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Nursing Students' Perceptions of Using an Educational Modality of Online Clinical Learning

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Walden University

College of Education

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Esther Edgal

has been found to be complete and satisfactory in all respects,
and that any and all revisions required by
the review committee have been made.

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Walden University

2022

Abstract

Nursing Students' Perceptions of Using an Educational Modality of Online Clinical

Learning

by

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MSN, Winston-Salem State University, 2015

BSN, Winston-Salem State University, 2011

BSC, University of Benin – Nigeria, 1986

Project Study Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Education

Walden University

November 2022

Abstract

Many clinical nursing courses have changed to an online format due to the COVID-19 pandemic, causing challenges for both students and faculty in supporting students' academic needs. The purpose of this basic qualitative study was to investigate nursing students' perceptions of how the instruction in online modality clinical nursing courses supported their academic needs and faculty behaviors as well as gather the students' suggestions of what would improve online nursing education. The conceptual framework was adapted from Kearsley and Shneiderman's theory of engagement that offers instructional best practices for the online environment. The research questions related to nursing students' perceptions of the instruction from online clinical nursing courses and faculty behaviors as well as their suggestions of how to improve online clinical nursing education. A sample of 19 student nurses who took at least one semester of an online course and registered to continue the online clinical modality were interviewed face-to-face and using interactive video conferencing. Data collected from the interviews were analyzed using open and axial coding, resulting in the following themes: desire for professor engagement, peer interaction, barriers in online learning, and engagement with instructional materials. These emergent themes were used to develop a 3-day professional development training program that improves online clinical learning by increasing online clinical nursing educators' awareness of digital resources and understanding of how to create engaging online learning environments which improves their quality of instruction. The results of my study could lead to positive social change because increasing the quality of online clinical nursing instruction leads to nursing student retention and successful nursing student graduates who go on to provide care to their communities.

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Dedication

I dedicate this work to my children who are my confidants, my sanity, and my constant cheerleaders on this journey. You motivated me through the difficult times. I could not have done this alone. Thank you for understanding and sacrificing precious family time. I hope my desire for learning has inspired you to achieve higher career goals. I love you all beyond measure.

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Section 1: The Problem

The Local Problem

Online learning has grown from a basic discussion board to simulations and virtual classrooms. The problem under study was that clinical nursing courses have changed to an online modality as a result of the COVID-19 pandemic, causing challenges for students' clinical learning and faculty difficulty with supporting students' academic needs. Online education is appealing to student nurses who otherwise might not pursue their education (Glasgow et al., 2017). Web-based learning effectively supports students' clinical learning process by offering additional virtual visual learning opportunities (Barisone et al., 2019). In their study evaluating nursing students' engagement in an online course using flipped virtual classrooms, Phillips and O'Flaherty (2019) examined the differences between online and face-to-face classes, student satisfaction, and learning attitudes. The researchers found that utilizing flipped classes offered students more opportunities to develop higher order thinking skills and to engage more deeply in the learning process with the need for continual upskilling of staff who teach in online environments. Developing a better understanding of students' perceptions of an online clinical modality can provide educators with insights for modifying their teaching strategies to increase students' engagement, persistence, and success in online learning.

A recent problem experienced by a nursing program at the study site college was student nurses' perceptions of the instruction in an online modality. Findings from the current study investigating how students perceive instruction from online modality clinical nursing courses to support their academic needs increased the study site's nursing

program's awareness of the virtual clinical learning environment and associated challenges. This study addressed the gap in practice, which was the lack of understanding regarding perceptions of students about web based clinical modality that could increase their engagement, persistence, and success in online clinical learning. This research project contributed new knowledge to the field that influences the virtual clinical education of nursing students and supports faculty in actively engaging their online students through course assignments and group discussions, thus effecting positive social change. Social implications of this study include nursing education faculty's understanding of engaging instructional techniques so they can better utilize online materials.

Rationale

Morin (2020) found that the recent COVID-19 pandemic has required nurse faculty to be innovative and flexible. Nursing faculty have had to move in-person classes online and offer alternative clinical experiences. Though Dewald (2020) stated that a student-centered, rich, and active learning environment occurs in online learning, there have been challenges in supporting students' academic needs using an online clinical modality at the study site.

Barisone et al. (2019) explored the effectiveness of web-based learning in facilitating clinical skills development in undergraduate nursing students. Web-based learning effectively supports students' clinical learning process by offering additional, virtual, visual learning opportunities. Barisone et al. stated that although web-based learning in nursing is growing, its use as a clinical modality is still limited (Barisone et

al., 2019). The difficulties involved in teaching nursing students with an online clinical modality, such as access to the technology required for online learning was revealed during a discussion with leadership at the study site. Therefore, in this study I investigated how students perceive the instruction from online clinical modality nursing courses supports their academic needs.

Definition of Terms

COVID-19: An infectious disease caused by a newly discovered in 2019 coronavirus called SARS-CoV-2. The coronavirus is known to spread mainly from person to person through respiratory droplets produced when an infected person coughs, sneezes, or talks. Some people who are infected may not have symptoms (Centers for Disease Control and Prevention, 2021).

Pandemic: A worldwide spread of a disease that extends over large geographical areas; for example, severe acute respiratory syndrome, categorized as transregional (Morin, 2020).

Simulation laboratory: A space designed to provide learning experiences for health care practitioners and students. A simulation center consists of realistic-looking clinical rooms, manikins, and equipment that allow learners to practice and develop clinical expertise without any risk of patient harm (Kim et al., 2016).

Virtual learning: A learning experience utilizing computers and the internet taking place both outside and inside educational facilities. The instruction most commonly takes place in an online environment (Alves et al., 2017).

Significance of the Study

Nursing education is a combination of theoretical and clinical learning experiences that enable nursing students to acquire the knowledge and skills to provide patient care (Glasgow et al., 2017). Traditionally, nursing students complete their clinical experience in health care institutions and give nursing care to live patients; however, because of the COVID-19 pandemic, students could not enter health care facilities to complete their requirements for clinical learning. Many possible factors contributed to this conversion of learning format to online modality, including the “Safer at Home Order” of March 19, 2020 to slow the spread of COVID-19 (Executive Department State of California, 2020). This was a proclaimed state of emergency in the state of California as a result of the threat of the COVID-19 pandemic. This order was meant to preserve public health and safety and ensure the health care delivery system can prioritize its service. There is a gap in the literature about the virtual learning experience for nursing students because their perceptions regarding online clinical learning are unknown. The problem under study was that clinical nursing courses have changed to an online modality as a result of the COVID-19 pandemic, causing challenges for students’ clinical learning and faculty’s support of students’ academic needs.

Nursing administrators at the study site college attested that there was a notable decrease in online clinical attendance and lower quiz scores, indicating that nursing students may struggle with an online modality. It is possible that the nursing program might add online clinical modalities to their courses post-COVID-19 pandemic; therefore, the results of this study helped me develop a professional development training

program that will increase the effectiveness of online clinical learning at the study site and make it a valuable modality to future nursing students.

Research Questions

The problem was that nursing students' perceptions of online clinical learning are unknown. The purpose of this study was to investigate how nursing students perceive the instruction in online modality clinical nursing courses supports their academic needs and faculty behaviors as well as gather their suggestions for what would improve online clinical nursing education. The research questions that guided this study were:

1. How do nursing students perceive the instruction in online modality clinical nursing courses supports their academic needs?
2. How do nursing students describe their perceptions of faculty behaviors, and how do these behaviors in virtual clinical nursing courses contribute to a supportive learning environment?
3. What do students experiencing online clinical modalities suggest would improve online nursing education?

Review of the Literature

This literature review focuses on research topics related to online nursing education, students' perceptions, and online clinical modality challenges. To ensure a comprehensive search of published literature, I conducted online searches for peer-reviewed articles published between 2016 and 2021 using the databases and search engines of CINAHL, ERIC, Google Scholar, ProQuest Nursing, and PubMed. Additional sources were identified from the reference lists of reviewed articles. In this literature

review, I summarize patterns of findings and challenges that describe nursing education using an online clinical modality and challenges to the use of technology in nursing education. The following topics are also addressed: lack of clinical sites, the minimum relationship between students and faculty, and a shift to an online clinical modality resulting from the COVID-19 pandemic.

