2017

Lost in Translation: Infusing Ignatian Pedagogy in On-Line Undergraduate Nursing Program

Jorgia Connor
Loyola University Chicago, jconnor3@luc.edu

Joanne Dunderdale
Loyola University Chicago, jdunderdale@luc.edu

Tavis D. Jules
Loyola University Chicago, tjules@luc.edu

Patty Stapleton
Loyola University Chicago, pstapleton@luc.edu

Recommended Citation
https://ecommons.luc.edu/ignatianpedagogy_er/7

This Course Material is brought to you for free and open access by Loyola eCommons. It has been accepted for inclusion in Ignatian Pedagogy Educational Resources by an authorized administrator of Loyola eCommons. For more information, please contact ecommons@luc.edu.

This work is licensed under a Creative Commons Attribution-Noncommercial-No Derivative Works 3.0 License.
© The Authors 2017
Lost in Translation: Infusing Ignatian Pedagogy in
On-Line Undergraduate Nursing Program

Jorgia Connor, Joanne Dunderdale, Tavis Jules, Patty Stapleton
Lost in Translation: Infusing Ignatian Pedagogy in On-Line Undergraduate Nursing Program

The final project sought to better integrate Ignatian Pedagogy Paradigm (IPP) into online teaching in a hybrid environment. In doing this, the aim was to find ways in which online teaching could be more reflective across the five domains (context, experience, reflection, action, and evaluation) of IPP. As such, our aim was the movement away from a “banking model” of online education to one that engenders a deeper praxis for both facilitator and student. In using the undergraduate Nursing Program as an example, in what follows we demonstrate how one might go about infusing IPP into a new hybrid program that has to account for Theory, Simulation, and Clinical pedagogical aspects.

Our starting point for the infusing of Ignatian Pedagogy (IP) into the online nursing education commences with our understanding that reflection needs to occur between facilitator and student. Our thinking has been guided by the fact that the existent research often suggests more emphasis on one self-reflectivity for either the student or the instructor. However, we want to suggest that in an online setting, reflection needs to be both central to student and facilitator. In reflecting on the role of domains of IP and their ability to provide transformative learning in a hybrid setting, or focus is on how nursing students, after experiencing Theory, Simulation, and Clinical can then enact the characteristics of these domains into their lives and praxis of care for others in their respective specializations. However, we take a step further, by encouraging the facilitator to reflect on the value of the teaching, its relationship to the profession, and potential implications. Of course, students are asked to do these a well, but our aim here is to make this a holistic endeavor for both student and facilitator. As the facilitator revisits content to be taught, the aim is on deepening own’s self-awareness while paying attention to alternative responses.
with the aim of critically engaging and challenging the student in Theoretical, Simulation, and Clinical aspects of the program.

**Using IP to Guide Reflections in the Theory Portion of a Hybrid Course**

Higher education is being delivered in an increasingly technological and mission driven format. Even the pre-licensure level of nursing education is affected. Hybrid programs are being offered as an attractive option for second-degree students who seek to earn a Baccalaureate degree in Nursing (BSN) at an accelerated pace (e.g. 3 semesters as compared to the traditional 4-year track). While there is little doubt that content can be delivered effectively in an on-line environment, the concern is how to assure that we provide transformative education. As we have learned from this program, “education is not education for understanding alone; it is preparation for ‘good work’” (as cited in Mountin and Nowacek, 2012). A major outcome of our program is to develop the students’ ability to critically think and make good and safe clinical judgments. It is also imperative that students learn to advocate for their patients, families, and the profession itself. All of this required depth and creativity in thinking, which can be lost in the on-line world.

In the older adult course that is being converted to on-line, we have incorporated case studies which are to be discussed in small groups in the hopes to engage the students in some dialogue. We have also incorporated reflection exercises throughout the course in order to engage the students in self-awareness about their own thoughts, feelings, attitudes, and biases about a number of concepts or topics. There are two issues that arise with reflections from the student side, as well as the instructor side. Unfortunately, the reflections tend to be shallow and fall short of in-depth analysis of how or what they learn, feel, think etc. The second challenge to address is how the faculty evaluates the reflection activity. Buxton and Ellison (2015) used an approach for guided reflections while blogging. The new approach will be to use a blog format in
replacement of traditional written reflection papers in order to “break the boundaries and allow for openness and honesty.” Rather than individual reflections and discussion postings, we would try to implement using the same blog to respond to the prompts throughout the course. Using the blogging format rather than the traditional reflection activity or paper may also help the students think more critically because they can revisit their posts and think about reflect their growth and transformation.

Buxton and Ellison (2015) also suggested a grading rubric to evaluate aspects of personal and professional growth, academic and civil engagement. These critical aspects were aligned with the IP principles. For example, Academic Enhancement Lens is a critical aspect and the student is asked to compare and contrast their initial understanding of the content and their experience of using it; this is aligned with the IP principle of Experience and students are asked how the class experience transformed their paradigm and practice. This rubric allows the student and faculty to view the experience related to the assignment more deeply with critical thinking.

