A Shared Reality: Implementation of a Redesigned Clinical Course during the Covid-19 Crisis

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Abstract

Many institutions of higher education were caught unprepared for the consequences of covid-19 on program delivery and completion; notably schools of nursing with clinical practicums. The purpose of senior clinical practicums is to foster nursing students' readiness for practice. A practicum offers the students the opportunity to engage in advocacy and leadership, respond effectively and efficiently to changes in client status, navigate and mitigate ambiguity in the healthcare system and partner with interdisciplinary team members to ensure a holistic approach. The disruption of face-to-face programming required schools of nursing to quickly redesign courses to ensure learning outcomes were met and students would successfully graduate prepared to enter their practice. The intent of this article is to share the lived realities of nursing students and faculty members during the implementation of a redesigned course during the pandemic crisis.

Key words: *case study, critical reflexivity, faculty, online, nursing education, student*

SARS-CoV2 AKA Covid-19, disrupted course implementation for many higher education institutions who were ill-prepared for the need to quickly switch from primarily a face-to-face delivery to virtual methods in an attempt to salvage learning experiences for students (Crawford et al., 2020). Nursing education was not exempt from this disruption, especially clinical practicums for the demonstration of the necessary knowledge, skills, attitudes and attributes to ensure students are safe, competent, compassionate and ethical (College and Association of Registered Nurses of Alberta

[CARNA], 2020). As a practice discipline, the opportunity for nursing students to engage in clinical practicums is paramount; however, this learning experience was disrupted due to social distancing restrictions placed on higher education institutions by health authorities.

The intent of this article is two-fold: (1) to share the lived reality of responding to the Covid crisis through the implementation of a redesigned 10-week senior practicum and (2) identify themes and offer recommendations for curricular advances in nursing education from a recent nursing student and faculty perspective. The authors are a tenured track Professor, two clinical nurse educators and three recent graduates of a baccalaureate nursing program. The graduates were chosen by their respective faculty members to ensure a balanced perspective regarding the implementation of the redesigned course.

Background: MacEwan University is an undergraduate teaching intensive institution located in Edmonton, Alberta, Canada. MacEwan offers a four-year bachelor of science in nursing (BScN) to approximately 1200 students, with a term of theory followed by a term of clinical practice. The final component of the BScN program at MacEwan University is a 10-week, 375 hour, intensive preceptored practicum completed at an agency with consideration of the student's choice. The course learning outcomes reflect graduate competencies as advocate, clinician, collaborator, communicator, educator, leader, professional and scholar as identified by the nursing education regulatory body as entry to practice requirements (College and Association of Registered Nurses of Alberta, [CARNA], 2019).

The Original Course Design: The intent of the final practicum is to develop readiness for practice and facilitate smooth transition from nursing student into the role of registered nurse. This includes providing opportunities for learning and knowledge development as well as increasing responsibility and independence in a professional role, while ensuring that proper support and resources are available as needed to be successful (Kaihlanen et al., 2019). Transition and socialization into the profession is fostered through a triad - nursing student, agency preceptor "registered nurse" and faculty member. The

preceptor teaches, instructs, supervises and serves as a role model for the preceptee, while the faculty member acts as resource and advisor throughout the experience. The practicum begins with a three-day orientation; course specifics including speciality sessions and skills practice labs.

Redesign was influenced by a mapping competency exercise by faculty members to determine student's progress in the course. Areas of deficits were utilized to create new learning experiences to ensure student success. The addition of a MOOC and three accompanying case studies was just one of three assignments in the redesigned course.

Online Delivery: Online delivery and distance learning have been present in bachelor nursing education for many years, however it is often still seen as an innovative educational strategy (Broussard & Wilson 2018). There is a distinct lack of literature about online delivery for senior practicum courses, specifically when converting a clinical agency course to online delivery unexpectedly. Online delivery can stimulate higher order thinking skills (HOTS) and provide flexibility which is reflective of heutagogy as self-determined learning (Dewald, 2020; Maykut et al., 2019). This approach to learning builds capacity and capability, situating the learner in acquiring a skill set to acquire, analyze and implement necessary knowledge for their work life (Dewald, 2020; Maykut et al., 2019).

With online delivery, learners can control how, when and where they engage with the faculty member and the knowledge embedded in the course (Rohman et al., 2020) while juggling multiple demands on their time (families, other jobs). This flexibility optimizes the learning needs of the individual based on the priorities they establish for time and space (Broussard & Wilson, 2018). Although faculty believed students would easily transition their learning to an online world, there was a lack of familiarity and challenges with new technology introduced. Another unexpected challenge was the home schooling which occurred due to the enforced health restrictions, which left some students instructing their children during the day and focusing on their own learning when they had the time.

