## **CANDIDATE'S STATEMENT**

Teaching is my declared area of excellence. I am committed to the continued enhancement of nursing and health professions education at local, regional, national, and international levels. As a faculty member in the School of Nursing and Director of the Center for Research in Nursing Education at Indiana University, Indianapolis, I enact this commitment by using my knowledge, experience, and scholarship in teaching students aspiring to become nursing educators and scholars; expanding my program of pedagogical research; mentoring practicing teachers seeking to enact new, research-based pedagogies or to study the effects of their efforts; and leading national initiatives directed toward transforming nursing and health professions education.

## **TEACHING**

My teaching philosophy reflects my commitment to enact reform in nursing education using new, research-based pedagogies and the IUPUI Principles of Graduate and Professional Learning (PCPLs). This philosophy has guided my teaching practice in nursing clinical and didactic, web-based and hybrid; undergraduate, graduate, and doctoral courses; research and faculty development institutes; and continuing education offerings. My major area of teaching responsibility at IUSON is in the nursing education track in the graduate program. Enacting new pedagogies in the courses I teach, and consistent with the PGPLs I strive to consistently improve how students engage with a course, learn to think critically and from multiple perspectives (e.g., critical, feminist, postmodern, phenomenological), and experience learning as a community (not just an individual) accomplishment. I believe that students can't just hear about the need to transform nursing education. By experiencing new pedagogies as students they are more empowered to take the risks needed to change how they think about teaching in order to better prepare future generations of nurses for practice.

Over the past 5 years, I have taught 172 graduate/doctoral students in at least 1 nursing education course. Taking into consideration that each graduate interfaces with approximately 50 students (or clinicians in health care settings) per year, my students teach at least 8600 students each year. Student evaluations of my teaching have been excellent, with an average rating of 4.7 on a 5-point scale over the past 5 years. At national and international levels, my excellence in teaching and pedagogical research have been widely recognized, including such honors as a) selection as a member of the National Advisory Council for the Robert Wood Johnson Foundation's initiative, *Evaluating Innovations in Nursing*; b) fellowship in two prestigious academies recognizing contribution to the discipline; and c) awards for advancing the pedagogical knowledge of the discipline. I was also an invited member of the international colloquium convened by the Health Foundation in London, England. During this colloquium I presented my pedagogical research and worked with an interdisciplinary group of scholars to re-vision education in the health professions to better promote quality and safety in practice (Cook, Ironside, Ogrinc, 2011). I was the only nurse invited to participate in this colloquium.

I have sustained a program of funded pedagogical research investigating a) how nursing teachers enact (and students experience) new, research-based pedagogies; b) how pedagogical reform impacts students' thinking, safety, and readiness for practice; and c) how students and teachers experience clinical education. This research has been consistently funded and findings widely disseminated. My publications have been cited 266 times<sup>1</sup> in journals ranked by ISI and frequently in non-ranked teaching journals. Over the course of my career, I have

<sup>&</sup>lt;sup>1</sup> Data related to impact factors and rankings collected June 6, 2011.

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consistently published in top-ranked nursing journals. I have also published extensively in *Nursing Education Perspectives*. Although this journal is not currently ranked, it has a readership of more than 25,000 nursing educators, so publishing in this journal facilitates rapid dissemination and puts research findings right in the hands of practicing teachers who may be less likely to read research journals. While in rank, I have also disseminated my work widely through refereed and invited presentations, including 20 keynotes, 17 refereed papers and 41 workshops, symposia, posters or plenary sessions.

Though productivity is important in judging the contribution my work makes to the field of nursing, the impact of my work is best seen in how it is actually being used by schools of nursing. Most notably, I have taken a nascent, research-based pedagogy (narrative pedagogy) and developed it into a practical approach teachers can use to respond to national calls to transform nursing education. For example, since 2003 I have worked with pilot schools of nursing across the country committed to using narrative pedagogy in their schools. This work has been very successful as evidenced by 2 pilot schools being designated National League for Nursing (NLN) Centers of Excellence and pilot school faculty publications and refereed presentations disseminating this work.

I am recognized as a leader in innovation and research at regional, national, and international levels. I have been a constant advocate for building the science of nursing education and remain one of a very small cadre of scholars nationally with a program of research focused entirely on nursing education. I have consulted with schools of nursing, and with teachers and doctoral students seeking to enact pedagogical reform, to develop their scholarship in teaching and learning, or to improve their teaching. The impact of these efforts is evident in my invited presentations at prestigious events such as the American Association of Colleges of Nursing Conferences; the Institute for Healthcare Improvement's Leadership Development Summer Symposium (international, interdisciplinary); and the international, interdisciplinary colloquium, A Deep Exploration of the Epistemologies Underlying the Improvement of Health and the Quality and Safety of Healthcare in London. I have also been an invited member of four different NLN think tanks respectively devoted to exploring a) graduate education for the teaching role in nursing, b) standards in nursing education, c) clinical education in nursing, and d) nursing education research. I was the co-chair of the think tank on clinical education. Locally, I have demonstrated leadership in the scholarship of teaching and learning through the provision of faculty workshops and service activities (e.g.: Advisory Board for the IUPUI Center for Teaching and Learning).

