

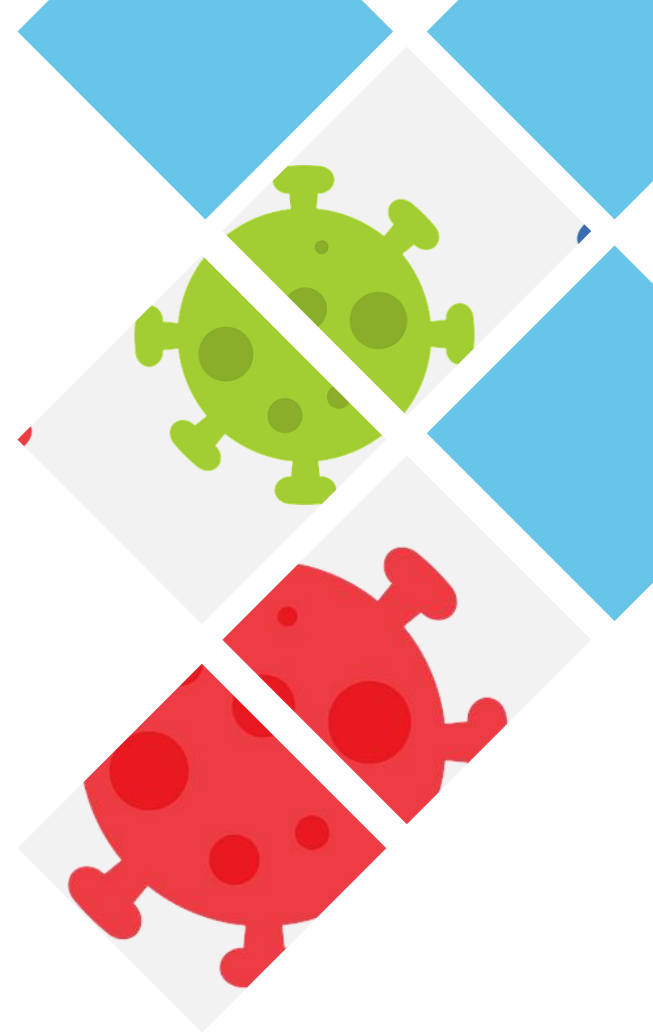
Lessons Learned in Nursing Education: a national survey

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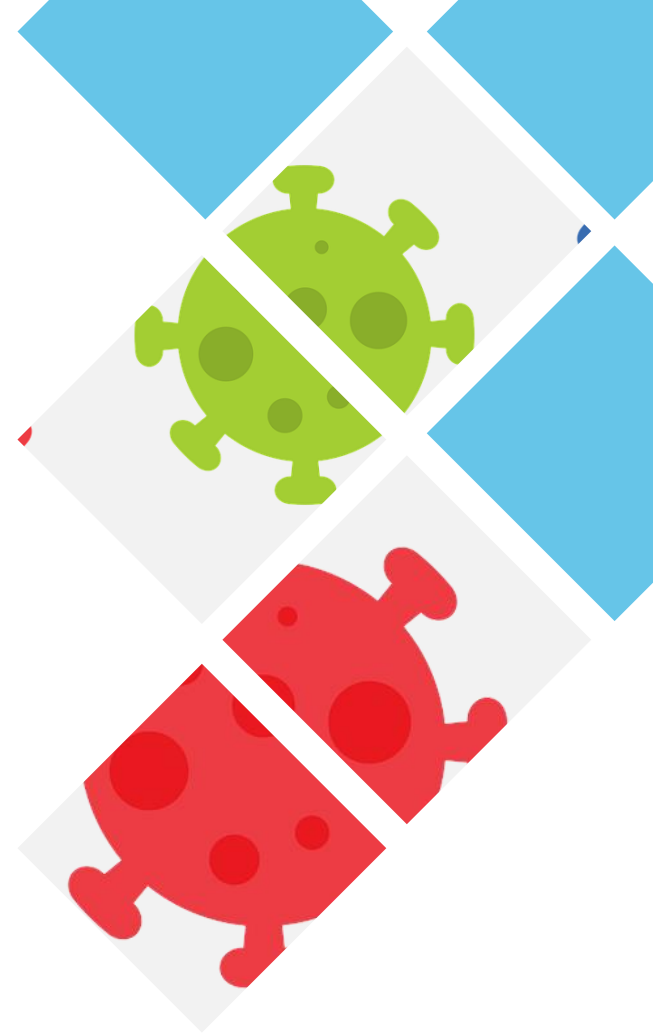
Background_1

- ❑ Italy was the second country affected by the COVID pandemic in early 2020.
- ❑ During the pandemic Nursing Programs had been significantly changed to ensure educational continuity.
- ❑ Classroom lectures moved online, most universities suspended clinical rotation replacing them with distance learning. Only a few tried to maintain in-person clinical training.