Conceptual Framework

Researchers use a conceptual framework to structure their research to answer the research questions. Patel (2016) stated that researchers' study findings are dependent on the data collected from their research. This study's conceptual framework was adapted from the theory of student engagement. In their theory of engagement, Kearsley and Shneiderman (1998) offered instructional best practices for the online environment. They defined engagement as a learning strategy that motivates students to collaborate with other students and the educator while showing continuous involvement in their learning, leading to more satisfaction and academic success. Engagement may occur when technology is emphasized in an online course to encourage student collaboration with their peers in a shared learning environment, thus providing various learning perspectives (Kearsley & Shneiderman, 1998). In the theory, they presented a method of creating meaningful collaborative learning teams outside the physical classroom environment. In the process of collaboration, students clarify and verbalize their perception of online learning, thereby facilitating solutions (Kearsley & Shneiderman, 1998). In engagement theory, emphasis is placed on providing a meaningful environment for online learning.

This theory was intended as a conceptual framework for technology-based learning and teaching and implied that effective online student learning was collaborative and authentic, requiring students to be meaningfully engaged with learning activities and other students in the learning environment (Kearsley & Shneiderman, 1998). The theory emphasizes meaningful learning, collaboration, and self-directed learning. Other researchers have also indicated that student engagement is necessary for effective learning (Kahu & Nelson, 2017). In the online learning environment, engagement is critical given students' feelings of isolation and disconnection from other students and their educators. Kahu and Nelson (2017) discussed the importance of student engagement in learning and found that lack of access to technology off-campus inhibits students' engagement. Technology is required for students in online learning to communicate with their educators as well as with other students. The theory of engagement was helpful to the current study on nursing students' perceptions of an online clinical modality.

Review of the Broader Problem

History of Online Learning

In the academic world, distance learning (also known as eLearning) was initially introduced in the 1990s to support traditional face-to-face education (Richardson et al., 2016). The change to online learning requires that institutions review their approaches and strategies to accommodate learner diversity and needs in the online environment (Judge & Murray, 2017; Stocker, 2018). The various teaching and learning models used in health care include traditional teaching models associated with blended learning using

innovative technology, such as simulation and virtual learning environments (Barisone et al., 2019).

Online learning is described as a feasible, convenient substitute for traditional, face-to-face, classroom instruction. Online education helps students control the pace of learning, especially for those with personal commitments such as children (Ota et al., 2018). Online education is more successful when curricula can be directly related to the student's individual needs, interests, and goals (Rapanta et al., 2020). Engagement not only enhances student retention in campus-based education but also in online education. The interaction of students and faculty in online learning involves technology that is convenient to the learner (Rapanta et al., 2020).

Khanna and Prasad (2020) studied online education and problems faced by students and teachers due to the COVID-19 pandemic and alluded to the dependence on technology as inescapable. Their findings also showed that lack of knowledge was a problem involved with the use of technology in online learning. The majority of students faced internet issues and lacked the knowledge to use the internet and resolve problems related to technology (Khanna & Prasad, 2020).

Online Learning Versus Traditional Instruction

Wandera (2017) conducted a meta-analysis inclusive of more recent studies (comprising 30 studies and 3,687 participants total) that compared learning outcomes of face-to-face, online, and blended learning instruction for both K–12 (i.e., elementary and secondary education) and higher education. Blended or online learning had a slightly more positive effect on student learning outcomes compared to traditional, face-to-face

education. One positive aspect of online learning is that evolving technology has allowed the spread of knowledge to many people in every corner of the globe (Wandera, 2017).

Historically, nursing courses have been delivered using the traditional, face-to-face, lecture format. However, lectures are insufficient to meet the needs of today's student nurses for professional standards, so academic programs use online clinical modalities to facilitate the development of clinical skills in undergraduate nursing students (Barisone et al., 2019). As a result, dynamic interactive learning environments have been created through online education (Ward et al., 2018).

Online Nursing Education

Although online learning is rapidly expanding within the field of nursing, its use in teaching clinical skills to undergraduate students is still limited, and only a few studies provide evidence on the effectiveness of online clinical modalities (Liu et al., 2016). However, some studies on virtual and blended learning in nursing have results comparable to traditional, face-to-face learning (Barisone et al., 2019). Since online and blended learning methods are gaining popularity in higher education, a systematic evaluation of these methods will help faculty understand how these can be best utilized in a clinical modality (McCutcheon et al., 2018). The National Council of State Boards of Nursing, National Health and Safety Network, and World Health Organization have encouraged health care facilities and nursing education programs to form partnerships during the COVID-19 crisis to balance academic and workforce needs (Brugal, 2020). The conversion of clinical hours to simulation or an online format has forced student nurses to adapt their pre-COVID-19 learning methods.

Efficiency of Online Education

Of all registered college students, one third take some online classes, and half of those classes are hybrid (Protopsaltis & Baum, 2019). This trend has increased three-fold since 2010 (Bettinger & Loeb, 2017). Although post-COVID-19 pandemic data are not available for the percentages of instruction occurring online versus face-to-face, it is projected that the online learning industry will surpass \$370 billion by 2026 (Hanson, 2021). With this registration percentage and economic projection, efficiency becomes a concern. Efficiency in delivering knowledge in a nontraditional fashion becomes even more imperative in the absence or reduction of in-person contact.

The efficiency of online education has come under scrutiny with concerns about accessibility, technological device use, and financial implications. According to Protopsaltis and Baum (2019), online education has not improved the cost of learning, rather it frequently costs more, and fails to yield a positive return on investment. A study done at DeVry University, which offers online classes exactly mirroring traditional classroom courses except for the virtual component, showed that, on average, students taking online classes had grades 0.44 points less than their traditional student counterparts (Bettinger & Loeb, 2017). Bettinger and Loeb (2017) also reported that students taking online courses were more likely to drop out at a rate of about 9%. This decrease is considered in relation to an average of 88% of students staying enrolled the succeeding term (Bettinger & Loeb, 2017). Alisherovna (2020) noted that not all students were used to working independently, which is a frequent occurrence during nontraditional learning methods.

Online Education During the COVID-19 Pandemic

The COVID-19 pandemic led to an unprecedented time in the history of online nursing education in that the online clinical modality was introduced to nursing students. Jowsey et al. (2020) conducted a review of blended learning via distance education in nursing and found that before the COVID-19 global pandemic, there was evidence showing the efficacy of blended learning for nursing students who learn across distances and via satellite campuses. However, active engagement is paramount to student success in a blended learning environment (Jowsey et al., 2020). Nursing students reported challenges with information technology, inadequate infrastructure to support the effective use of computers and tablets, and weak internet and computer skills that led to their low confidence and satisfaction with online learning (Jowsey et al., 2020).

Advantages of Online Education

Medical education has been greatly impacted by the far-reaching effects of COVID-19 on all sectors across the globe. In Uganda, undergraduate students, including those pursuing medicine and nursing courses, were sent home and prohibited from entering the premises of some major university teaching hospitals nationwide; therefore, the online clinical modality presented a valuable option for the continuation of medical education amid the pandemic (Olum et al., 2020).

Technology has the ability to create new learning opportunities for rising health care professionals and enhance traditional methods of health care education. In a recent study, the majority of survey results were positive regarding experiences with virtual simulation as it provided students with valuable opportunities to enhance their learning

(Fogg et al., 2020). Nursing students who received clinical learning skills through training via a blended learning approach scored higher when compared to those who received an only online module in metrics for motivation, attitudes towards clinical supervision, knowledge of clinical skills, and satisfaction (McCutcheon et al., 2018). Internet use is changing the landscape of global health care and this need for trustworthy online learning experiences also highlights the importance of specialist health care providers developing content and delivering patient-focused webinars (Williams et al., 2020).

