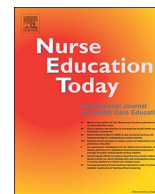




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Contemporary issues

Nursing education in a pandemic: Academic challenges in response to COVID-19



ARTICLE INFO

Keywords:

Care
 Coronavirus
 COVID-19
 Education
 Nursing
 Entry to practice
 Nurses

The world is facing unprecedented challenges in the face of a global pandemic. Coronavirus disease 2019 (COVID-19) has, to date, killed thousands worldwide (World Health Organization, WHO, 2020a). The data related to numbers of tests administered, positive cases, hospitalizations, and deaths, changes on an hourly basis. Mounting concerns regarding the strain on health care systems globally are already occurring and likely to get significantly worse. This health crisis impacts not only frontline staff and clinical leaders but all systems and communities. COVID-19 has also already disrupted universities and academic institutions. Within the health field, schools of nursing are bracing for unique challenges related to our role in helping develop the next generation of care providers. This article focuses on the unique needs and concerns of nursing educators and nursing students in the face of the COVID-19 pandemic. Drawing from firsthand experience as nurse educators leading clinical courses in a post-licensure nursing program, we consider some of the early lessons as we face this health crisis. We discuss the concerns that have been shared by students. We question how we will continue to educate nurses in a society facing social distancing, isolation, and quarantine measures, while also needing nurses at the frontline.

On March 15, 2020, our academic nursing program made the difficult decision to remove students from clinical practicums. At that point in time, there were fewer than 250 cases of COVID-19 across Canada (WHO, 2020b). In the days preceding this decision, numerous questions and concerns were shared in online meetings, over conference calls, and in urgent emails amongst colleagues. Athabasca University offers a Bachelor of Nursing program to Licensed Practical Nurses from across Canada in an online environment. While the majority of learning is conducted online, students in this program must complete in-person clinical placements to fulfill the Bachelor of Nursing degree requirements. Athabasca University did not experience the same challenges that other academic institutions faced with the quick pivot to distance learning in a digital environment. However we, like other nursing programs across Canada, had to make difficult decisions on whether or not to continue with our clinical courses. Ultimately, the serious concerns related to learner safety were at the forefront of this decision.

Ethically we had to consider weighing the value of education against the risk and strain to the learner personally and professionally. Within our program, most students work regular hours as Licensed Practical Nurses in their respective communities across Canada in addition to pursuing their educational commitments, including theory and clinical courses. Students often travel hundreds and sometimes thousands of kilometres from their home province to come to Alberta to complete clinical courses. When rates of COVID-19 increased, there were concerns from both faculty and students on the possible restrictions or limits to travel within Canada. Concerns regarding travelling focused on the possibility of transmission. Specifically, the risk that a nursing student as either an asymptomatic or mildly symptomatic carrier of COVID-19 could return to their community and cause a further unconscionable spread of the infection.

If students were exposed to COVID-19 while in a clinical setting, they risked not only their health but that of their family. We also considered that students could face the financial burden of being quarantined without an income. Additionally, as a post-licensure program, if students were exposed, they would be unable to return to work, adding further strain to the health system.

Students expressed concern about what an interruption in their nursing education would mean for their future careers as Registered Nurses. Many students in clinical placements were in their final focus clinical practicum, and thus close to successfully completing their program. Some learners were only one or two courses away from completion of their Bachelor of Nursing degree. In addition to cancelling their current clinical placement, they had concerns about progressing in the rest of their program. We did not have all the answers or solutions at the time the decision was made, and are still working through the immediate safety concerns and implications for future clinical placements. Some students shared that they felt selfish and were frightened about not reaching the career goals that they have worked so hard to obtain. Our approach with students has been to reassure them that the worries regarding their academic path are valid and taken seriously.

<https://doi.org/10.1016/j.nedt.2020.104471>

Received 28 March 2020; Accepted 16 May 2020

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The risk of acquiring COVID-19 as a care provider is significant (Bernstein et al., 2020). However, many students have already disclosed that they would take on that risk if it means they could finish their Bachelor of Nursing degree. The responses from students highlight a central issue in removing students from clinical: the academic institutions' concern about the risk to the student, and the student's willingness to take on the risk if it means the completion of their program. Examples include students who would consider volunteering for pandemic related service if it accumulated clinical hours necessary for degree progression.

The rising tension in nursing is palpable, and for many of us, this is unprecedented. Our academic programs will provide a workforce with further skills and knowledge to contribute in a direct and meaningful way. Registered Nurses will play a major role in managing and ultimately defeating this pandemic. These actions signal a concern that there may come a time when the needs of the public outweigh the needs of students. These choices are already occurring in other countries, with examples of fast-tracking nursing programs internationally (Al-Arshani, 2020), and there is a genuine chance that educators could be called in to quickly train people with little foundational knowledge or skills to provide nursing care.