Background_2

- ❑ These unplanned changes affected nursing education at a global level, leading to reflections on the resilience of educational systems and their ability to adapt to students' learning needs in an evolving context.
- ❑ Today, simply reverting to pre-pandemic teaching methods without assessing the changes made, might overlook the unique learning opportunity that this experience provided.
- ❑ **Lessons Learned in Nursing Education - LessonsLearNED Project**



Objectives

1st Phase

Explore, at the national level, which teaching strategies were introduced during the pandemic phase and which were considered effective.

2nd Phase

Survey, at the national level, which is the degree of agreement on what emerged from 1st phase, which teaching practices are currently in use and which should be:

- maintained even in the post-pandemic phase;
- suspended or just considered in terms of preparedness strategies for emergency situations.

Methods



1st Phase

- Qualitative descriptive study, 2022-2023.
- Network of 9 Italian universities.
- Purposeful sample of informants available to participate:
 1. Faculty members (FMs)
 2. Clinical educators (CEs)
 3. Students (STs)

- Open-ended questions:
 1. *Which changes in nursing education have you implemented or experienced during the pandemic period?*
 2. *In your view/experience, which of these changes should be maintained and valued in the post-pandemic era according to their effectiveness?*
 3. *What recommendations should address the transition of nursing education in the post-pandemic era?*

1st Phase

- 130 interviews: 37 FMs, 28 NEs, 65 STs.
- 9 strategies/general recommendations - 20 sub-recommendations for effectively transitioning nursing education in the post-pandemic period.

1. Acknowledge distance learning as a valuable complementary strategy
2. Maximize the learning opportunities of the skill labs
3. Rethink the clinical rotations
4. Refocus the clinical learning aims
5. Reflect on how to effectively integrate different spaces and times of learning
6. Continue with inclusive and sustainable approaches
7. Create and sustain the modern student community
8. Be ready: have a pandemic education plan
9. Redefine and launch new research priorities



2nd Phase

- Web based survey
- Target population: 228 coordinators of Italian nursing degree programs
- Sent January 10th 2024, deadline March 10th
- Demographic section
- Section aiming to measure the level of adoption of each recommendation and the level of agreement around each recommendation effectiveness, if adopted.

What is the adoption status of this recommendation in the nursing program you are employed?

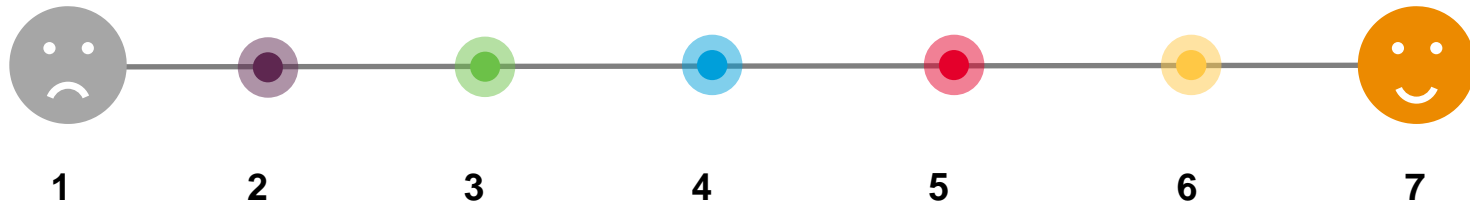
- a) adopted during the pandemic and still in use;*
- b) adopted before the pandemic and still in use;*
- c) adopted during the pandemic and then abandoned;*
- d) adopted before the pandemic and then abandoned;*
- e) never adopted.*

Methods



2nd Phase

*If adopted, can you indicate how effective you find it?
(from 1 “not at all” to “7 very much”)*



If abandoned or suspended, can you indicate why?