**Using IP in Simulation Portion of the Hybrid Course**

The School of Nursing uses simulation as a teaching strategy to promote learning in a low-risk environment. It is not an evaluation method of the student’s performance and its purpose is to be a bridge from theory to clinical practice, where students are able to apply what they have learned from theory in a psychologically safe environment. The IP principles that are used in simulation include *context* in that we meet students where they are at – it’s an opportunity to facilitate student engagement and foster their learning in a nurturing, non-threatening environment in which the student feels safe to speak up, share thoughts, and take risks without fear of embarrassment. We begin the simulation by talking about Loyola’s mission and values. We discuss the Legend of the Wolf and Kettle and discuss how St. Ignatius and the Ignatius family history of generosity aligns
with the vocation of nursing. We include an overview of how Cura Personalis and Magis aligns with being a Loyola nurse.

Simulation also aligns with the IP principle, *experience* and *action*. After the overview, the students are given a scenario based on real patient situations. The case is unfolding and outcomes for the patient and nurses are dependent on the nurses’ actions in response to the patient’s condition. The most significant aspect of simulation is the debriefing period. This portion of the day is when the students are able to reflect. We utilize the Loyola Model of debriefing, the I-HEART Model which incorporates the values that are particular to Loyola. The acronym stands for: I-Introduction; H: “How do the students feel”; E: Reflect on how the student Engaged the human spirit/spirituality; A: Acknowledge priorities of care; R: Reflection on learning outcomes; T: Take-aways or lessons learned from caring for this person. This model of debriefing removes the emphasis on the medical aspect the scenario and assures that as nurses, we also need to treat the body-mind-spirit.

**Clinical Experience in the Hybrid Program**

The clinical experience is inherent to nursing education. Even in a hybrid program, it must be incorporated. The challenge is how to ensure that the clinical faculty, who are mostly adjunct or part-time, incorporate the Loyola values and help the students in their transformation. Clinical faculty must understand that Loyola nursing education involves more than the learning how to do skills and provide safe and effective care, although this is essential, but our goal and responsibilities as instructors is to also ensure that students become good nurses and good citizens. The Jesuit teaching combines human reason and humanism and the clinical experience also needs to touch the students’ hearts. Students have to be creative in finding innovative ways to care for their patients and this is a skill that must be addressed and incorporated into
evaluation of the students. Instructors also need to take every opportunity to teach students what it means to be a patient advocate. Part of this project involves development of adjunct and part-time faculty about IP so that they can incorporate this in their teaching. Additional strategies that are imperative and align with Jesuit values include engaging with their students, setting a good example, having patience and compassion to their students and role modeling this behavior, understanding that the students are novices and setting their expectations appropriately.

The clinical experience addresses four IP principles: experience, reflection, action, and evaluation. Experience translates to the clinical day and the faculty’s challenge is to create clinical opportunities throughout the day to incorporate Ignatian principles, particularly spirituality and treating the human spirit. All too often, instructors focus on the skills and tasks and forget the spiritual needs of the patient and their families. Reflection provides an opportunity for students to give thoughtful consideration to the meaning of their day. Reflection is done through journaling assignments and is best when faculty provides prompts. As discussed in the theory section, a change in teaching strategy that may be proposed is for students to keep an ongoing or unfolding blog (privately between student and faculty to maintain confidentiality) to promote more in-depth contemplation about their growth and development. Action is exhibited in the way that students relate to patients, staff and their colleagues therefore, instructors must evaluate and model good interpersonal skills. Evaluation is a principle that is applied throughout the day and with every action and interaction, however, during the post-conference, faculty can incorporate the Jesuit value of finding God in all things. Instructors can encourage the use of Examen practice to train the students to reflect on their day by using all of their senses with the goal of examining how they can do better, where could they have responded differently and how will they be responsive to those around them the next time.
Implications, Outcomes, and Future Application

Jesuit values are what make Loyola nurses different from other nurses. Students have expressed that they chose to go to Loyola University Chicago – Marcella Niehoff School of Nursing (MNSON) because of their reputation for the excellent quality of the nurses who graduate from this program. Time and again, we hear from managers, leaders, and colleagues from institutions across the nation that there is something very special in the way that graduates from the MNSON approach the way they care for their patients and families. Ensuring that we continue to instill the Jesuit values and Ignatian approach to patient care and nursing practice as a whole is vital regardless of the program track (traditional 4-year face-to-face, accelerated face to face or hybrid). Our project and what we proposed as strategies to infuse IP in a hybrid program is only the start and we hope to continue the conversation about infusing IP in all the courses taught in the on-line/hybrid program.

The application of the strategies that we discussed has applicability in all on-line and hybrid education programs. While clinical experiences is specific to disciplines providing patient care, this is our exemplar for the IP principle of Action and Experience. Simulation is also something that can be applied to other disciplines and the principles that we outlined can be incorporated in many fields of study.

The next challenge is to determine if these approaches actually change the way a student thinks or practices in the long-term. Future endeavors should explore how to measure or evaluate transformation.
References


Sterling, VA: Stylus Publishing.