Nontraditional teaching methods have become more attractive to students as seen where manikin-based simulations met students' perceived learning needs for critical thinking, self-efficacy, and the teaching-learning dyad while virtual simulation met perceived learning needs for the nursing process (Badowski et al., 2021). With students being able to control their required activities in an online setting, online learning has continued to draw the interest of many students. In China, a similar study done at Taishan Medical University revealed 68% of students preferred the blended course over traditional, face-to-face learning, with the most highly rated advantages being flexible learning time (84%) and improved independent study skills (75%; Shang & Liu, 2018). In a study that evaluated the effectiveness of online clinical modality, data suggested that online students performed better than their peers with a traditional, face-to-face only component, and the students felt that the online experience was the same or better than the traditional, face-to-face clinical experience (Rowe et al., 2018).

Perceptions of Nursing Students

During my interviews, I received statements to the effect that although online learning has many advantages for students, such as allowing independent learning at an individual pace, with the flexibility of when and where electronic resources are accessed, conventional face-to-face learning environments effectively engage students in dynamic discussions because they have been studied and nurtured for years, while online learning modalities are relatively new. Phillips and O'Flaherty (2019) studied student engagement in an online course and found that only a few previous studies had assessed nursing students' experiences and outcomes after engagement with online learning. Gazza and Matthias (2016) evaluated student satisfaction with a new online accelerated nursing education program. They found that nursing educators promoted social presence in online clinical classes by setting expectations, such as the weekly interaction of students in an online forum. Phillips and O'Flaherty (2019) noticed that nursing students' satisfaction was influenced by previous learning experiences. Students who originally enrolled as on campus students preferred face-to-face instruction while those who began as distance learners were content with online learning modalities (Phillips & O'Flaherty, 2019). An important factor influencing students' satisfaction with online learning is the use of multiple teaching strategies that suit students' desires, such as discussion boards and sharing and responding to discussion board posts (Gary & Diloreto, 2016).

Implications

The implications of this project study involve nursing students and educators at the local study site nursing school and the larger field of nursing education. The results of

this study can be used to inform nursing educators at the study site community college of students' perceptions of an online clinical modality and how to improve student learning. The project resulting from this study was a professional development training program for nurse educators that helps educators understand engaging practices for online nursing education. The project will take place over 3 days. Each 8-hour day of training will focus on the nursing curriculum and improving nurse educators' ability to engage students in an online clinical modality. Social change implications include strengthening the knowledge of nursing students and nursing education faculty in use of an online clinical modality. The final project will be provided to the study site leaders to inform future online clinical modality directions for student nurses.

Leaders at the study site are committed to offering alternative educational approaches to meet students' diverse clinical needs due to the COVID-19 pandemic. Technological innovations that allow students to actively engage with peers and faculty in an online learning environment also help nursing program faculty adjust to patient care needs changes (Glasgow et al., 2017). However, clinical experiences that are conducted online are new to nursing education programs, so it is not known if online clinical education is fulfilling students' academic needs.

The current study findings will increase awareness of the challenges of a virtual clinical learning environment and students' perceptions of how instruction in online modality clinical nursing courses supports their academic needs. The research findings will also benefit future researchers by providing data to be used in further studies on the

topic. This study contributes new knowledge to the field that may influence the virtual clinical education of nursing students, thus effecting positive social change.

Summary

The goal of this study was to explore the perceptions of nursing students of online clinical learning modalities. In Section 1, I described the local problem of clinical nursing courses changing to an online modality as a result of the COVID-19 pandemic, causing faculty challenges in supporting students' academic needs. I presented the rationale for selecting this problem and discussed the gap in nursing practice. Definitions of four important terms associated with the study problem were provided. I also discussed the study problem's significance and how studying this problem might be helpful to the local college nursing educational system. The research questions were provided before the literature search strategy and the broader problem associated with the study were described. In the literature review section, I discussed the conceptual framework and the extant literature on topics relevant to the study.

In Section 2, I will discuss the methodology, including the research design and approach, participant selection process, data collection, and data analysis procedures. When addressing the research design, I will justify the selection of a basic qualitative design. The participants and sampling strategy used to recruit participants will be described. I interviewed 19 students from the study site school of nursing at a local university. Primary data in the form of opinions from students who took online learning courses was required to answer the research questions; therefore, the population of this

study was nursing students who had taken at least a semester of online clinical courses or were registered in online clinical modalities.

In Section 3, I will present the project of a 3-day professional development training program (PDTP) for nursing educators that teaches engaging practices for online nursing education. Training materials will be provided in the form of PowerPoint presentations, web-based group discussions, Post-it super sticky easel paper, markers, and sticky notes.

In Section 4, I will reflect on the project, study, and conclusions. The project strengths and limitations will be addressed using appropriate literature. I will also discuss the project deliverable, ways to address research, alternative definitions, and solutions to the local situation.

Section 2: The Methodology

Research Design and Approach

A nursing program at a study site community college recently adopted online clinical modality for nursing students and experienced instructional challenges, like making the online material engaging. The purpose of this basic qualitative study was to understand nursing students' perceptions regarding the online clinical modality. The research questions relate to how students perceive the instruction from online modality clinical nursing courses supports their academic needs, the students' perceptions of faculty behaviors, and their suggestions for how to improve online clinical nursing education. Qualitative research allows data to be collected in various manners, including the use of interviews (Merriam & Tisdell, 2016; Yin, 2014). Qualitative research is consistent with understanding students' experiences of online learning, and it provided personal perspectives in addition to various factors involved with the online clinical modality. Qualitative interviews allow for a description of participant experiences to be written (Creswell & Miller, 2000; Yin, 2014), which supported the design of this project study. I determined that a basic qualitative research design was most appropriate because of the focus on an in-depth investigation to understand a specific situation or event (see Yin, 2014).

In reviewing the types of qualitative research designs, I selected a basic qualitative design as the most appropriate. Phenomenology was another type of qualitative research design considered, but it was not appropriate for this study because phenomenology is used when seeking to understand a specific individual's lived

experiences (see Bogdan & Biklen, 2007). In this study, I looked at the perceptions of nursing students, not just one individual. Ethnography is another qualitative research design that was not suitable for this study. In an ethnography, the researcher studies a chosen culture for a prolonged period to learn and understand that culture (Bogdan & Biklen, 2007). This design did not align with the purpose of this study to investigate nursing students' perceptions of the online clinical modality.

Participants

The population selected were students who had taken at least one semester of online clinical nursing courses at the study site university or were enrolled to continue with the online clinical modality. I interviewed these students face-to-face or using interactive video conferencing. The number of participants was intentionally small so I could obtain more in-depth information. Participants were limited to the specific group of nursing students of interest for the project study.

Gaining Access to Participants

To gain access to this group of nursing students, I obtained approval to conduct this study from Walden University's Institutional Review Board (IRB) along with the review board of the study site before beginning data collection (Walden IRB Approval Number: 11-19-21-0635192). To gain access to study participants, I formally requested permission from the dean of nursing at the study site through email. The director of nursing at the study site provided me with names of faculty in charge of students who met the study criteria. To obtain an adequate number of student participants, I reached out to the research coordinator for assistance upon receiving IRB approval from the study site. I

obtained the contact information of potential student participants who met the study inclusion criteria from the school. Then, I contacted the students inviting them to participate in the study through direct calling, emailing, and mailing. The invitation to participate included information about participation criteria and my contact information (see Appendix B). I obtained the participants' consent via email.

Researcher-Participant Working Relationship

At the beginning of the interviews, I established a relationship with the participants and reviewed the consent form before asking any interview questions. This helped to avoid deviating from a focus on the research during interaction. I controlled for researcher bias by conducting semistructured interviews with predetermined, open-ended questions (see Appendix B). This format allowed for a broad range of answers without leading or influencing the participants' responses.

Protection of Participants' Rights

To protect the study participants' rights, I discussed how I would maintain their confidentiality and completed the informed consent process with each participant, which established me as the researcher (see Appendix B). The steps to be taken to protect participants' rights were included in the invitation to participate in the study. It was necessary to obtain each participant's consent prior to conducting the interviews. I sent the informed consent form to the participants via email with an explanation of the rationale for the study, including any potential risks or benefits of participating.