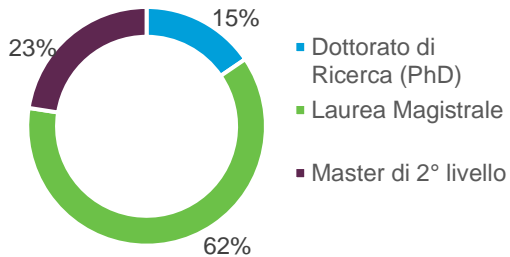
Preliminary results



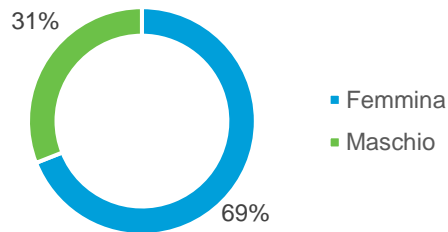
2nd Phase

- Response rate 31% (71/228)
- Age, years: mean 53, SD 8.62
- Seniority, years: mean 17, SD 8.84

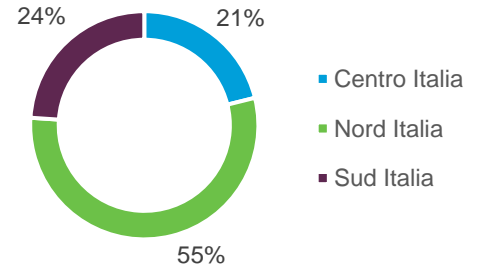
Education



Gender



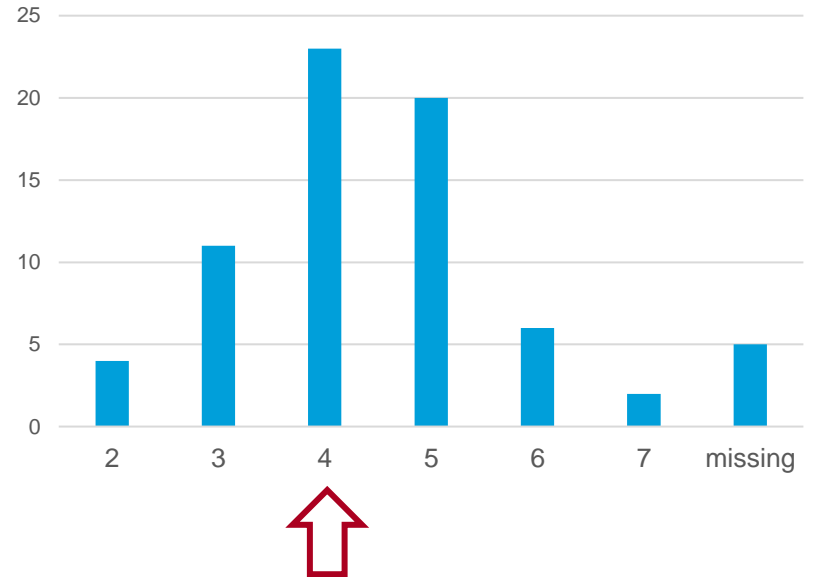
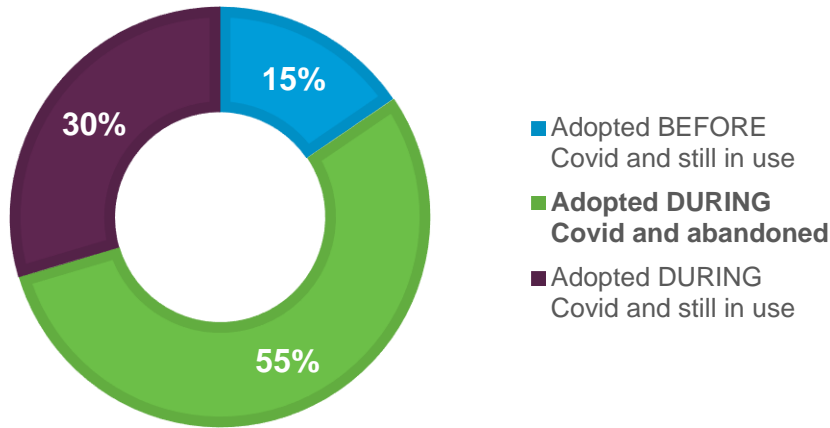
BSN location



