

**Nurse as Educator:
Principles of Teaching
and Learning for
Nursing Practice,
Second Edition**

Susan B. Bastable

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Nurse as Educator

Principles of Teaching and Learning for Nursing Practice

Second Edition

Susan B. Bastable

State University of New York



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Dedication

*To the past, present, and future nursing students in my Nurse As
Educator course,*

and

*In memory of Dr. Stephen Bastable, who never failed to express his
obvious pride in my professional endeavors.*

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Foreword

American nursing's pivotal role in the health education of the community is rooted in the history of nursing practice and the social and temporal context of which it was a part. Long before the preparation of nurses took place in institutions of higher education, nursing evolved into a practice that included teaching and demonstrating healthcare actions to patients, their families, other healthcare workers, and the community at large. This historical precedent is most vividly demonstrated by the history of public health and of visiting nurses and through the vast wealth of data that exists about the health needs of diverse cultural groups who emigrated to this country at the end of the nineteenth century up to the present day. It is reflected in the experience of nurses at home and abroad during two world wars and their aftermath, other military conflicts, dramatic social movements, and scientific breakthroughs. These events resulted in a heightened need for consumer education and the participation of people in their own health decision making and care. Nurses responded to this need by becoming educators of the community.

Today, education of the community about health promotion, wellness, and illness is recognized as an essential component of nursing practice. There has been continuous development and emphasis on the leadership role of nurses in this arena over the last century, as evidenced by the focus on patient teaching and the increasing sophistication of health consumers as full participants in decision making. Another dimension relates to the public's increasing conversance with healthcare policy and the effect of changes in health delivery and financing that affect all members of society as citizens and consumers.

Nurse as Educator: Principles of Teaching and Learning, first published in 1997, represented a response to the need to prepare nurses for their educative roles commensurate with the changing healthcare scene and the emergence of a technological age that supports greater access to health information. The quality of substantive information included a balanced treatment of theory and application, which enhanced nurses' ability to meet the challenges confronting the profession and addressed strategies for promoting the health of the community. The response to this award-winning book has already contributed significantly to the professional healthcare literature and the text is acknowledged as an exemplary work of scholarship.

This second edition of *Nurse as Educator* increases the value of the original work in several important ways. A significant change is the refocus of the teaching-learning process to place primary emphasis on the learner as an active participant and the nurse as the enabler, resource person, and mentor. Another enhancement is the inclusion of important content about technology and the ways that it supports the education of the public about health care. The role of the nurse in the design of learning experiences for consumers that can be supported by state-of-the-art technology is a well-developed theme. A third major emphasis and enhancement in this new edition is increased attention to outcomes as the basis for evaluation of the teaching-learning experience and improvement in patient care.

Nurse as Educator reflects the knowledge, expertise, and experience of its contributors as well as their insights into contemporary and future challenges that nurses face as primary healthcare educators in the community. The book meets a compelling need to continue to prepare nurses for leadership in making health concerns a public priority.

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Preface

Educating others, whether the learners are patients and their families, fellow staff nurses, or nursing students, has been a professional responsibility of registered nurses at all levels of education for many years. It is the aim of nurses to assist patients, well or ill, to become independent in managing their own health and to help our fellow colleagues and future nurses to deliver the highest possible quality of health care to those whom we serve.

Although nurses recognize their legal, ethical, and moral responsibility to teach clients, colleagues, and prospective nurses, most of us acknowledge that we have not had the formal preparation to successfully and securely assume this role. It is imperative that nurses be prepared to carry out their role as educators competently and confidently, based on a solid understanding of the principles of teaching and learning. In today's healthcare arena, the unique holistic perspective of nursing practice mandates that nurses possess the knowledge and skills necessary to educate various audiences in a variety of settings with efficiency and effectiveness.

This text is intended to be a primary resource for graduate students, upper-level undergraduates, and professional nurses for whom the role of educator is an essential component of practice. It is designed to help them become proficient in educating others, taking into consideration the basic foundations of the education process, the needs and characteristics of the learner, and the appropriate instructional techniques and strategies for teaching and learning.