The MOOC: Future Learn's (2020) *COVID-19: Tackling the Novel Coronavirus* was intentionally chosen to supplement student's knowledge of the pandemic. Three case studies focusing on the competencies of advocate, educator, leader and professional were then developed to ensure the deficits were addressed. A Massive Open Online Module (MOOC) is a virtual experience incorporating multiple modalities (embedded articles and videos, discussion forums, quizzes and assignments) to engage individuals in self-directed learning (Milligan & Littlejohn, 2016; Petronzi & Hadi, 2016; Spring, 2016). The original impetus of MOOCs was to foster participatory learning, student-controlled exploration, connection and collaboration with others globally (Literat, 2015; McAuley et al., 2010; Milligan & Littlejohn, 2016; Spring, 2016). MOOCs as a teaching strategy in higher education, specifically nursing, have not been significantly utilized and/or understood from the student's perspective. Self-determined learning as a skill set needs to be developed during the formative years to ensure graduates as future professionals engage in professional development and life-long learning. As a collaborative learning experience MOOCs have the potential to provide sources of information to enhance knowing of self as a learner and professional (Aung et al., 2019; Literat, 2015; McAuley et al., 2010; Petronzi & Hadi, 2016) while positively affecting nursing education on a global scale (Sitzman et al., 2016; Swigart & Liang, 2016).

Critical Reflexivity as Method: Critical Reflexivity was intentionally chosen as an approach, to inspire metacognition to foster phronesis amongst the writers (Jenkins et al., 2019; Kinsella, 2012; Ko et al., 2020) - three recent baccalaureate graduates, two clinical nurse educators and one tenured faculty member. Professional relationships provide the mechanism for actualizing our nursing practice and move us from an individualistic perspective to adopting a multiplicity lens where many voices are honoured. This adoption provided the foundation for inclusionary practices (Kagan et al., 2010; Kagan et al., 2014; Willis et al., 2014), which was one of the intentions of this manuscript.

Due to social distancing guidelines in place at the time of discussion, two virtual sessions and a google drive were utilized to facilitate metacognition, foster phronesis as practical wisdom for reflective judgement and discernment and finally to develop professional writing acumen. The lead author facilitated the discussion platform and took notes and the session was also recorded with the transcript sent to all authors. Notes were then transcribed and themes identified by the group, with consensus as the objective. Chinn's (2016) Peace and Power framework was adapted to mitigate power and privilege to decrease any conflicts which may have arisen due to the recent faculty-student relationship. Questions for critical reflexivity were written based on literature and personal experiences with input from all writers.

Discussion

HOTS: The first concept examined was higher order thinking skills (HOTS). This concept was described as a skill set including but not limited to: analysis, collaboration, creativity, critical reflection, curiosity, humility, synthesis, voice, always joy and wonder about learning (Maykut et al., 2019). The following questions were posed in advance to provide an opportunity for depth of responses:

(1) What skill sets did you strengthen during this process; both the 5 week agency practicum and the MOOC?;

(2) What newer, if any, skill sets did you develop?; and

(3) How will these skill sets, or will they, help you transition to your new profession?

Students: All three students felt HOTS had been nurtured throughout the program but this final 10 weeks created an opportunity for integration at a higher level. They also felt the clinical experience provided time management and organization, confidence with hands-on tasks (such as paperwork, analysis of lab work and diagnostics), developing relationships with clients, preceptors, nurses and other healthcare professionals and finally the opportunity to integrate all the knowledge, skills, attitudes and attributes acquired from their studies. Initially, the MOOC presented with much frustration as students had not been exposed to this learning format previously. Upon reflection and discussion, they felt the questions embedded in the MOOC assignment helped them:

(1) view their practice holistically, (2) enhance critical reflection through self-awareness to foster accountability and responsibility; and (3) shift from a task-focus to an in-depth exploration of all the roles - "thinking more and doing less". Overall, students acquired specific skills to help navigate the transition to practice from both aspects of this redesigned course.

Faculty. During the discussion between the authors, the faculty gained additional understanding of the nuances of implementing this redesigned course. As faculty members are not physically present during the clinical experience, the importance of nurturing the fluidity and congruence of the triad relationship (student-preceptor-faculty) was and continues to be pivotal for student success. Clinical preceptors did not always address or facilitate the growth of all roles during the five-week clinical practicum with certain roles (clinician, communicator, collaborator and professional) stressed especially in acute care settings. Therefore, identifying limitations of preceptors and the clinical context is key to engaging in a strengths-based approach to ensure students gained the necessary knowledge of all roles to transition successfully to practice. The introduction of the MOOC assignment, with a focus on multiple roles, highlighted a theory-practice gap during the assessment of student submissions. Overall, from the faculty perspective, course design whether the original 10-week course or the redesigned course must continue to ensure graduates are safe, competent, ethical and compassionate.

