



March 2021

The Challenges and Successes of Teaching in a Pandemic - A Nursing Faculty Commentary

Katie Daigle
University Louisiana Monroe, daigle@ulm.edu

Follow this and additional works at: <https://repository.ulm.edu/ojihp>



Part of the [Other Nursing Commons](#)

Recommended Citation

Daigle, K. (2021). The Challenges and Successes of Teaching in a Pandemic - A Nursing Faculty Commentary. *Journal of Interprofessional Practice and Collaboration*, 3(1). Retrieved from <https://repository.ulm.edu/ojihp/vol3/iss1/5>

This Article is brought to you for free and open access by ULM Digital Repository. It has been accepted for inclusion in Journal of Interprofessional Practice and Collaboration by an authorized editor of ULM Digital Repository. For more information, please contact hughes@ulm.edu.

The Challenges and Successes of Teaching in a Pandemic - A Nursing Faculty Commentary

Abstract

The purpose of this paper is to discuss alternative teaching methods, specifically those used for nursing clinical instruction during the abrupt transition to the online environment during the COVID-19 pandemic.

Keywords

Teaching, Pandemic

The Challenges and Successes of Teaching in a Pandemic – A Nursing Faculty

Commentary

Spring 2020 brought unprecedented challenges to the world of academia. Nursing schools suffered the shock of being sent home to begin online instruction alongside the rest of America. Nursing education involves a clinical component, which is normally achieved by taking care of patients at the bedside. In March 2020, the bedside clinical instruction was ended for the semester due to COVID-19. The total number of reported COVID-19 cases in the United States on March 16, 2020, was 4,226, and that number increased to 44,183 in one week's time (Centers for Disease Control and Prevention, 2020). The purpose of this paper is to discuss alternative teaching methods, specifically those used for clinical instruction during the abrupt transition to the online environment during the COVID-19 pandemic. Transitioning clinical instruction to an online platform is what many would consider the biggest challenge faced in Bachelor of Science in Nursing curricula during the onset of the pandemic.

Kitty DeGree School of Nursing quickly adapted teaching strategies to meet the challenges of online clinical instruction. Faculty collaborated and created plans to help students meet objectives in a variety of ways. Many of our team used some of the same methods. We used case studies purchased through KeithRN™, an educational platform used by nursing instructors to prepare nursing students to critically think (KeithRN™, 2021). The case studies allowed students to practice clinical judgement with complex patients. Case studies were unfolding, meaning the students would have to assess and interpret the patient data, develop a plan of care, evaluate changes in patient status, and make adjustments to the plan of care accordingly. Completing one portion before moving on to the next part of the unfolding case study assisted students in learning clinical decision making skills. Faculty worked together and created discussion forums, presenting

situations that we regularly experience in the clinical environment. These forums gave students the chance to critically think through these situations despite not experiencing them in a face-to-face environment. Faculty created worksheets for students to complete to aide in progressively working through objectives like quality improvement, professionalism, communication, and confidentiality. The students were assigned scholarly articles to read and consider in order to complete the worksheets. The nursing department purchased an online simulation experience from Shadow Health®, Inc. (Shadow Health®, Inc., 2021). The simulations were Digital Clinical Experiences™ that allowed students to practice patient care in a safe, standardized environment. The students were able to gain a great deal of assessment and patient interviewing skills by practicing with virtually programmed patients using this platform.

While several methods created and chosen were shared by faculty, each clinical faculty could also continue to use individual methods to instruct their assigned clinical group. One method that I created and enjoyed was called the Email Game. At the end of grading every week's submitted assignments, I would identify several key concepts that the majority of the group missed. Each week, I formulated an email to the group reiterating key points and objectives, clarifying confusing topics, and asking questions about the key concepts the group missed. The questions were what comprised the email game. Rather than lecturing the students with correct information about what they missed, I would try to get the group to think through the concepts and understand the concepts on their own. This is an example from one of my weekly emails: Several of you said the fluticasone/salmeterol diskus' expected outcome was to relieve allergy symptoms. This is incorrect. Why are we giving this drug? What is the expected outcome? Would we give it to this patient if he didn't have any allergy symptoms? What form of fluticasone is for allergy symptoms?

The instructions for the Email Game were that a certain emoticon within the body of the email denoted a question (or multiple questions) for the group. Students would choose which one they wanted to answer and would “reply all” with the correct answer to win points. I would make sure there were enough questions in the email for the entire group to have an opportunity to answer once. There were restrictions that each student could only answer one question until midnight. After midnight, whichever questions were left, students could answer and win as many as they chose. Whoever had the most points at the end of the six-week clinical rotation won a free Chick-fil-A meal.

I enjoyed this teaching strategy because it made long feedback emails seem less boring. It engaged students and let them take responsibility in their learning. It allowed for friendly competition to keep students motivated. Students responded well to the game. One student wrote in a final journal entry, “I am a kinesthetic learner. I’d say that the post-conference emails were effective because it required some kinetics by looking up answers to questions my instructor was asking related to our clinical assignments that week.” This journal entry was encouraging because I had not considered the appeal to different learning styles, including kinesthetic.

In Spring 2020, I learned more than I thought possible about the online learning environment and alternative methods used in teaching. I think our team adapted well. There are areas we learned from and areas in which we could make improvements. Overall, it was an encouraging time. I realized I could demonstrate more flexibility than I knew I had, and my teaching could benefit from exploring other methods and activities. As a faculty member, it was nice to be given the time, opportunity, and setting to explore and implement new strategies.

References

Centers for Disease Control and Prevention. (2020, August 27). *Previous U.S. COVID-19 case*

data. https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/previouscases.html#anchor_1598477381

KeithRN™. (2021). *Tools that prepare nursing students for practice.* <https://www.keithrn.com/>

Shadow Health®, Inc. (2021). *Digital Clinical Experiences™.* <https://www.shadowhealth.com/>