This second edition provides many new features that reflect a balance between current theoretical perspectives in the field and the application of these theories to practice. There is an increased emphasis on the nurse functioning as a "guide by the side" and as a "facilitator" of learning, rather than serving in the traditional role as primarily the "giver of information." With respect to patients as a population of learners, there is a noticeable shift in focus in this text from teaching those who are ill to teaching clients to maintain optimal health and prevent disease. Some of the significant revisions and additions to this second edition, based on the expertise of each contributor and suggestions of external reviewers, follow.

New to this edition is a chapter on Technology in Education (Chapter 13), written by an expert in computers and distance education, that describes the impact of technology on the teacher and the learner, the latest technological strategies available to the nurse educator, and the issues related to the use of technology in

patient and professional education. It is a very readable chapter, even for those who are novices in the application of computers for teaching and learning.

Chapter 1 emphasizes the new educational paradigm of partnership in the teaching and learning process. Chapter 2 places a greater emphasis on cost analysis and cost effectiveness of educational programs. The perspectives of social cognition and social constructivism have been added to Chapter 3 as an update on the latest information about two increasingly popular orientations of cognitive learning theory. Chapter 4 addresses the Chronic Illness Model and the novice-to-expert concept. Chapter 5 offers new perspectives on andragogy and a discussion of the myths of ageism. Chapter 6 highlights Prochaska's Stages of Change Model. Chapter 7 includes a new emphasis on health literacy. Chapter 8 contains the latest neuroscience research on gender-related cognitive abilities in learning, an expansion on the teaching strategies specific to Black Americans as one of the four major cultural groups, ways to prepare nurses for diversity care, new terms related to cultural care, and the meaning and risks of stereotyping and ways to avoid it. Chapter 9 addresses the most current information on adaptive technologies for special populations and innovative teaching approaches to be used with clients with mental illness. Chapter 10 covers the concept of the learning curve, an old idea in business and industry with a new application to the achievement-of-learner outcomes in nursing practice. Chapters 11 and 12 have updated information on instructional methods and materials. Chapter 13 is completely new content as described previously, and Chapter 14 expands on the discussion of healthcare-related settings. Finally, Chapter 15 looks at pluralistic designs and the fourth-generation approach to evaluation.

An Instructor's Manual to accompany the second edition of this text is now available as a resource for faculty. It contains multiple choice and essay test items, learning activities, and instructional materials, including PowerPoint slides, for each chapter. In addition, a number of review questions appear at the end of every chapter to assist the student in focusing on the important content elements in each chapter. Also, many new terms have been added to the original glossary to correspond to the revisions and additions made throughout the text. The Instructor's Manual, the glossary, and the chapter review question sections are unique features of this book in comparison to other textbooks in the field of patient and staff education.

This second edition of *Nurse as Educator* is a comprehensive coverage, both in scope and depth, of the essential components of the education process and the principles of teaching and learning. It considers all the important attributes of the learner and the many aspects of the teaching role in nursing practice. Although this text focuses particularly on patient education, almost all of the chapters contain theory that is relevant, useful, and applicable to a diverse audience of learners. Thus, whoever the learner may be, this text serves as a resource for understanding the basics of teaching and learning to help nurses successfully implement their role as educators.

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To the staff and faculty at my College of Nursing, I wish to extend the utmost gratitude for their interest, flexibility, and support throughout every step of the publication process.

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PART I

Perspectives
on Teaching
and Learning

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CHAPTER 1

Overview of Education in Health Care

Susan B. Bastable

CHAPTER HIGHLIGHTS

Historical Foundations for the Teaching Role of Nurses

Social, Economic, and Political Trends Affecting Health Care

Purpose, Benefits, and Goals of Patient and Staff Education

The Education Process Defined

Role of the Nurse as Educator

Barriers to Education and Obstacles to Learning

Barriers to Education

Obstacles to Learning

Perspectives on Research in Patient and Staff Education

Questions to Be Asked Regarding the Delivery of Educational Services

KEY TERMS

education process

teaching

instruction

learning

patient education

staff education

barriers to education

obstacles to learning

OBJECTIVES

After completing this chapter, the reader will be able to

1. Discuss the evolution of the teaching role of nurses.
2. Recognize trends affecting the healthcare system in general and nursing practice in particular.
3. Identify the purpose, benefits, and goals of patient and staff education.
4. Compare and contrast the education process to the nursing process.
5. Define the terms *teaching* and *learning*.
6. Identify reasons why patient and staff education is an important duty for professional nurses.
7. Discuss barriers to education and obstacles to learning.
8. Formulate questions that nurses in the role of educator should ask about the teaching–learning process.