2nd Phase

1. Acknowledging distance learning as a valuable complementary strategy

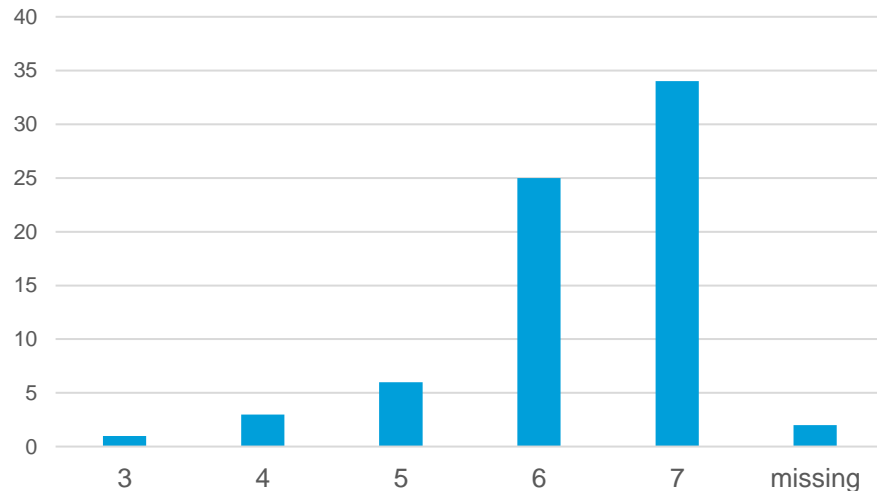
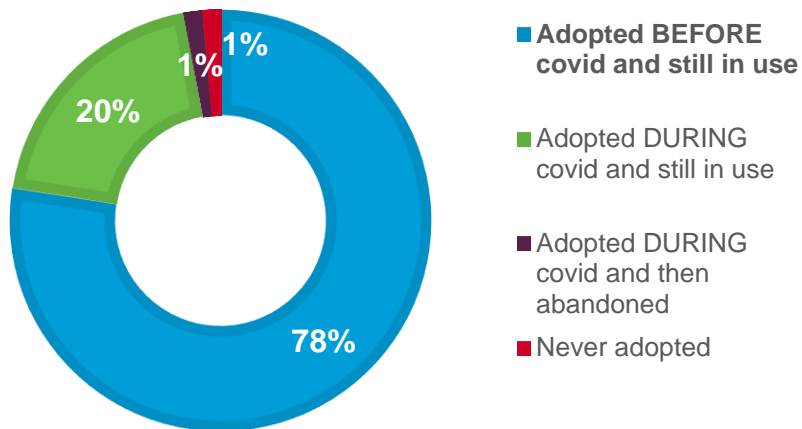
1.1 Maintaining **distance learning** as an opportunity to **reinforce and integrate** the in-classroom teaching by valuing its complementary role to the traditional learning and teaching activities



The highest % of participants declared this strategy as adopted during covid and then abandoned and they ranked it 4 on the scale from 1 to 7 in terms of effectiveness

4. Refocusing the clinical learning aims

4.2 Focus clinical learning processes on **best practices for infection control**

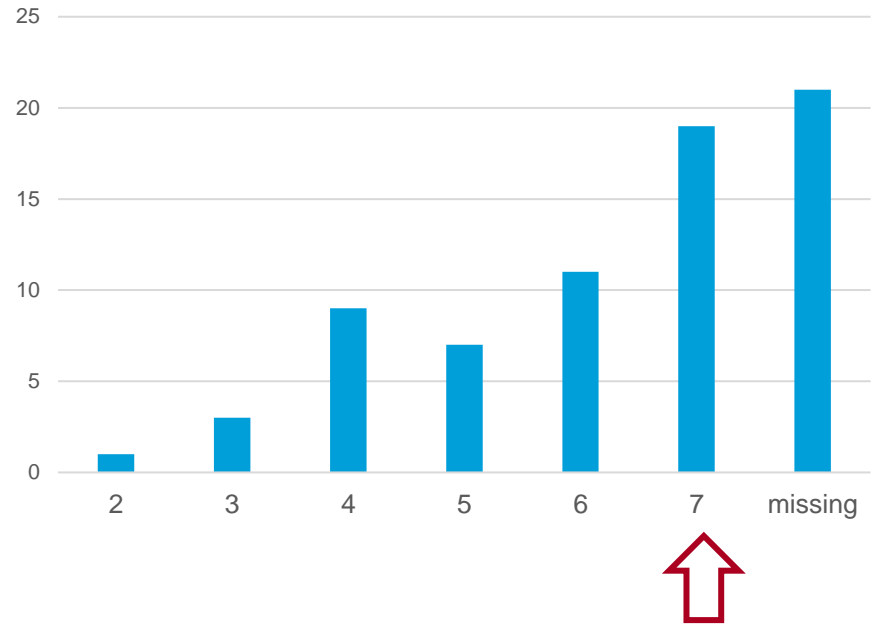
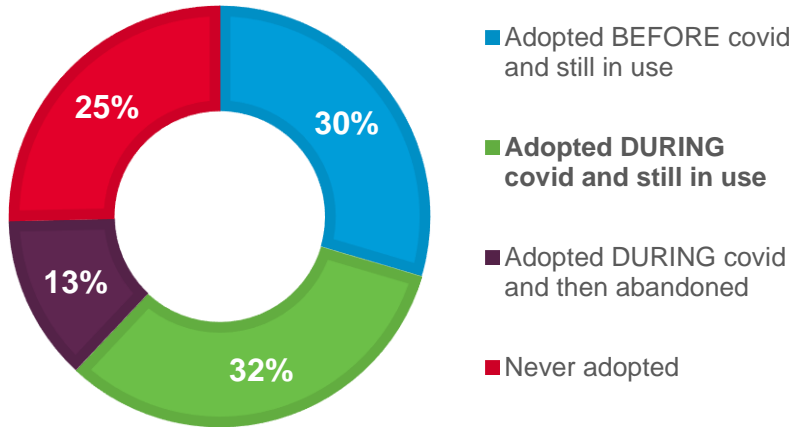