Data Collection

The study site preferred to be the IRB of record. Before I started data collection, I obtained IRB approval from Walden University to conduct the research, which enabled the study site to issue a letter of approval for me to begin to collect data. Data collection included face-to-face interviews or online interviews as selected by each study participant. The data collection method for this project study was semistructured individual interviews with students lasting between 30 and 60 minutes, some of which took place online using the Zoom platform. The interviews were audio recorded with participants' permission. Before the interviews took place, I sent the participants sample questions (Appendix B) as part of the invitation to help them prepare for the interview.

To ensure that all interview questions were asked of the participants during the interviews, I developed an interview protocol (see Appendix C) with the basic interview questions included. This allowed for further investigations when appropriate, provided guidance as I conducted the interviews, and ensured that I asked the same basic questions of each study participant. Data were collected with names and other identifiers attached, so I could conduct member checking for quality and credibility with the preliminary findings. Preliminary findings were sent to every participant, and I asked for their feedback. Participants' identities were kept confidential within the limits of the law.

I did not use any personal information provided by study participants for any purposes outside of this research project. I also did not include names of participants or anything else that could identify them in the study reports. No demographic details of participants are shared in the final results of this study. In addition to sharing the results

of the project study with the nursing instructor in charge of the students, I also sent a one-page summary of the results to every participant through email.

Keeping Track of Data

I kept a research log indicating the date and time of the interviews and names of participants. This log was also used to keep track of data being gathered for the study. I documented my ideas and thoughts on the research topic in a reflective journal. A reflective journal is an informal documentation of ideas, questions, and reflections that is used during the research process. Keeping notes in a reflective journal allowed me to self-reflect on thoughts, ideas, and questions that may arise during the research process.

Role of the Researcher

I had no previous working relationship with the study site. I was never a student there and had no personal relationship with any study participants, including faculty and students at the study site. As someone who has worked in higher education institutions, I have met and interacted with numerous students, and I would like to see them succeed. I recognized this bias and made every effort to present data and data analysis from an objective and neutral standpoint.

Data Analysis

The collection and analysis of qualitative data allows for an understanding of the results to answer the research questions. As the sole researcher of this study, I created the interview questions, analyzed the data, and reported the findings. Each audio recorded interview was transcribed within 2 days of the interview taking place. The coding process began after transcription of the interview. Using open coding, I made a list of codes from

the collected data and then made broader categories that became axial codes. This process resulted in emergent themes with which to answer the research questions.

To maintain accuracy and credibility, I utilized peer debriefing with the help of a colleague who is familiar with qualitative research and had the ability to be objective. This peer reviewer had no relationship with my project participants. After reviewing the transcribed data, the peer reviewer and I agreed on the final themes and codes. I also used member checking by providing preliminary findings to the 19 study participants, with 16 participants approving the findings without changes. I disclosed the three discrepant cases and provide explanations in the Data Analysis Results subsection.

Data Analysis Results

I collected data for this project study through semistructured, individual interviews with 19 participants lasting between 30 and 60 minutes. Interviews were conducted either face-to-face, online using Zoom meetings, or over a telephone call. After transcribing the interviews, I analyzed the data and assigned open codes that were reviewed and clustered into axial codes. Then using axial codes, emerging themes were identified. I used Atlas.ti (Version 7) qualitative coding software as well as electronic compilation of codes to aid in the coding process.

I also used the search function in Microsoft Word to identify various words, phrases, and synonyms in the data. After the first analysis of all transcripts, I identified 54 open codes. The codes were narrowed down to 15 axial codes. My coding selection generated a total of five emerging themes with which to answer the research questions.

Any isolated themes were reported as discrepant cases to which I offered explanations based on the literature. Table 1 illustrates themes as related to the research questions.

Table 1

Themes as Related to Research Questions

Themes	Theme Names	RQ1	RQ2	RQ3
1	Engagement with instructional materials	X	X	
2	Desire for professor engagement	X	X	
3	Desire for peer interactions	X		
4	Barriers in online learning			X
5	Strategies for online learning Improvement			X

The problem under study was that nursing students' perceptions of online clinical learning is unknown. The purpose of this study was to investigate how nursing students perceive the instruction in online modality clinical nursing courses supports their academic needs and how nursing students describe faculty behaviors as well as gather suggestions about how to improve online clinical nursing education. The research questions that guided this study were:

1. How do nursing students perceive the instruction from online modality clinical nursing courses to support their academic needs?
2. How do nursing students describe their perceptions of faculty behaviors, and how do these behaviors in virtual clinical nursing courses contribute to a supportive learning environment?

3. What do students experiencing online clinical modalities suggest would improve online nursing education?

In the following subsections, I present the findings based on answering each of the research questions.

Research Question 1

Three themes emerged from analysis of the data that were used to answer this research question.

Theme 1: Engagement With Instructional Materials

The evidence from this theme is supported by nine participants who noted in answer to Interview Question 4 (i.e., Can you describe experience in your online modality when you felt deeply engaged?) that they felt engaged through teamwork, self-paced learning environment, and helpful online simulations. Participant #5 said, “I felt engaged through small group activities.” Another participant stated, “I enjoyed watching videos in class.” Participant #10 said she is able to collaborate in the online environment through group assignments. Another participant said knowing assignment due dates ahead of time was a source of motivation for her in the online learning. Participant #12 also alluded to that. Participant #5 said, “individual level engagement greatly improved my learning process and made me feel involved, but group Zoom calls made me feel like it was just a time commitment.” This is a discrepant case.

Theme 2: Desire for Professor Interaction

Participant #17 stated they had well-organized instructors who laid out easy-to-access materials and provided videos to navigate their course document. Participant #10

said professors were more available for questions; however, Participant #9 felt some elements of communication breakdown due to lack of face-to-face physical interactions. This participant also pointed out the fact that he achieved the goals and purpose of learning via emails and Zoom interactions with the professor. Other participants talked about how sharing relevant information, like online links related to class topics, in virtual sessions helped their learning. On the contrary, Participant #3 said that though they felt supported when they reached out to review tests and quizzes with the instructor via Zoom, they still often felt disconnected. This is a discrepancy.

Theme 3: Desire for Peer Interaction

Staying organized in an online learning environment prompted the timely submission of assignments. Peer interaction in addition to participants seeking their own learning resources were greatly appreciated in the online clinical modality. Desire for such interactions as stated by Participant #10 were essential to support learning. Participant #13 said, “those interactions I had impacted my learning a lot.” Participant #15 stated that they created a study group with five other students, which had a good outcome as they helped each other to better understand the class materials. I searched for discrepant cases but did not find any for Theme 3 in Research Question 1 (RQ1).

Research Question 2

Themes 1 and 2 were used to answer this question.

Theme 1: Engagement With Instructional Materials

The evidence from this theme is supported by answers to Interview Questions 1 and 2. Participant #11 said the online clinical course was interactive and organized, and

instructors presented the course with a focus on the impact of technology on online learning. Participant #14 said the online clinical course was taught via Zoom and using prerecorded videos. Students were able to speak to instructors during Zoom meetings and instructors were available via email. Participant #20 stated, “the instructor records herself lecturing and posts along with PowerPoint online before lectures.” Participant #9’s perception was that although instructors tried to come up with ways to engage students, they were still limited and struggled with technical difficulties in teaching in the online clinical modality. Another participant stated that they enjoyed watching videos that the instructor incorporated into the lessons and that made them deeply engaged. Finally, Participant #16 said, “I did feel the online simulation exercises for nursing fundamentals was very helpful.”