Education in health care today—both patient education and nursing staff/student education—is a topic of utmost interest in every setting in which nurses practice. The current trends in health care are making it imperative that patients and their families be prepared to assume responsibility for self-care management. Also, these trends make it essential that nurses in the workplace be accountable for the delivery of high-quality care. The focus is on outcomes—whether it be that the patient and his or her family have learned essential knowledge and skills for independent care or that staff nurses and nursing students have acquired the up-to-date knowledge and skills needed to competently and confidently render care to the consumer in a variety of settings. The need for nurses to teach others and to help others learn will continue to increase in this era of healthcare reform. With changes rapidly forthcoming in the system of health care, nurses will find themselves in increasingly demanding, constantly fluctuating, and highly complex positions (Jorgensen, 1994). It is necessary for nurses in the role of educators to understand the forces, both historical and present-day, that have influenced and continue to influence their responsibilities in practice, with teaching being a major aspect of the nurse's professional role.

One purpose of this chapter is to shed light on the historical evolution of teaching as part of the professional nurse's role. Another purpose of this chapter is to offer a perspective on the current trends in health care making patient teaching a highly visible and required function of nursing care delivery. Also addressed are the continuing education efforts required to ensure ongoing practice competencies of nursing personnel. In addition, this chapter clarifies the broad purposes, benefits, and goals of the teaching-learning process, focuses on the philosophy of the nurse-patient partnership in teaching and learning, compares the education process to

the nursing process, identifies barriers to teaching and learning, and highlights the status of research in the field of patient as well as staff education. The focus is on the overall role of the nurse in teaching and learning, no matter who the audience of learners may be. Nurses must have a basic prerequisite understanding of the principles, practice, and process of teaching and learning to carry out their professional responsibilities with efficiency and effectiveness.

HISTORICAL FOUNDATIONS FOR THE TEACHING ROLE OF NURSES

Patient education has long been considered a major component in the repertoire of standard care-giving by the nurse. The role of the nurse as educator is deeply entrenched in the heritage and development of the profession. Since the mid-1800s, when nursing was first acknowledged as a unique discipline, the responsibility for teaching has been recognized as an important healthcare initiative assumed by nurses. The focus of teaching efforts by nurses was not only on the care of the sick, but also on educating other nurses for professional practice.

Florence Nightingale, the founder of modern nursing, was the ultimate educator. Not only did she develop the first school of nursing, but she also devoted a large portion of her career to educating those involved in the delivery of health care. Nightingale taught nurses, physicians, and health officials about the importance of proper conditions in hospitals and homes to assist patients in maintaining adequate nutrition, fresh air, exercise, and personal hygiene to improve their well-being. By the early 1900s, public health nurses in this country clearly understood the significance of education in the prevention of disease and in the maintenance of health (Chachkes & Christ, 1996).

For decades, then, patient teaching has been recognized as an independent nursing function. Nurses have always educated others—patients, families, and colleagues—and it is from these roots that nurses have expanded their practice to include the broader concepts of health and illness (Glanville, 2000).

As early as 1918, the National League of Nursing Education (NLNE) in the United States [now the National League for Nursing (NLN)] observed the importance of health teaching as a function within the scope of nursing practice. This organization recognized the responsibility of nurses for the promotion of health and the prevention of illness in such settings as schools, homes, hospitals, and industries. Two decades later, the NLNE declared that a nurse was fundamentally a teacher and an agent of health regardless of the setting in which practice occurred (National League of Nursing Education, 1937). By 1950, the NLNE had identified course content dealing with teaching skills, developmental and educational psychology, and principles of the educational process of teaching and learning as areas in the curriculum common to all nursing schools (Redman, 1993). The implication was that nurses were to be prepared, upon graduation from their basic nursing program, to assume the role as teacher of others. The American Nurses Association has for years promulgated statements on the functions, standards, and qualifications for nursing practice, of which patient teaching is an integral aspect. In addition, the International Council of Nurses has long endorsed education for health as an essential requisite of nursing care delivery.