The majority of respondents declared that this recommendation has been adopted before covid and is currently in use and they ranked it 7 in terms of effectiveness



6. Continuing with inclusive and sustainable approaches

6.2 Increasing a paperless approach in each point of education, by reflecting on what can be transferred digitally and revising nursing program regulation



The highest % of respondents declared that this recommendation has been adopted during covid and is currently in use and they ranked it 7

2nd Phase

		Adopted DURING covid and then abandoned	Adopted DURING covid and still in use	Adopted BEFORE covid and then abandoned	Adopted BEFORE covid and still in use	Never adopted	Mostly ranked
1.1	Maintaining distance learning as an opportunity to reinforce and integrate the in-person learning and teaching activities	55%					4
1.2	Structuring and organizing teaching and classroom activities				34%		6
1.3	Invest in digital resources including in the design and management of online teaching activities				30%		5
1.4	Invest in digital resources and administrative staff					37%	5
1.5	Shift from a free-form approach, adopted as an urgent solution, to a structured approach in the degree program, where platforms, technologies, and systems are considered an integral part of the investment and learning environment		37%				5
1.6	Maintain the video-recording of lectures to enhance learning and ensure their availability afterwards or for students with specific needs	48%					5
2.1	Identifying which learning activities should be offered in the context of skill labs to anticipate the in-presence session (e.g. briefing) or as a post-lab reflection (e.g. debriefing) to maximize the time used in the labs	31%					6
2.2	Strengthening the learning outcomes of skill labs by increasing their intensity offering them for small groups (no more than six students) and in limited duration, thus making these precious resources accessible, effective and impacting all students				42%		7
3.1	Redesign clinical rotation in terms of duration/hours and supervision models: ensure extended clinical experiences in the same setting as they allow for greater continuity				56%		7
3.2	Redesign clinical rotation in terms of duration/hours and supervision models: propose 1:1 supervision models, as they ensure greater learning effectiveness				59%		7
3.3	Consider new settings, capable of reflecting current professional practice (e.g., outpatient clinics) - that go beyond traditional operative units				75%		6
3.4	Maintain decentralized internship experiences, even "close to home," that can engage students, help them belong to, and ensure accessibility to a variety of settings and students, spreading the presence of the program in the region/area, including peripheral/remote zones				59%		6
4.1	Focus clinical learning processes on addressing patients' fundamental needs.				80%		7
4.2	Focus clinical learning processes on best practices for infection control				78%		7
4.3	Emphasize the importance of shared clinical reasoning and multidisciplinary approaches				83%		7
4.4	Promoting strategies supporting students in facing complex clinical rotations, where the quality of the environments or the quality of the tutorial strategies may be suboptimal due to the disruption generated by unexpected events (e.g. a pandemic)				49%		7
5.1	Reviewing the nursing programme planning considering the different learning activities offered, by also including virtual activities, which should be visible and integrated effectively with the time devoted to lessons, skill labs and clinical rotations		31%				6
6.1	Continuing in the digital transformation of nursing programs to facilitate inclusiveness and sustainability, which may affect proximity, timeliness and personalized approaches to students	37%					5
6.2	Increasing a paperless approach in each point of education, by reflecting on what can be transferred digitally by revising nursing program regulation		32%				7
7.1	Researching and experiencing new practices capable of creating the 'academic community' of students in which their physical and virtual presence are facilitated and enriched				41%		7
8.1	Developing an educational pandemic plan at the national and/or local levels	32%					7