I have been a pedagogical expert on the Quality and Safety Education for Nurses (QSEN) initiative since it began in 2005. In this capacity I have (a) assisted with the delineation of quality and safety competencies, (b) contributed to an open repository for teaching strategies, and (c) authored/edited a series of online modules. This initiative has been enormously effective. For example, between November 2009 and November 2010 the QSEN site had 5,148,515 hits averaging 14,105 per day. At the IUSON I serve in an advisory capacity to faculty working to integrate QSEN competencies into their courses and have mentored clinical faculty undertaking a study to determine if team-based learning improves students' achievement of the QSEN teamwork/collaboration competency.

To continue my development I participate in a wide variety of activities (e.g., Faculty Learning Community on Technology, Assessment Institute, and Institute for Healthcare Improvement's Health Professions Education Consortium). I attend the NLN Education Summit each fall. I also participate in activities that help me maintain my passion for teaching amid the competing demands of academic life such as the Courage to Lead series and the Relationship Centered Care Initiative, both interdisciplinary gatherings sponsored by the IU School of Medicine.

# **RESEARCH**

The primary long-term goals of my research are to better understand and develop knowledge related to a) how nursing teachers enact (and students experience) new, researchbased pedagogies; b) how pedagogical reform impacts students' thinking, safety, and readiness for practice; and c) how students and teachers experience clinical education. I have worked diligently to seamlessly integrate my teaching and scholarship. This trajectory began in 2002 when I used narrative pedagogy to design a 2-semester research course sequence in the graduate program for nursing students that began with students investigating the question: "How do we, as nurses, know we are studying what clients need us to study?" Investigating this question created new partnerships among teachers, students, and area citizens as we together a) designed a study to be collaboratively conducted, b) obtained IRB approval, c) collected and analyzed data, and d) disseminated results via publication in a refereed, interdisciplinary research journal (Ironside et al., 2003) and presentation at a national, refereed conference. This was the first time this nascent pedagogy had been used in this way and studied as the changes were occurring. This study contributed to a) the educational literature by describing how narrative pedagogy could be used to transform graduate nursing research courses, and b) the research literature describing the experience of people with chronic illness. This work also challenged the assumption that students and citizens are not interested in or capable of participating in pedagogical reform and research. Similarly, working with a new investigator at a small private college seeking to understand the meaning prelicensure students find in "making a difference" to a patient, I learned a great deal about how pedagogical practices impact the tacit skills of nursing (such as listening to and connecting with patients) and how we can improve our teaching by making students our pedagogical partners (Ironside, Diekelmann, & Hirschmann, 2005 a,b).

These insights formed an important background for my subsequent work (2005 to present) with the Quality and Safety for Nursing Education project (QSEN) in which I work with teachers nationally to create more effective ways to prepare students for patient-centered care (practices that require partnering with patients/citizens, listening, connecting, making a difference, etc.). As I have worked with teachers nationally and internationally in the QSEN and Narrative Pedagogy Projects, I have learned a great deal about the challenges of teaching a clinical practice in which the teacher must keep both the student and the patient safe from errors. Thus, I began a trajectory of study focusing on clinical nursing education to better understand the learning that occurs during clinical experiences (versus what we assume occurs by mere exposure to a clinical setting), the nature of the interactions among students, teachers and preceptors in clinical settings; the barriers clinical teachers face in their efforts to optimize student learning (Ironside & McNelis, 2010; McNelis and Ironside, 2009); and the safety competencies and clinical judgment fostered by use of particular strategies (Ironside, Jeffries, & Martin, 2009; Ironside & Jeffries, 2010). To achieve the broadest impact possible, findings have been disseminated in refereed research and teaching journals, book chapters, a monograph, and editorials. They have also been disseminated nationally with clinical faculty, students and clinicians as co-presenters via refereed paper presentations, workshops, posters, and plenary sessions.

Despite a paucity of funding available for research in nursing education, I have a consistent funding record, totaling over a million dollars while in rank. I have also mentored and supported faculty new to education research, and junior and clinical faculty in the conduct of funded and unfunded studies. For example, in 2008 I was the principal

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investigator on a national survey of faculty teaching in clinical settings in prelicensure RN programs (Ironside & McNelis, 2010; McNelis & Ironside, 2009). The findings from this survey revealed serious shortcomings in how clinical education is designed and delivered. To better understand the nature of clinical education, we conducted a pilot study (A. McNelis, PI) to examine the interactions between faculty and students in clinical settings (internally funded). This pilot served to test the methods used in a previous study of nursing practice in the context of clinical education. The findings from this pilot led to three refereed paper presentations at national conferences and one at a local conference, a refereed poster discussion session at a regional research conference, and to subsequent funding from the National Council of State Boards of Nursing (NCSBN) (P. Ebright, PI) to study clinical education at 3 geographically dispersed schools of nursing.

