that the key to learning is changing the way the learner perceives, thinks, remembers and processes information that is meaningful to them in their environment (Bastable, 2014). Such aspects as past experiences, social influences, diversity and expectations influence the learner and must be a consideration by the teacher. A nurse educator in staff development faces four generations of workers, changing government regulations, myriad of interdisciplinary relationships, and patients and families with increased knowledge and involvement in care decisions. Applying cognitive theory allows for each of the individual’s unique perspectives to be considered when education is desired to be effective and received well by all involved.

Designing specific teaching strategies for staff development, utilizing cognitive theory, allows for the application of many different models and frameworks- even those that are not found in cognitive theory. The tenet being that all learners are unique, one strategy does not apply to all. I tend toward utilizing Patricia Benner’s Novice to Expert model for new graduate nurses. I also like Eric Erikson’s eight stages of growth and development which supports cognitive development theory as it enables the learner to think and perceive differently as they progress as learners, a gestalt perspective. Maslow’s hierarchy of needs is also a personal favorite. I find these all useful because they all recognize that certain foundational needs must be met before learners can progress. The way each learner responds to their environment is unique to them, thus creating their own value system as they learn.

Learning is a very personal and intimate experience for me. The relationship between teacher and student is one that I regard highly, as I described using the four value statements. I learn best through interaction with others and the environment. I believe in cooperative and collaborative learning built upon strong values and mutual purpose. I am intrinsically motivated and work best with others who share the same perspective. I recognize that I will not always have learners who share my same values, however, I am accepting and generous enough to not allow that to be a barrier to effective sharing of information.

I am honored to have the opportunity to influence change both in individuals and in groups where culture is shaped as a result of collaborative exploration and learning. I believe that these efforts ultimately impact the patients that we serve in very meaningful and positive ways, leaving a lasting legacy for the nursing profession.

References

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