Linda Rounds Interview AANP Oral History Project

Interview: Linda Rounds PhD, APRN, FNP, FAANP, FAAN



Date: January 25 2021

Interviewers Name: Michaelene Jansen

Place for Interview: Phone Interview

Education:

| BS-Nursing | Alfred University, Alfred, New York | 1970 |
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| MS-Nursing | University of Rochester, Rochester, New York | 1976 |
| Post Masters Certification FNP | State University of New York – Binghamton | 1979 |
| PhD -Nursing | University of Texas – Austin, Texas | 1984 |

Certifications;

Short Bio:

Dr. Rounds has been teaching and developing nurse practitioner programs since 1984. She was the leading force in developing the gerontological nurse practitioner program in 1985, becoming the first fully online program in Texas in 1998. She serves as Associate Dean for Professional Development at the University of Texas Medical Branch (UTMB) in Galveston, Texas. She has facilitated the development of the DNP and served as the director as well. Dr. Rounds has been a curriculum consultant in the United Kingdom for master's degree and NP programs. Her research and grant funding centers on online learning and innovative teaching strategies.

When did you become an NP? What was the motivation?

When I began working as a nurse in 1970, I had a desire to have autonomy and treat patients without getting the physician's permission. In the late 1970's, I taught a physical assessment course for undergraduate nursing students. To prepare for the course, I enrolled in a NP physical assessment course at SUNY-Binghamton and became very interested in the role of the nurse practitioners. I decided that was what I wanted to do. I then enrolled and completed the post master's FNP program and worked in faculty practice while teaching in Binghamton. In 1980 I moved to Austin, Texas for my PhD. In

nursing, if you want to teach, you must get your master's degree and to continue teaching, you need your doctorate. I moved to Galveston as I was finishing my doctorate and was unable to find an NP position. I was working in an ICU in Galveston and one of colleagues mentioned that I was a nurse practitioner to a University of Texas Medical Branch (UTMB) faculty member. The School of Nursing was where the faculty were trying to revive their nurse practitioner program and recruited me. I joined the UTMB faculty and as they say, the rest is history.

What experiences did you bring into the role?

My interest and experience with my parents and patients have led me to focus my efforts working with older adults. I believe that I am well-tuned into patients, picking up on cues that are often missed. I am able to identify psychological and financial abuse of older adults or pick up on chronic symptoms such as dyspnea that can be treated rather than ignored.

I also spent 12 years on the Texas State Board of Nursing as their advanced practice representative. That experience introduced me to a whole new side of nursing. The Texas Board of Nursing is very forward thinking in their approach to advanced practice, interventions and discipline of the nursing profession.

Did you experience any challenges? How were they resolved?

I have not had any major challenges in teaching. Developing and maintaining a robust faculty practice is a challenge in Texas. The state statutes limit independent practice and independent prescriptive authority. Progress toward full practice authority is very slow. The Covid pandemic is loosening some of the barriers for advanced practice and hopefully full practice authority will be passed into law.

Are there any experiences that you would like to talk about?

I knew by age 5 that I wanted to become a nurse. My mother always encouraged me to pursue nursing as a career. I chose courses in high school that would help me in my collegiate nursing education.

After becoming a nurse practitioner in Binghamton, I worked with a family practice physician who was my preceptor during my post masters NP program. The practice was a rural clinic and I learned to focus on and respond to patient experiences, especially for older adults. The practice set the standard for my future faculty practices.

What was most challenging in your career/ most important?

One of the most challenging aspects of my career was getting approval for UTMB's post master's DNP program. When we sought approval, the Texas Higher Education Coordinating Board was reluctant to approve new DNP programs.

Is there anything you would want to change?

No. I could do everything I wanted to do. I have had great support and freedom from the School of Nursing at UTMB. When I wanted to put the gerontological (now adult/gero) NP program totally online, I was given the go ahead and the support to do it.

What do you see as pivotal moments in the past years?

I think taking the physical assessment class which introduced me to the NP role was pivotal. It motivated me to enroll in a post master's NP program. Becoming a NP was the best thing I ever did. It gives me tremendous pride. There is so much respect in being a nurse and nurse practitioner. FAANP and AANP have helped advocate for the role of the nurse practitioner. AANPs policy efforts have been instrumental in changing state and federal laws to promote autonomous NP practice.

I also think that being recruited to UTMB after they found out that I was an NP changed my career. The National Organization of Nurse Practitioner Faculties (NONPF) had a tremendous influence on my teaching. Their template for the BSN to DNP program had been very helpful in developing our program at UTMB. NONPF's Standards of Practice and Curriculum Guidelines are invaluable to NP education.

I am also a CCNE evaluator. The knowledge and experience with CCNE has helped me teach, administer and direct our NP programs.

What advice would you give to new nurse practitioners?

I would advise 3 things:

- 1. Be well prepared
- 2. Know what you don't know
- 3. Be involved locally and if opportunity presents itself, regionally, nationally, internationally

What do you see as the role of Nurse Practitioners in the next 25 years?

I would love to see NPs as the gatekeepers to the health care system. Nursing is holistic and has a comprehensive view of patients and families. Nurse practitioners are tuned into patient needs. NPs understand a multidisciplinary approach and will reach out to social workers, pharmacists, and physicians to meet the patient's needs. Practice will be so different in 25 years. Telemedicine and technology will be integrated into our practice. We may not need to see patients in our offices other than once a year. Many chronic illnesses can be managed well with technology. I can't even imagine what health care will be like in 25 years!