Theme 2: Desire for Professor Interaction

In answer to Interview Question 7 (i.e., How do interactions with your educators impact your online clinical modality?), Participant #13 said interactions with their professor impacted their learning and how they were able to retain and apply information taught in class. In response to Interview Question 2 (i.e., How did your instructor’s behavior in the online environment support your learning?) Participant #15 said “they encouraged us to participate and ensured that computer cameras were on to make it feel more like a face-to-face class.” Participant #18 said instructors were informative and understanding of the given circumstances. Participant #19 said “instructors collaborated with students to ensure the environments promote healthy learning habits.” On the contrary, participant #20 is of the opinion that in the online learning, the professors shy

away from certain questions and that does not support learning. Related to RQ2, Participant #9's response was, though instructors tried to come up with ways to engage students, they were still limited and struggled with technical difficulties in teaching online clinical modality. Similarly, a participant stated, "I felt utter confusion, one of my instructors basically put us in breakout rooms to teach the materials to one another. There was no follow up to clarify misconceptions." This is a discrepant case.

Research Question 3

Themes 4 and 5 were used in answer to this question.

Theme 4: Barriers in Online Learning

The desire for hands-on assignments as expressed by several participants has a major impact on online clinical learning. The evidence from Themes 4 and 5, barriers in online learning and strategies for online learning improvement, supported Research Question 3. Answers to Interview Questions 10 and 12 in the interview protocol (Appendix B) produced supporting elements for this theme. Participant responses to these questions show that technical malfunction, internet breakdown, and other distractions can hinder cognitive presence in an online course. Participant #12 said:

Practicing with real people is vastly different from pressing buttons on a computer. Interpersonal interactions and managing the human side of nursing is difficult. I think role playing with classmates and standard patients really helps prepare you for those interpersonal interactions.

Participant #13 in agreement said barriers included missing the social part, hands on experience, and uncertainty of using internet and technological equipment. Furthermore,

another participant said, “online learning is not everyone’s cup of tea. Many people need interactions with the instructor, or the confines of a classroom to be forced to pay attention.” Participant #3 said it took a lot more strength and motivation to stay engaged when interacting with a computer screen versus a person. In contrast, Participant #16 perceived the flexibility of online learning, such as not needing to drive to class, as strengths that could improve online nursing education. In addition, Participant #12 said “Being able to do something over and over really helps solidify learning.”

Theme 5: Strategies for Online Learning Improvement

In response to Interview Question 5, which is, what do you think could be done differently to improve online nursing education, Participants #3 and #5 agreed with providing more interactive activities and less long zoom calls to prevent zoom fatigue. Participant #5 said to train more teachers in use of technology and require students to have computer cameras on during class. Participant #2 in answer to this question said, “just make sure staff involve nursing students throughout to ensure engagement.” Participant #10 would like instructors to incorporate more online group work and be sensitive to the challenges of the online learning environment. According to Participant #11, having one face-to-face meeting with the instructor once a month would create a real connection and allow for less extroverted people to ask questions. Participant #17 said, “I think instructors have to consider the online medium and cater their instruction to be more engaging, but not in the same way as large lecture groups.” Participants #14, #16, and #18 are in favor of more small group activities in online nursing clinical modality. No discrepant cases were found for RQ3.

Evidence of Quality

Credibility

To ensure credibility in this study, I conducted the data collection in a systematic manner, careful to align with the principles of qualitative inquiry. Credibility in qualitative research is important in establishing trustworthiness (Stake, 2010; Yin, 2009). Trustworthiness is enhanced by reporting a study's measures such as, the research questions, methodology, and other relevant procedures. Data collection for my study included face-to-face interviews, online interviews via zoom, and phone call interviews. I established an earlier relationship with my study participants through emails. I was also introduced by the director of research at my study site who in turn introduced me to the department head and the study participants before they received and filled out consent forms. Credibility was also enhanced through member checks where preliminary findings were sent to participants for their review and feedback.

Transferability

In order to ensure transferability in qualitative research study, the researcher provides details of the study boundaries. Findings that differentiate studies may simply represent the variable perceptions and realities of the different participants. For a reader to determine if proposed study findings are transferable, I gave a detailed description of the college and the nursing student participants while preserving the confidentiality of the study site and the participants to enable readers to decide if the results from this study could be applied to situations of interest to them.

Dependability

Dependability of the study refers to the consistency of the research over the length of the study (Patton, 2015). Efforts to ensure dependability of my study included a reflective journal which I kept and regularly reviewed to help me maintain awareness of consistency. My initial thoughts and what I hoped to learn from study participants, my perceived biases, and my reflections about the study process as well as the findings and interpretations were recorded in this journal.

Confirmability

In order to ensure confirmability, to eliminate bias as much as possible, I watched for, and reflected on, any areas of my personal bias. It is impossible to entirely eliminate bias, however, I was aware of the possibility of bias and asked for participants to review the preliminary findings. They did not indicate any changes.

Summary of Outcomes

The problem for the study is that clinical nursing courses have changed to an online modality (as a result of the COVID 19 pandemic), causing challenges in students' clinical learning and faculty difficulty in supporting students' academic needs. Online education is appealing to student nurses who otherwise might not pursue their education (Glasgow et al., 2017). Web-based learning effectively supports students' clinical learning process by offering additional virtual visual learning opportunities (Barisone et al., 2019). However, nursing students' perceptions of online clinical learning is unknown.

I identified pertinent student participants from a local college who met my study criteria. Before I started data collection, I obtained IRB approval from my institution to

conduct the research which enabled the study site to issue a letter of approval for me to begin to collect data. I reached out to a professor, the director of research at the study site who introduced me as a researcher to the school of nursing head of department. This professor assisted me with identification of study participants in November 2021, but students went on winter break and the process continued in January of 2022 when students returned to campus. Several emails were exchanged between me and the director of research at the college. I presented my proposed project study to the identified students who met study criteria. The consent form was emailed to 50 potential nursing student participants out of which a positive response was received from 19 participants, who signed and returned the consent form to me via email. Pseudonyms were assigned to the participants. All interview questions were answered.

This study's conceptual framework was adapted from the theory of student engagement. Kearsley and Shneiderman's (1998) theory of engagement offers instructional best practices in the online environment. Results from my study also supported the research of Garrison (2017) and Lowenthal and Dunlap (2018) who found that the results in their research studies demonstrated faculty social presence is important, but how technology and strategies are used, and the effects on the students' learning, matters most.

Participants in this study stated how online clinical modality was helpful when instructors were actively engaged. They expressed their desire for more professor engagement in the online learning environment. Other participants were of the opinion that they felt more faculty presence with use of webcams. Watson et al. (2017) reported

that the most effective aspects of faculty-student interactions were the professors' availability and willingness to interact and engage with the students.

Purarjomandlangrudi and Chen (2019) found that online students' perceptions of how involved their professors were in the class influenced the students' interactions in their online classes. A lack of timely feedback to the students in their discussion forums led to decreased student motivation and involvement.

RQ1 (i.e., How do nursing students perceive the instruction from online modality clinical nursing courses to support their academic needs?) generated the following themes: (a) engagement with instructional materials, (b) desire for professor interaction, and (c) desire for peer interaction. The majority of study participants provided statements that supported engagement with instructional materials as well as a desire for peer and professor interactions. The participants in my study represented various levels of online learning experience and were adult students with diverse backgrounds. The different life experiences shaped their individual learning needs.

Participants described their desire for more interactions with their peers and professors. Such interactions provided class comfort and helped in making the online clinical modality feel real. Such intentional desired interactions helped in their learning process and as such supported their academic needs. The teaching presence of professors confirmed their vested interest in student learning, as well as offered the opportunity to provide trust within an online learning environment. Participants' engagement with instructional materials, such as discussion boards, also helped with development of positive relationships and enhanced application of clinical concepts.

Two themes were used in answer to RQ2 (i.e., How do nursing students describe their perceptions of faculty behaviors, and how do these behaviors in virtual clinical nursing courses contribute to a supportive learning environment?), (a) engagement with instructional materials (b) desire for professor interaction. Statements of most participants support these themes. However, few participants stated that they felt disengaged by distractions of other students without their video cameras.

Participants described how a professor's demeanor and technical skills affected overall engagement in online learning. Some stated that they were disengaged when professors did not promptly respond to their emails. In contrast, other participants had positive experiences where the professor was very present and had great interactions with the students. When instructors are engaged, students feel supported in their online clinical modality.