Today, state nurse practice acts (NPs) universally include teaching within the scope of nursing practice responsibilities. Nurses are expected to provide instruction to consumers to assist them to maintain optimal levels of wellness, prevent disease, manage illness, and develop skills to give supportive care to family members. Nursing career ladders often incorporate teaching effectiveness as a meas-

ure of excellence in practice (Rifas et al., 1994). The more recent development of clinical pathways, also referred to as critical pathways, has led to a popular, multidisciplinary approach to delineating predetermined client outcomes that are used to measure patient adherence to pathway expectations. Nurses are in the forefront of innovative strategies for the delivery of patient care. The teaching of patients and families as well as healthcare personnel is the means to accomplish the professional goals of providing cost-effective, safe, and high-quality care.

In recognition of the importance of patient education by nurses, the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) delineated nursing standards for patient education as early as 1993. These standards, which take the form of mandates, are based on descriptions of positive outcomes of patient care. They are to be met through teaching activities by nurses that must be patient- and family-oriented. Required accreditation standards have provided the impetus for nursing service managers to put greater emphasis on unit-based clinical education activities for staff to improve nursing interventions relating to patient education for the achievement of these client outcomes (McGoldrick et al., 1994).

More recently, JCAHO has expanded its expectations to include an interdisciplinary team approach in the provision of patient education as well as evidence that patients and their significant others understand what they have been taught. This requirement means that providers must consider the literacy level, educational background, language skills, and culture of every client during the education process (Davidhizar & Brownson, 1999). In addition, the Patient's Bill of Rights, first developed in the 1970s by the American Hospital Association and adopted by hospitals nationwide, has established the rights of patients to receive complete and current information concerning diagnosis, treatment, and

prognosis in terms they can reasonably be expected to understand.

In 1995, the Pew Health Professions Commission, influenced by the dramatic changes currently surrounding health care, published a broad set of competencies that it believes will mark the success of the health professions in the twenty-first century. Most recently, the Commission (1998) released a fourth report as a follow-up on health professional practice in the new millennium. Numerous recommendations to the health professions have been proposed by the Commission. More than one-half of them pertain to the importance of patient and staff education and to the role of the nurse as educator. Among the recommendations, the Commission has addressed the need to:

- Provide clinically competent and coordinated care to the public
- Involve patients and their families in the decision-making process regarding health interventions
- Provide clients with education and counseling on ethical issues
- Expand public access to effective care
- Ensure cost-effective and appropriate care for the consumer
- Provide for prevention of illness and promotion of healthy lifestyles for all Americans

Accomplishing the goals and meeting the expectations of these organizations calls for a redirection of education efforts. Over time, the role of the nurse as educator has undergone a paradigm shift. In patient education, the provider teaching role has evolved from what once was a disease-oriented approach to a more prevention-oriented approach. Now and in the future, the focus will be on teaching for the promotion and maintenance of health. Since the 1980s, greater recognition has been given to client education as a healthcare activity. Once done as part of discharge plans at the end of hospitalization, patient education

efforts have expanded to become integrated into a comprehensive plan of care that occurs throughout the healthcare delivery process (Davidhizar & Brownson, 1999). As described by Grueninger (1995), this transition toward wellness has entailed a progression “from disease-oriented patient education (DOPE) to prevention-oriented patient education (POPE) to ultimately become health-oriented patient education (HOPE)” (p. 53). This metamorphosis has changed the role of educator from one of wise healer to expert advisor/teacher to facilitator of change. Instead of the traditional aim of simply imparting information, the emphasis is now on empowering patients to use their potentials, abilities, and resources to the fullest (Glanville, 2000). Presently, the demand for nurses in the role of educators of patients, their families, and the general public is rapidly accelerating.

Also, the role of today’s educator is one of “training the trainer”—that is, preparing nursing staff through continuing education, in-service programs, and staff development to maintain and improve their clinical skills and teaching abilities. The key to the success of our profession is for nurses to teach other nurses. We are the primary educators of our fellow colleagues and other healthcare staff personnel. In addition, the demand for educators of nursing students is at an all-time high. It is essential that professional nurses be prepared to effectively perform teaching services that meet the needs of many individuals and groups in different circumstances across a variety of practice settings.

SOCIAL, ECONOMIC, AND POLITICAL TRENDS AFFECTING HEALTH CARE

In addition to the professional and legal standards put forth by various organizations and agencies, there has arisen an increasing emphasis on nurses’ potential role in teaching activities as a result of social, economic, and