Transitioning to Practice: The second concept discussed was transitioning to practice which was described as an autonomous journey of embracing and enacting one's professionalism. Questions to explore this concept included:

(1) How did the covid-19 affect your competence and confidence to transition from your student role to one as GN/RN?;

(2) How will you continue to ensure successful transitioning in your future?; and

(3) How did this learning experience equip you with knowledge to navigate the complexity of our healthcare system and mitigate consequences of chaos which are inevitable?

Students. All three agreed that the redesigned course offered both challenges and strengths as they transition. Many clinical sites expect graduates to "hit the floor running" and all three agreed the five-week practicum left them with less confidence to navigate the ambiguity, complexity and interdisciplinary focus. As this critical reflexive discussion occurred post graduation, all three had gained employment as graduate nurses. They spoke about being rusty with psychomotor skills, having to learn how to swim again, and not having the confidence to delegate tasks to other personnel and establish priorities of care effectively and efficiently. As students they believed the 10-week clinical practicum would have increased their confidence and prepared them for job-readiness.

The MOOC presented many challenges, especially for those students with competing demands of paid work, child care and care for elderly parents, home schooling (as primary k-12 schools were closed) and those whose primary language may not be English. There was difficulty in adapting to the significant amount of writing for the MOOC after expecting to be engaged in a hands-on course. However, the knowledge of the pandemic contextualized within the eight roles provided confidence in transitioning from the cognitive and affective domains.

Faculty. As we had mapped out the student's progress at midterm we were confident they were ready and safe to transition. The redesigned course intentionally integrated the affective domain which is not always stressed enough to ensure graduate readiness. Readiness and experience are two different expressions of professional practice. Readiness suggests having the necessary knowledge, skills, attitudes and attributes to ensure safe, competent, compassionate and ethical care as a novice. Experience reflects phronesis or professional wisdom to navigate ambiguity and mitigate risk as a nurse with expertise. Therefore, readiness-experience is on a continuum and as we engage in new professional opportunities we may fluctuate on the continuum. We may have had expertise in one clinical setting but become a novice when we begin a new job.

The MOOC and the corresponding case studies provided the necessary knowledge of the pandemic

contextualized within the future roles of a professional. The case studies expanded the student's awareness of the ambiguity and complexity of their future practice, notably during a chaotic and unknown future. Many other schools of nursing were in similar positions in their response to the pandemic. We felt that our redesigned course provided a robust skill set reflective of all domains of learning and our graduates were indeed well-prepared for job readiness.

Grieving: Finally, grieving as a phenomenon was described by the group, as processing the loss of a dream or a goal. Questions posed were:

(1) Have you had the space and time to grieve following graduation - describe your emotions?;

(2) How difficult was it to trust your faculty to do what was what they believe was in your BEST interest to ensure you graduate?; and

(3) What insights will you take from this experience to inform your future and what words of advice do you have for nursing faculty?

Students. All three agreed there was a lot of frustration from their peers with waiting to see if alternative strategies could be designed and implemented to ensure students were prepared to graduate. Emotions ranged from

(1) **anger** "*I was mad and angry - I was just getting in the groove with 4 patients and then we were pulled from our placements*" and "*I didn't want to learn online it's not what I paid for*";

(2) **sadness** "*I don't have the opportunity to celebrate my success with family - no convocation, no dinner party*" and "*My kids sacrificed a lot with me being in school and they don't get to see me walk across the stage*";

(3) **helplessness** "*Would I have to repeat in the fall*";

(4) **frustration** "*I was so frustrated with my peers as they were so mad at the instructors and university and sending angry emails*" and "*I lost my dream job by not having a 10-week practicum*" and

(5) **fatigue** "*Social media, news outlets and social distancing 24-7 left me burnout*" and "*No*

person or thing to blame for the pandemic - there hasn't been enough closure."

Faculty. A similar theme of fatigue was noted amongst the faculty. Faculty can have the opportunity to choose when they interact with students and where they are working from (Gazza, 2017). Although flexibility is an advantage, it can also be a challenge, participants in Gazza's study discussed feeling a need to engage with students and technology 24 hours a day (2017). Assessment of student needs and understanding was more challenging for faculty teaching in an online environment, therefore increased communication and increased time was needed to support student success (Wingo et al., 2016). The process of grading and regrading (students were able to re-submit if they were not successful the first time) 105 student assignments was exhausting over a three-week period in April. Faculty members spent about 1.5-2 hours grading each submission (there were approximately 57 students who re-submitted one or all three case studies). As faculty we felt a huge pressure to return submissions quickly with extensive feedback especially for those students who needed to resubmit. By the end of May we felt that we had recovered emotionally, physically and mentally from the marathon of grading in the redesigned course.