The following themes emerged that were used to answer RQ3 (i.e., What do students experiencing online clinical modalities suggest would improve online nursing education?), (a) barriers in online learning (b) strategies for online learning improvement. In response to Interview Question 5 (i.e., What do you think could be done differently to improve online nursing education?) some participants said they wished there were some rules and etiquettes set for proper online learning engagement, more interaction, more time to socialize, and time to know professors and classmates. Participants believed that online nursing education could be improved. Their suggestions included having small group discussions, learning periods where the students and the instructor can actually discuss and explore the material, reduced course work, and inclusion of hybrid settings.

Based on the results of my research study, I created a project that would help nursing educators successfully navigate the challenges I identified by analyzing my study's results and emergent themes. The results of my research demonstrated a need for professional development in nursing instructors' pedagogical strategies. In order to increase their students' engagement with course material and with other students, I developed a PDTP that teaches best practices for teaching online clinical modality. The purpose of the developed PDTP is to improve teaching strategies of nursing educators, who constitute the target audience, increase student engagement and professor engagement while decreasing disengagement, thereby fostering a higher quality online clinical experience for nursing students. The goal of the PDTP is to improve online clinical modality for nursing students during and post COVID-19 by increasing nursing instructors' knowledge of effective teaching methods for online clinical modalities. To effectively deliver this project, the PDTP materials will include a PowerPoint presentation, web-based group discussions, Post-it super sticky easel pads, markers, and sticky notes. The presentation will require a room and a screen to project PowerPoint slides.

Section 3: The Project

Introduction

The problem was that clinical nursing courses at the study site had changed to an online modality, causing challenges to both students and to faculty in supporting students' academic needs. Based on this study's findings, I proposed implementing a PDTP that I developed to increase instructors' understanding of the perceptions of nursing students regarding the online clinical modality (see Appendix A). In this study, I identified some challenges in teaching and learning in online nursing clinical courses. After data collection and analysis, the emergent themes were engagement with instructional materials, desire for professor engagement, desire for peer interactions, barriers in online learning, and strategies for online learning improvement. The PDTP was developed to address these major concerns over a 3-day period to accommodate all nurse educators involved with the online clinical modality and guide them on effective pedagogy for online clinical courses to better support student learning and increase student engagement.

The purpose of the developed PDTP is to improve teaching strategies of nursing educators in online clinical modality as well as increase student engagement and professor engagement while decreasing disengagement, thereby fostering a higher quality online clinical experience for nursing students. The goal of the PDTP is to improve online clinical modality for nursing students during and after the COVID-19 pandemic by increasing instructors' knowledge of effective teaching methods for online clinical modalities, which will, in turn, give the nursing students a positive and supportive clinical

learning experience. Attainment of this goal could also positively impact the number of nursing students who register in online clinical modality. Following the PDTP, nurse educators will have increased awareness of digital learning resources and increased confidence in teaching via online modalities. Furthermore, the cohort of nurse educator participants will be encouraged to see themselves as a professional learning community, which will promote future collaborative efforts among them.

I developed learning outcomes, such as increased understanding of accessible digital learning resources and increased understanding of nursing students' needs when learning online, for the group of educators who participate in this interactive PDTP. Before the PDTP, participating educators will take a pre-PDTP survey (see Appendix A) in which they rate their confidence in teaching nursing students online and share a barrier that they have faced. Upon completion of the PDTP, participating nurses will take a post-PDTP survey (see Appendix A) in which they will rate their confidence in teaching online, justify their rating, and share why they believe collaboration with other educators will improve students' learning in an online clinical modality. This PDTP is targeted specifically towards nurse educators at a 4-year college; however, the major principles of this training program could be transferable to any nursing program where educators are involved in online clinical modality.

Rationale

The selected project will best resolve the problem under study because nursing instructors enrolled in the PDTP will learn explicit teaching strategies for online modalities and will be instructed on the importance of professional learning communities.

The findings of the study indicate that the online clinical modality could be improved for nursing students through training educators who teach at the study site to authentically integrate engaging resources that encourage peer interactions during online learning. Nurse educator professional development must address new technologies, according to Weberg et al. (2021), “For these realities of innovation in clinical experience and instruction to materialize and grow, leaders in nursing education need to challenge assumptions and traditions of the past” (p. 6). In the past, simulations complemented clinical experiences, faculty were experts in content, and instructors lectured students; however, today, instructors must be experts in context, not content, and they must build relationships with students to effectively facilitate learning activities (Weberg et al., 2021). Novel teaching strategies that utilize technology and encourage collaboration among students as well as collaborative learning among educators have been found to improve students’ engagement and perceptions of competence as well as improve nursing educators’ confidence in teaching pedagogy (Kranz et al., 2021; Strandell-Laine et al., 2018).

Review of the Literature

Online learning via simulations and virtual classrooms is widespread among collegiate education communities as a result of the COVID 19 pandemic. However, the problem under study was that clinical nursing courses have changed to an online modality, causing challenges for students’ clinical learning and faculty in supporting students’ academic needs. I conducted this review of the literature using both print and online sources from the Walden University Library and accessing the CINAHL, ERIC,

Google Scholar, ProQuest Nursing, and PubMed databases and search engines.

Engagement, evidence-based, nurse educators, nursing student perceptions, faculty, and effective were the key search terms used to identify credible resources for this review.

Additional resources were identified from the references list of retrieved articles. In this subsection, I discuss literature findings indicating that nurse educators will benefit from a professional development program focused on best practices for online nursing education.

Professional Development

Professional development (PD) is the development of a person in their profession. PD enhances teachers' understanding about the teaching and learning process, and effective PD involves teachers as learners. According to Darling-Hammond et al. (2017), effective PD is content focused, incorporates active learning, and supports collaboration. PD results in changes in instructing practices and improvements in student learning outcomes (Darling-Hammond et al., 2017). The nursing profession anticipates commitment to PD and a lifetime of learning reflected in continuous certification, eLearning modules, webinars, workshops, accreditation, and standards (Bindon., 2017; Shinnors, 2019).

Literature on nursing students' perceptions of online clinical modalities conveys an apparent need for a PD program aimed at training nurse educators. Shinnors (2019) stated that continuing education is a good method of measuring and advancing nursing professional development; however, consideration should be made for a varied range of personal, professional, and practice issues that determine educational goals. These

nursing professional goals target specific needs of each generation as they age and their matching nursing recruitment requirements (Price & Reichert, 2017)

PD is perceived as a need and a requirement by nurses at various stages of their nursing profession (Price & Reichert, 2017), including as they transition from practitioner to educator. In some states, like Texas, health advancement leadership teams strategically planned for 2020 to 2030 initiatives to focus on transitioning distinguished nurses to leadership and faculty roles through strategic PD opportunities (Zolnierek et al., 2021). Based on metasynthesis, access to continuing professional development should be attainable, representative, and applicable, and organizations should adequately sponsor to make PD available to nurse educators (Mlambo et al., 2021). As a means of continual learning, Umubyeyi (2020) suggested assembling and supporting a positive learning environment for nursing students, which requires a community-oriented approach that connects all concerned partners in establishing a learning society that lessens the hindrances of online barriers and improves the positive qualities. The 3-day PDTP will address strategies to increase student engagement with instructional materials, professors' engagement with students, student interactions with each other, and strategies for online learning improvement that account for barriers in online learning.

Barriers in Online Learning

The COVID-19 pandemic provided a catalyst for change in nursing education methods (Weberg et al., 2021). Nursing education institutions are undergoing an era of radical transformation as clinical modalities shift from face-to-face to digital platforms, resulting in a struggle to create meaningful learning events utilizing technology in

distance learning environments (Weberg et al., 2021). Programs requiring additional digital products for clinical instruction and upgraded technology caused an unexpected need for an increase of monetary resources (Liesveld et al., 2021). According to Maloney and Woolforde (2019), the factors that will shape the future of nursing education professional development includes the use of new technologies to embrace the current and future trends in accessing health care: telehealth, emedicine, eprescribe, mhealth, and mobile apps. Oprescu et al. (2017) reported that the most desired areas of future development in teaching are information technology proficiency, assessment and technical know-how, and the establishment of global online and offline support.