Adoption status and effectiveness ranking

All the recommendation taken into account

What the highest % of respondents declared for each recommendation

2nd Phase

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1.1	Maintaining distance learning as an opportunity to reinforce and integrate the in-classroom teaching by valuing its complementary role to the traditional learning and teaching activities	55%					4
1.2	Structuring and investing in online platforms dedicated to teaching and classroom technologies for blended approaches.				34%		6
1.3	Invest in digital skills learning opportunities for faculty, including in the design and management of online teaching activities				30%		5
1.4	Invest in digital skills learning opportunities for students and administrative staff					37%	5
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1.1

Distance learning

Maintaining distance learning as an opportunity to reinforce and integrate the in-classroom teaching

1.2

On-line Platforms

Structuring and investing in online platforms dedicated to teaching and classroom technologies for blended approaches

1.3

Faculty's digital skills

Invest in digital skills learning opportunities for faculty, including in the design and management of online teaching activities

1.5

Technology integration

Shift to a structured approach in the degree program, where platforms, technologies, and systems are considered an integral part of the investment and learning environment

1.6

Video-recorded lessons

Maintain the video-recording of lectures

2.1

Skill labs

Identifying learning activities to be offered in the context of skill labs to anticipate the in-presence session or as a post-lab reflection to maximize the time used in the labs

5.1

Virtual activities

Reviewing the nursing programme by also including virtual activities and simulation

6.1

Digital transformation for sustainability

Continuing in the digital transformation of nursing programs to facilitate inclusiveness and sustainability

8.1

Educational pandemic plan

Developing an educational pandemic plan at the national and/or local levels

Actions/strategies mostly adopted DURING covid (declared by >50% of participants)

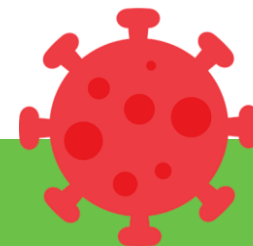


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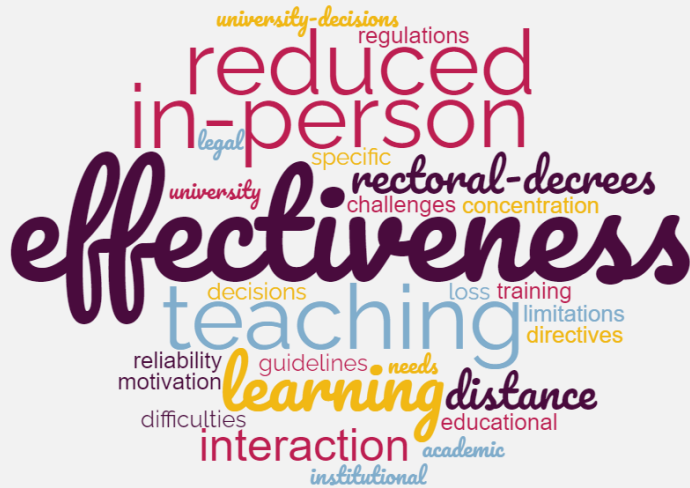
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1.6

Maintain the video-recording of lectures to enhance learning and ensure their availability afterwards or for students with specific needs



ABANDONED actions/strategies among those mostly adopted DURING covid (> 50%)



Reasons for abandoning distance learning

- Decisions and directives made at the university level, through rectoral decrees and academic guidelines
- Evaluation of in-person teaching as more effective
- Difficulties encountered with distance learning, such as reduced interaction, concentration, motivation, and a loss of reliability
- Regulatory restrictions that limit the use of distance learning, such as maintaining distance learning within a certain % of the total planned hours
- Specific training needs: role of interaction in the classroom, particularly relevant in fields that require practical skills

1.5

Shift to a structured approach in the degree program where platforms, technologies, and systems are considered an integral part of the investment and learning environment

1.6

Review of the nursing programme planning by also including virtual activities

6.2

Increasing a paperless approach in each point of education, by reflecting on what can be transferred digitally and revising nursing program regulation



Research priorities on nursing education in the post-pandemic



- New digital solution for nursing education
- Students' mental health and emotion management
- Reflection on nursing identity and how it can be developed and sustained
- Identification of new educational needs in the post-pandemic context
- Strategies to reduce dropouts and promote completion of studies
- Emergency preparedness
- Interdisciplinary collaboration
- Community care



Gracias
Gràcies
Thank you
Merci