Recommendations: As previously noted, this discussion occurred post completion of the redesigned course. The opportunity to engage in critical reflexivity with distance from the actual experience highlighted recommendations for future course design. The inclusion of a student perspective provides uniqueness to educational reform within a pandemic context.

Rubrics: Anecdotal feedback from students suggested the MOOC (Future Learn, 2020) was an enjoyable learning experience. However, the corresponding case studies were not an enjoyable experience as there was much confusion regarding expectations. Although there were directions on the process of the assignment, the absence of a rubric was detrimental for the learning experience. Students previously had received rubrics for their theoretical courses which provided confidence in understanding what the faculty wanted from them. Rubrics were not provided as there was not one preferred answer for the case studies. Answers

would be based on previous learning experiences, including clinical, and faculty did not want to hinder creativity. All agreed that rubrics need to be introduced in the beginning of a program of study and then gradually removed in advancing years. The following quote from one of the students articulates the direction of course redesign with respect to rubrics.

> *"Faculty need to look at the entire program of study to begin self-directed "autonomy" earlier on instead of just leaving it to fourth year."*

Alternative Methods to Writing: Writing effectively is an outcome of many undergraduate programs. The reliance on written work, such as this MOOC case study assignment, privileged some students. Students whose primary language was not English or who had a learning-processing challenge were affected by having only one method to present their ideas. Students could present their ideas in sentences, graphics and other forms of written expression. However, this did not decrease the stress level of many students and was evident on their initial submission and then confirmed by the student's faculty member. Therefore, in consultation with both the affected student and faculty member an alternative, face-to-face virtual platform, provided the opportunity for an oral discussion for resubmission. Anecdotally, students who had this opportunity were extremely thankful as they felt the high-stakes of this assignment was decreased when they were able to verbalize their answers. From a humanistic nursing educational perspective, multimodal learning expressions should be provided to enhance teaching and learning experiences.

Meaningful Learning: Although MOOCs as a learning platform are not new, they were unfamiliar to this group of learners. Lack of comfort and familiarity with online learning strategies and technology may be another challenge for students and instructors when participating in online delivery. Being unable to confidently use the technology needed for an online course can impact the learning environment for both faculty and students, technological challenges can distract from the process of learning (Sitzman et al., 2016; Wingo et al., 2016). Therefore, introduction to a variety of learning experiences should be included in course design.

As previously stated, the MOOC was an interactive and enjoyable learning platform. Students felt that the case studies should have been tailored to their specific clinical area for meaningful learning. Specifically, the teaching case study would have been more relevant if reflective of their five-week clinical practicum ensuring pandemic knowledge to practice. The following quote clearly describes the importance of congruence between theory and practice.

> *"Self-directed learning is extremely important because we never know what we don't know until we explore it."*

Providing opportunities for discovery of knowledge is vital in undergraduate education to foster life-long learning as a professional. A focus on balancing grades and socialization to the role of a professional must be intentionally integrated for all courses.

Finding Voice as a Professional: Consensus that vulnerability (the ability to fail safely, recognize mistakes and begin again) was not a common experience in the program. Students shared experiences of their fear of not doing something right; jumping through hoops - doing what your instructor expects which is why the need for a rubric; and chasing the grade instead of focusing on the learning experience. This is exemplified in the following quote,

> *"I have a fear of instructors thinking I am incompetent or doing poorly in a course - or worst case failing and being behind a semester losing my friends/support group and my family thinking poorly of me plus the associated financial burden."* Nursing is not just about completing the tasks assigned for patient care but also understanding who you are becoming as a professional which provides the impetus for continued growth.

Conclusion: Reflecting back on the experience, with emotional distance, all authors agree that the redesigned course was a very unique experience creating challenges while fostering resilience in an unknown world. The major outcome was of resilience as a conscious decision on how you [as a student] will respond to unknown situations. The choice of responding negatively or positively to an opportunity ultimately determines if you become

stagnant in your fear or embrace the challenge to become a professional.

The overarching goal of the course was to ensure graduates are safe, competent, ethical and compassionate (CARNA, 2019). Specifically, the student must demonstrate:

(1) relational strategies to adapt to situational demands,

(2) evidence-informed clinical decision-making,

(3) evaluation of nursing interventions,

(4) navigating and mitigating socio-political and economic influences on nursing practice and healthcare system sustainability and

(5) identifying opportunities for ongoing professional development.

Creating learning experiences to foster a diverse skill set to identify knowledge gaps, find reputable sources and then apply in clinical practice needs to be a larger focus in undergraduate degrees in order to better support nurses throughout their practice, especially in times of chaos.

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