In a meta-analysis of 15 recent nursing articles, Ting et al. (2021) discovered that there has been a shift from traditional classes and teaching formats to a more blended classroom using eLearning, peer coaching, and simulation. Rouleau et al. (2019) used Kirkpatrick's levels of evaluating the most common topics covered by the eLearning interventions (i.e., medication calculation, preparation, and administration) and found that the participating nurses were satisfied with the use of eLearning, signifying improvement of knowledge. This knowledge is expected to be lifelong, spanning from nursing training to the climax of the profession; therefore, the training of nurses should include the incorporation of a lifelong learning mentality (Qalehsari et al., 2017). According to Pilcher (2019), the best strategy to use in developing an eLearning program is to have its goals, desired outcomes, content, and facilitators well planned out.

In view of lifelong learning, leadership roles should not be ignored because there is a need to train and mentor potential leaders early in their careers (Webb et al., 2017).

Challenges faced by nursing professors moving to nontraditional teaching environments include the assumption of new roles, learning new technology, and online pedagogy. A concern with the transition to virtual learning is that educators often digitize past modalities instead of leveraging technology and innovating new ways to teach and learn (Weberg et al., 2021). The National League for Nursing (2018), a nationally and internationally recognized voice of nurse educators, called for collaboration among faculty and graduates with both clinical and research degrees to address staff and student needs during the COVID-19 pandemic.

There is compelling evidence that collaboration among nursing education faculty could be the first of many strategies to improve online learning. Nursing program leaders in the New Mexico Nursing Education Consortium (NMNEC) processed how the COVID-19 pandemic would impact their learning communities by bringing together program directors from over 12 nursing schools to discuss barriers of online education and problem solve once a week in March 2020 (Liesveld et al., 2021). According to Liesveld et al., four nurse educators acknowledged the positive impact of these weekly hour-long meetings, and the four nurse educators decided to analyze NMNEC's meeting minutes in order to identify and understand the outcomes from the meetings. After a thematic analysis of the minutes, the four educators found that collaboration was the catalyst for NMNEC's ability to meet their defined goals in the midst of a pandemic. Furthermore, the NMNEC's collaborative efforts resulted in the 12 nursing schools' cohesive transition from face-to-face learning to learning via digital platforms. Ultimately, these meetings provided "a breath of fresh air" (Liesveld et al., 2021, p. 934)

in the midst of the crisis and resulted in “tangible outcomes [that were] useful for nursing programs and faculty” (Liesveld et al., 2021, p. 932).

Strategies for Online Learning Improvement

Transitioning from being an expert in nursing practice to an academic role often leads to some role ambiguity that can be mediated not only by PD courses, but also by the creation of professional learning communities that provide bidirectional support between novice and experienced instructors (Roman, 2018). In a study of role transition from bedside nursing practice to academia, Oprescu et al. (2017) stated that employing a professional development program for orientation and mentoring newly hired instructors reduces instructors’ lack of confidence in their teaching skills. Oprescu et al. supported the recommendation of professional development programs designed to teach future educators how to handle challenging student behaviors and design captivating learning activities, which in turn will improve the educators’ confidence in their teaching ability. Miner (2019) studied eight novice nurse educators and found that collaboration among colleagues supported a positive role transition from practitioner to educator.

Roman (2018) also affirmed that when educators spend time in professional learning communities, their collaborative efforts raise teaching effectiveness and improve student learning. The purpose of Roman’s study was to determine the influence of professional development learning communities on instructors' perceived capabilities. Though there were significant differences in confidence level between experienced and novice clinical facilitator participants in the pretest ratings, both novice and experienced clinical instructors self-reported during the posttest, or end of the study, that professional

learning communities enhanced their teaching capabilities by improving participants' knowledge as well as confidence in pedagogical practice, teaching effectiveness, and feedback abilities. Brown (2019) stated that orientation and professional development programs facilitated a smoother role transition from nurse-to-nurse educator for novice clinical educators while benefiting nursing students in achieving learning outcomes.

Roman built on this narrative, as study participants stated that involvement in professional learning communities gave them a distinct opportunity to share “tips and tricks” (p. 369) with colleagues, that in turn positively modified their teaching approach in clinical settings (Romans, 2018). Monsivais and Robbins (2020) studied an online faculty professional development program that was implemented using self-paced modules for nurse educators. Their participants indicated that module completion was more beneficial when done by a group of educators as opposed to individuals.

It is clear that learning communities are essential. Thus, creating a space where both novice and experienced nurse educators can come together and work together was addressed in the PDTP project. However, defining learning communities is not the only strategy for online learning improvement. Research participants in the current study also acknowledged a desire for professor engagement, peer interactions, and engaging instructional materials.

Desire for Professor Engagement and Peer Interactions

Participants in the current study conveyed a desire for online instructors to be more present because distance education caused some participants to feel isolated during their learning experience. Thus, it is important for nursing instructors to make deliberate

choices to mitigate such feelings by establishing a social presence among students. Hoffman (2019) stated, “Social presence in online learning involves identifying with the community and developing interpersonal relationships within a trusting environment” (p. 109). Simunich and Grincewicz (2018) opined that, “Teaching presence begins with the design of the course, which reiterates the importance of deliberate design choices to facilitate presence among learners” (p. 139). Perry et al. (2018) found that the quality of clinical education provided to nursing students was directly correlated to the individual clinical instructor assigned to supervise students. Furthermore, Heinonen et al. (2019), who aimed to describe the benefits of digital technology and mentoring of nursing students in Finland, showed that students perceived mentoring by nurse instructors to be an integral part of their ability to successfully understand and integrate theoretical and practical knowledge gained from nursing programs. In fact, consistent mentoring, both in person and digitally, may improve nursing students’ clinical experiences and make certain that students are achieving learning goals (Heinonen et al., 2019). Heinonen et al. also unveiled students’ desire for professor engagement and mentoring was not necessarily met using digital technology alone because technology-based mentoring led to feelings of isolation. Professor engagement is a unique component of nursing education and, thus, was a focus in the PDTP project. Utilizing technology can improve professor engagement with students when instructors make time to communicate with students as individuals; students especially appreciate such mentorship during challenging clinical situations (Heinonen et al., 2019).

Jetha et al. (2016), in their work comprising 29 studies from an initial pool of 51 studies, found three evidence-based requirements to support the teaching practice of novice clinical teachers, which includes professional development, socialization, and the necessity for confidence building and self-reflection. Participants in my study also acknowledged a need for socialization and peer interactions. During the PDTP, clinical instructors will be intentionally educated on how to increase collaboration among nursing students during synchronous online classes. For example, participating nurse educators will be introduced to the process of unified engagement. Unified engagement is an online teaching strategy that reduces direct teaching and increases whole class dialogue around course concepts, as the instructor guides their students in an active discussion thread (Hoffman, 2019). Intentionally creating courses with such features allow nursing students to work together to contextualize new information during synchronous online classes (Hoffman, 2019), and meet students' desire for peer interactions.

Student Engagement With Instructional Materials

Nursing students deal with different challenges involving their participation in the online environments (Sinacori., 2017). Learning new technology and the online pedagogy is also seen as an impediment for nursing students, especially among the older student population (Ramos-Morcillo et al., 2020). The use of nontraditional teaching instruction including social media in the classroom has been shown to increase student motivation and engagement, especially using twitter and Facebook, with the number of online posts positively correlating with engagement (Van Den Beemt et al., 2020). One method to increase engagement of nursing students involves gaming.

Gameful learning is a teaching strategy that combines components typically found in games, like collecting points and competition among players, and academic learning outcomes. An observational study evaluating a gameful teaching approach found that utilizing games in nursing education promoted student learning via creativity, risk taking, and competition, while simultaneously increasing peer interaction, teamwork, and motivation (Kranz et al., 2021). This study revealed that gameful learning supported nursing student understanding of the plan-do-study-act cycle that is often used to contextually improve health care settings (Kranz et al., 2021).