My program of research makes a substantive contribution to the field because of its scope as well as its content. It is very rare in nursing for investigators to conduct large scale, multi-site studies of pedagogical practices, and many nursing faculty do not have the expertise or resources to design or conduct such studies. To address these issues (advancing the science of nursing education and building disciplinary capacity for research) simultaneously, over the past 5 years I have consistently partnered with other schools of nursing to conduct research. For example, I was PI on a grant from the NCSBN (2007-2009) to study the effects of multi-patient simulation experiences on students' safety competency and clinical judgment. This study occurred at 8 schools of nursing across Indiana. In addition to the productivity of the research team, described above, two faculty members at two participating systems schools submitted abstracts for presentation in research conferences. Similarly, in 2008 I partnered with the Community College of Philadelphia to conduct a national, multi-site, multi-method study of how students attending community colleges were being prepared to care for older adults. The design included a national survey of all 851 community colleges in the United States (response rate 62%); focus groups with faculty, graduates, and practicing nurses to explore students' preparation for providing care to older adults; and site visits to schools in five states (Ironside et al., 2009). This project led to a subsequent national dissemination grant and the development of a national initiative with the National League for Nursing to improve students' preparation for caring for older adults. I am also co-investigator on a grant recently submitted by a new investigator to examine the impact of a research-based approach to teaching post-clinical conference on students' clinical reasoning and performance (K. Dreifuerst, PI). This study includes 5 geographically dispersed schools of nursing.

Importantly, this work is consistent with and contributes to the mission of the IUSON "to lead in the 'knowledge work' of nurses of today and tomorrow to positively influence the health of communities served by: inspiring learning through excellence in teaching; creating and advancing knowledge through science and research; shaping care through evidence-based practices, innovations and partnerships..." It also is consistent with the strategic goals of the IUSON, to 1) "advance IUSON's reputation as a national leader in educational research, evidence-based educational practices, and progressive educational programs" and to 2) "position IUSON as a nationally renowned leader in research and knowledge development."

Finally, I am also a national leader in hermeneutic phenomenology in the context of nursing and health professions education, directing two research institutes each summer. I was the assistant or co-editor of an award-winning book series entitled: *Interpretive Studies in Healthcare and Human Science*. Awards include three *American Journal of Nursing* Book of the Year Awards (volumes 1, 3 and 6) and an Outstanding Academic Title Award from *Choice Magazine* (volume 5). I was also the volume editor for *Beyond Method: Philosophical Conversations in Healthcare Research and Scholarship* (volume 4).

### **SERVICE**

I have been a productive citizen of the IUSON, IUPUI, and the broader discipline. Since appointment to the IUSON I have advised as many as 48 graduate students and 8 doctoral students per year. I coordinated the new graduate certificate and track in the Master's program 2007-2009. I have chaired the Nursing Education Faculty Research Group since 2006 and the Qualitative Research Study Group since 2010. I have been an elected member of the Appointment, Promotion, and Tenure Committee since 2007 and the PhD Admission, Progressions and Guidance Committee since 2008. I served on the search and screen committee for the IUSON Associate Dean for Graduate Programs.

In my role as the Director of the Center for Research in Nursing Education I have worked with tenured, tenure-track, and clinical faculty to design studies, to write external and internal grants, and to disseminate their work. The success of these efforts can be seen in the \$3,353,422 awarded for educational/program grants and contracts the last two years. I coordinate the annual Billings Lecture, bringing a national expert in nursing education to IUSON. I also serve(d) on 10 doctoral student committees for students studying nursing education as a primary or secondary focus area at IUSON, I chair(d) 4 of these. I also serve as a mentor in the prestigious Jonas Scholars Program.

Outside the IUSON, I have been a member of the Nursing Education Steering Committee for Indiana University Health (IUH) since 2009 and the Indiana University Nursing Leadership Model team. The impact of these collaborations includes a co-authored book chapter, grant proposal, and online learning module. I was a member of the Search and Screen Committee for the Vice Chair of Education for the IUSOM, Department of Obstetrics and Gynecology. I am an elected member of the IUPUI Faculty Council and an appointed member of the Faculty Council Technology Committee. I was recently elected to the University Faculty Council.

While in rank, I served as a member of the Board of Governors for the National League for Nursing. I was a member of the Governing Board and Steering Committee for the Institute for Healthcare Improvement's Health Professions Education Consortium (2007-2009). I am a member of the Leadership Team for the Institute for Healthcare Improvement's Summer Symposium, designed to develop the next generation of leaders to promote healthcare improvement.

In 2010 I was an invited guest editor (with an IU doctoral student) for a special issue of *Journal of Nursing Education*. I serve on 3 editorial boards (one international). I am a review panel member for 4 journals within the discipline and 2 outside the discipline.

### **FUTURE DIRECTIONS**

Consistent with the mission of the IUSON to lead in the knowledge work of nurses and inspiring learning through excellence in teaching, my future goals include continuing my work to advance the science of nursing education through expanding my current research in clinical nursing education to include other health professions, mentoring others to build disciplinary capacity for research in health professions education, and, through these efforts, providing the much-needed evidence teachers need to better prepare students for practice. In addition, I will continue to explore and implement new approaches to faculty development (expanding the narrative pedagogy pilot school project). My recognized expertise and leadership position me well to continue to represent IUSON as a leader in nursing education nationally and internationally.