Similarly, there may be a point where educators are required to return to the bedside to provide care. In addition to the responsibility to our students, nursing academics, especially those with clinical ties, have a sense of duty to our clinical colleagues. As Registered Nurses, we are wrestling with guilt from the tension between wanting to urgently join our colleagues on the frontlines and staying in our current roles, recognizing that in the intermediate and longer-term, this will enable the addition of more Registered Nurses to the workforce. Exposure to repeated and disturbing images in the media related to the COVID-19 epidemic, such as overworked and understaffed units, can be psychologically distressing for many people (Garfin et al., 2020). Nurse academics may also feel a heightened and acute sense of guilt for not contributing as frontline health care workers during the pandemic. There have already been requests to nursing alumni and retired nurses for increased support in the COVID-19 response, and the impulse to contribute to direct pandemic care is compelling. However, it would be irresponsible to act without considering the long term implications of a shift in focus. Nurse educators will face difficult decisions on supporting the public and their clinical colleagues. However, there also must be a consideration for the needs of current and future nursing students.

Amid panic and crisis, it is challenging to continue planning for an uncertain future. However, universities and educators have a societal obligation to think long term. How will we recover from the pandemic? Will we be able to sustain and maintain a program if the crisis extends long term? Is it responsible and ethical to advocate for accelerated programs to licensure, and reduced clinical practicum hours? If educators, who are also nurses, are pulled into providing clinical care and frontline service, how does that affect our responsibility and capability to educate when, in a year, an exhausted and diminished workforce needs more nurses? At this moment, we have more questions than answers, but sharing these concerns allows for collective action and collaboration. We hope that by disclosing these concerns, we can help frame the academic discussions that all nursing programs will have to face.

Yet, even with all the fear and anxiety, there are lessons in hope. Students' main concerns have been the health of patients and communities. In the week following our removal of students from clinical, we

have continued student learning online. In discussion forums, students have shared insightful, articulate, and honest thoughts on the impact of this pandemic worldwide. Even without direct clinical education, these nursing students are learning about the role of the Registered Nurse. Their responses have been a salve to the terrifying news cycle; their intelligence and compassion that will be one of the factors that guide us through this crisis. We have also witnessed globally the recognition of the dedication, roles, and significant contributions that nurses play in the health care system. For the students to enter academic programs in the future, they will begin their education aware of risks and challenges that no other cohort could have ever imagined.

COVID-19 is an ongoing crisis; it is a real-time lesson in equity, leadership, social justice, ethics, and patient care. This pandemic will forever shift the educational landscape; it already has.

Funding source

Not applicable.

Ethical approval

Not applicable.

Declaration of competing interest

None declared.

Acknowledgement

We would like to acknowledge Crystal MacIsaac and Kristina Bourgette both Athabasca University students in the Bachelor of Nursing Program for their time and consideration in reviewing the final draft of this article.

References

- Al-Arshani, S., 2020. The healthcare system in Italy's Lombardy region is so strained from the new coronavirus that officials are asking doctors to come out of retirement and nursing students are being fast-tracked to graduation. Business Insider <https://www.businessinsider.com/italys-lombardy-regions-healthcare-system-is-crumbing-to-covid-19-2020-3> (March).
- Bernstein, L., Boburg, S., Sacchetti, M., Brown, E., 2020. Covid-19 hits doctors, nurses and EMTs, threatening health system. The Washington Post https://www.washingtonpost.com/health/covid-19-hits-doctors-nurses-emts-threatening-health-system/2020/03/17/f21147e8-67aa-11ea-b313-df458622c2cc_story.html (March).
- Garfin, D.R., Silver, R.C., Holman, E.A., 2020. The novel coronavirus (COVID-2019) outbreak: amplification of public health consequences by media exposure. Health Psychology. <https://doi.org/10.1037/hea0000875>. (advance online publication).
- World Health Organization, 2020a. Coronavirus disease 2019 (COVID-19). March 26, situation report – 66. https://www.who.int/docs/default-source/coronaviruse/situation-reports/20200326-sitrep-66-covid-19.pdf?sfvrsn=81b94e61_2.
- World Health Organization, 2020b. Coronavirus disease 2019 (COVID-19). March 15, situation report – 55. https://www.who.int/docs/default-source/coronaviruse/situation-reports/20200315-sitrep-55-covid-19.pdf?sfvrsn=33daa5cb_8.

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