

**2007 Distinguished Teacher of the Year**  
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I am so honored to be here.

Before I get to the serious part of this address, I would like to share some of the process of how I got here. For those of you who do not know this, we actually have to prepare a presentation for a group of students that represent all of the colleges here at FAU. So I went in with what I knew best, which are EKG nursing concepts and stories from practice. I am a big believer in the use of story to make a point or to teach a concept. Please allow me to share one.

How many of you have taken a CPR class? (*Show of hands*) Probably most of you. Do you remember learning “Annie, Annie are you okay?” Do you know why you say “Annie, Annie are you okay?” I will illustrate the “why” with a story. This took place during my time as a clinical nurse specialist in critical care. Now, think *Grey’s Anatomy* or “ER” ...can you visualize in your mind all of the critical patients you have seen on these shows that are connected to a cardiac monitor? They have electrodes, which are those little white sticky circles placed on their chest. These sticky patches on the chest pick up the electrical signal of the heart and send an EKG pattern to a monitor. If, for some reason, one of the sticky patches falls off, then you lose the EKG pattern. A loss of a normal EKG pattern could mean that the round sticky patch fell off or the person has lost their heartbeat, resulting in no pulse. So this new nurse sees nothing on the monitor, she recognizes loss of the pattern and retrieves the defibrillator machine, just like on TV and places these paddles on the patient’s chest and shocks the patient with an electrical charge. The patient then screams really loudly: “What are you doing!?” This patient had been asleep in his bed and one of the patches had fallen off—now if she had just said “Annie, Annie are you okay?” and shaken the person just like in CPR class, she would have woken him up and saved him from the trauma of being almost electrocuted by his own nurse. That is a powerful story to tell novice nurses.

I believe in trying to insert humor as well. Nursing is serious stuff; however I think humor, when appropriately applied, facilitates learning while lightening the mood of the classroom. That was an example of my teaching through story.

In this address I want to share with all of you my journey, which has shaped my teaching philosophy. Hopefully, I can do this in such a way that those of you who are just starting out on your career paths can come away with some advice on starting your own journeys. Or at least I can give you all something to think about. For the others in the room, this address will give you a glimpse of a colleague's journey. I hope I can engage all of you.

I have never forgotten my own educational experiences, and, as you can imagine, I must have a very good memory because my college days began in 1974! However, I left college thinking there had to be a better way to create a learning environment. Those memories still inspire and motivate me 30 years later.

Nursing education has such a wide range of content to teach. When I first came to FAU to teach nursing in 1998, I was asked to teach nursing leadership. This was a stretch from pharmacology and critical care nursing. So I began the class with what every leadership course begins with: our vision statement and our workplace philosophy.

When I really looked at the philosophy of our college, I felt like I was finally home. One of the sentences in our philosophy is "that the learning environment emphasizes collegial relationships with faculty and students." This concept can best be explained by our model for relating in the college: "The Dance of Caring Persons." How many of you have visited our college? (*Show of hands*) If you have, then I am sure you noticed that in the middle of the main entranceway, imbedded in the terrazzo floor, is a circle of dancing figures. Maybe you thought this was fanciful artwork? However, what this is, is our college's model for relating to one another. The faculty, along with the dean and the students (and, if we are out in the field, the persons we are caring for) are part of a circle. We do not operate within a hierarchy. We are all connected within this circle as partners in the learning experience.

I realized that very first semester how comfortable that circle was for me. Students these days come from such different backgrounds, and if you honor their backgrounds and really come to know the students around you, you all grow. Let me give an example.....

This is a story of Mike and Andrea. Mike and Andrea were a couple that had come back for their bachelor's degrees in nursing. They had their associate's degrees from junior college and were both working as nurses. However, Mike

had worked extensively with computers before going to nursing school. This was in 1998 and I was not long out of the hospital setting where the only thing we used computers for was to check on bloodwork and lab results. When I left the hospital they were just starting an email system but I had managed to miss the training. Our first night of class (it was a physical assessment course) Mike told me he would email me something. I told him that would be great but he would have to teach me how to check email first so I could receive it! I can still see Mike and Andrea in my office after class, when he proceeded to teach me how to operate the system. It was like I had been given a gift. However, in order to receive this gift I had to suspend that illusion of being the all-knowing teacher with all of the power. And, in doing so, I forged such a bond with these two that eventually five years later when they finally decided to get married, my husband and I were at the wedding.

The best part of this is that now I teach a course called "Nurse as Scholar." This course is designed for nurses like Mike and Andrea who have an RN license but not a university degree. Some of these nurses have practiced over 20 years. This course is designed to give them the skills to come back to school. They learn how to research library articles online, how to create and conduct PowerPoint presentations, and how to write a nursing literature review. One of the things I do is assess their online and email capabilities. There is always a small group who do not know how to access Blackboard, our web-assist system, or how to send an attachment via email. I share with them how one of them, a returning RN, had taught me. The learning has come full circle!

This model that we see everyday as we enter our college really is a way of being – a way of letting go of the paradigm where faculty are the holders of all of the knowledge and answers. All disciplines have a responsibility in higher education to prepare students in the world. My slant is nursing; however, this model translates to all disciplines. All of us can use a model for relating. Understanding a model that grounds one in the caring ethic and "what ought to be" can be transformative. No matter if you teach or work in business, education, medicine, whatever the discipline, this model reminds us of how we ought to be with one another.

Your workplace philosophy should guide the work and the culture of the organization. In nursing we seek out a caring and safe environment; however, we have to cultivate and help create this environment. If that environment is not comfortable, then you need to reevaluate your immediate goals. Now I will pass along some advice for new graduates. My first job was the night shift in the

Jackson Memorial ER. It was July and I had just come off orientation. For those of you who do not know this...July is not the month to enter the ER of a teaching hospital and this is because the medical student has just become a first-year intern. The resident has just become the attending, who is supposed to know everything. And at night everyone who really knows anything from a medical standpoint is asleep. I just could not believe I was going to survive this environment. For some reason many of the experienced nurses had left. My mantra became when I went to work every night at 11 o'clock: "I can do anything for a year as long as I am learning." And that is exactly how long I lasted on the night shift in the emergency room. One year. I always tell my students when you are starting out, you may have to realize that this environment is not as safe and caring as you would like it but you can try and change this and while you are trying... keep saying to yourself... "I can do anything for a year."

However, I do tell my experienced nurses who have come back to school that you can change things, and if they feel that they really cannot then I encourage them to move on...go where you fit. I tell our students to find a philosophy where you are *comfortable* and also where you can relate with others, an ethos that is continually practiced and reinforced at FAU. We all can use this circle, this way of being, no matter where we go. So now you all know the story behind the circle on our floor. Come over anytime. We at the College of Nursing would love to share our model and our stories with you. Thank you!