



COVID-19 has changed nursing education for good

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Photo: COVID-19 has changed nursing education for good

Digital literacy, commitment to social distancing, and improved communication skills have become standard requirements in nursing education in a post-COVID world.

“Before COVID, nursing students were required to, at a minimum, attend a simulation block on campus prior to clinical placement,” says Charles Darwin University, Nursing Academic Lead, Nicole Norman.

“This simulated learning gave students the opportunity to practice in a safe clinical environment and receive real time feedback.

“Working side by side on patient scenarios using medical equipment is essential to learning the nursing role.

“It is really up to the student to determine what mode suits their learning. Online delivery is very popular, especially among mature aged students with good time management skills.”



While face to face and online learning is very balanced in the CDU nursing program, nursing has traditionally included a strong component of on-campus learning, she says.

But the COVID-19 pandemic changed all of that.

“Initially COVID stopped all simulated learning and clinical placements,” says Ms Norman.

“Health services across the country immediately closed their doors to protect patients and staff.

“This meant our nursing students were unable to continue with clinical placement and they could not progress in their degree.”





could be maintained.

“Nursing students were encouraged to support each other and help spread the word to family and friends on hand hygiene and social distancing.

“This extended to how to stay mentally and physically well in isolation/quarantine.”

But while extreme measures have been temporary, the pandemic has prompted permanent changes to the way in which nursing education is delivered.

“Online learning is here to stay and academics, in a very short time frame, needed to adapt course structures and teaching pedagogy to this learning environment, which is very different to face to face.

“Clinically we needed to work closely with health facilities to ensure our nursing students could still attend clinical placement without any risk to patients and staff.

“COVID highlighted the need for more health professionals so we needed to get third year students completed so they could enter the workforce and help during the pandemic.

“We altered our clinical teaching spaces to ensure social distancing and implemented strict personal protective equipment, so everyone was safe.”

Ms Norman says the biggest changes have been the increased importance of communication skills, the use of masks, digital technology, and primary health care.

“Communication has always been taught in nursing studies, but now with mask wearing we need to communicate better.

“In aged care with families unable to visit loved ones, nurses need to communicate more effectively to ensure everyone feels included.”

Ms Norman says the increased use of digital technology has also added to communication barriers.

“Interacting is human nature.

“We read our body language and facial gestures to understand each other but digital technology is taking elements that away from us.

“For some students this may affect them mentally and physically, while others will embrace this and become more focused.”

Ms Norman says COVID has also prompted an increase in appreciation for primary health care among nursing students.

“Students are now starting to understand how important primary health care is.

“A lot of students think acute care nursing, especially emergency nursing or ICU nursing, is the cream of the crop – I think that’s because Hollywood is very good at sensationalising or sexualising these health areas.

“But the real work that impacts communities and families is primary health care.”

But perhaps the most significant long-term change is the growing appreciation for nursing as a profession.



“Nursing has always been a trusted profession, but now people respect the role and the sacrifices nurses make to care for others.



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everywhere, including in the boardroom developing policy, and within the community influencing behaviour change.

“Nurses will continue to upskill and multiskill so they can provide nursing care in any environment.”

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