Student engagement can also be increased by using puzzles and Jeopardy, which has been shown to be effective in enhancing knowledge retention, promoting problem-based learning, and increasing student motivation (McEnroe-Petitte & Farris, 2020). The benefit of gaming extends into virtual gaming solutions in nursing education which allows nursing students to learn practical skills in a realistic environment (Verkuyl et al., 2017). The University of Granada (Spain) carried out a descriptive interventional study with nursing students participating in an escape room game. Participants were organized into groups of five and demonstrated concept knowledge to solve puzzles, read electrocardiograms, and carry out other clinical experiences in this “gamified” environment. Although the escape room game did not simulate any specific clinical situation, the nursing participants concurred that the game was highly engaging, promoted teamwork, allowed them to apply their knowledge, and motivated them to increase their practical knowledge in order to be more successful in the future (Gómez-

Urquiza et al., 2019). A time for discourse about gamifying clinical content will be an explicit part of my PDTP.

Nursing instruction must evolve; courses that previously required lectures should now include resource links to interactive software and links to programs such as Kahn Academy for content, Osmosis.org for integrated learning and quizzes, and Sketchymed.com for illustrative examples (Weberg et al., 2021). In 2019, Osmosis.org began including content for health professionals like nurses, nurse practitioners, and physician assistants. Furthermore, representatives of Osmosis affirmed that content will continue to grow as time passes. Learning to successfully utilize Osmosis' platform will be a key component of my PDTP. This website's advanced algorithms allow for personalized remediation, which takes the burden of tracking content needs away from nursing education facilitators (Tyson, 2020). Instructors with a site subscription are also able to clip, annotate, and embed content from Osmosis onto their preferred learning management system or instructional presentation, so that nursing students will have continued access to such materials (Tyson, 2020). Feedback from an educational webinar that capitalized on using dynamic programs during a Zoom meeting with nurses and nursing students also affirmed that interactive learning software programs engaged students and made the online learning process fun (Opsahl et al., 2021).

Summary

Upon completion of the PDTP, participating nurse educators will understand that a simulation is not a technology; simulation is an interactive teaching method that allows nursing students to actively learn clinical content during online modalities (Zakari et al.,

2018). The use of nontraditional teaching methods in online classrooms has been shown to increase student motivation and engagement, with the number of online posts positively correlating with engagement (Van Den Beemt et al., 2020). Increasing engagement of nursing students involves gaming and using puzzles, which has been shown to be effective in enhancing knowledge retention, promoting problem-based learning, and increasing student motivation (McEnroe-Petitte & Farris, 2020). The benefit of gaming extends into virtual gaming solutions in nursing education which allows nursing students to learn practical skills in a realistic environment (Verkuyl et al., 2017).

Project Description

The profession of nursing anticipates commitment to professional development and a lifetime of learning (Bindon., 2017; Shinnors, 2019). The role of nurse faculty is evolving; so, the education of the faculty must keep up with these changes. The purpose of my study was to investigate how nursing students perceive the instruction from online modality clinical nursing courses to support their academic needs, and how nursing students describe their perceptions of faculty behaviors, as well as suggestions of what would improve online clinical nursing education. To achieve this purpose, I chose a PDTP to teach nurse educators using best practice for online nursing education. It will assist nurse educators to teach students in online clinical modality. This project is a 3-day professional development training for nurse educators at a local college. To be successful, this PDTP needs nursing educators who are interested in learning and utilizing the available information.

Needed Resources and Existing Supports

The training materials will include a PowerPoint presentation, web-based group discussions, Post-it super sticky easel pads, markers, and sticky notes. The presentation will require a room and a screen to project PowerPoint slides. I will ask the head of nursing department for financial support to provide lunch for attendees. Other potential resources and existing supports includes classroom technologies such as audio-visual support personnel, a display screen to project Google Slides and digital resources like Osmosis.com.

Potential Barriers and Potential Solutions

Barriers to implementing this project could include interest of nursing instructors. As with any changes that affect teaching and learning modalities, there can be stakeholders' resistance. This may be seen as more work as nursing instructors will need to adjust their plans and teaching methods. A way to overcome this type of resistance is to have a strong administrative leadership support for the PDTP. The leaders will clearly communicate why this program will benefit the instructors and ultimately the nursing students. The commitment and willingness of nursing instructors to adjust their instructional methods to lessons learned from the PDTP is important.

Another challenge to overcome for this program is timing for executing the PDTP. The training program must be held early enough so nurse educators may use the information to inform their courses in the new semester. To overcome this challenge, I will implement my project in the fall, a week before the nursing students return to school.

Timetable and Proposal for Implementation

The PDTP is designed to be taken over a 3-day period during the fall semester of 2023. The timetable for the PDTP is found in Appendix A. Each training day has an 8-hour agenda.

Roles and Responsibilities

As the researcher, I developed the project. I will write a letter emphasizing the needs of nurse instructors. I will then take the letter to the school provost who will communicate recommendations to the director of nursing at the college, who will decide whether or not to grant permission for me to present my project, which is the PDTP, to nursing instructors. It is also my responsibility to present my project deliverable – the PDTP.

Project Evaluation Plan

In order to gather qualitative feedback about the quality and usability of the information provided in the PDTP, I will administer a formative evaluation before the 3-day PDTP. Formative evaluations involve others who provide ideas and are used to improve daily educational operations, such as the norms of facilitating learning (Van Groen & Eggen, 2020). Formative evaluations improve learning communities by providing concrete and timely feedback about challenges learners may face during learning events in order to pinpoint necessary program modifications (Van Groen & Eggen, 2020). My formative evaluation will take the form of a survey and I will use this evaluation format because formative evaluations are used to “make decisions about programs” (Van Groen & Eggen, 2020, p. 15) in order to improve them before they are

presented. The formative evaluation will prompt evaluators to answer the following questions:

1. What modifications should be made to the presentation format?
2. What additional information should be included in the presentation?
3. What information should be excluded from the presentation?

The feedback will be shared with the key stakeholder – myself, the project developer.

The overall evaluation goal is to gain the information that will allow me to revise and improve the PDTP prior to delivery to the nursing instructors.

Project Implications

The problem was that nurse educators find it difficult to support students' academic needs while facilitating learning via online clinical modalities. My project will address the challenge nurse educators face as a result of teaching using digital modalities, because the goal of the PDTP is to improve the learning experience for nursing students by increasing instructors' knowledge of effective teaching methods for online clinical modalities. My completed project could positively impact the number of nursing students who are retained in online clinical modalities as a result of instructions to nurse educators using best practices. Attainment of the project goal, which is to increase nursing instructors' knowledge of effective teaching methods for online clinical modalities by educating them on explicit resources, could lead to positive pedagogical changes in online nursing instruction.

My project can make a positive social change for the institution, as nursing administrators at the study college attest that there is a notable decrease in online clinical

attendance and lower quiz scores, indicating that nursing students may struggle with online modality. Improving nursing instructors' understanding of digital resources can positively affect online nursing student retention, because instructors will be better equipped to meet the needs of students, which will lead more nursing students to remain enrolled in their online learning courses. My project can also make a far reaching positive social change for the larger community through the intentional education of nursing instructors on effective and engaging instructional practices in virtual settings. Lin et al. (2018) "pointed out that 37 out of 50 states [in the United States] will experience significant nursing shortages by 2030" (p. 231). Nursing educational institutions may further delay a future nursing shortage by investing in developing nurse educators. If nurse educators are better equipped to educate nurses, then more nursing students will be retained and will complete nurse education programs, and communities will have more nurses to care for people in need.

Section 4: Reflections and Conclusions

Introduction

This project was the result of data collected through interviews conducted to gain insight on students' perceptions of an online clinical modality at the study site college. The focus of this study was to address the challenges of nurse educators in online modalities, improve their teaching methods regarding online clinical learning, and increase the enrollment of students in online clinical modalities. However, there remained a problem - the unknown perceptions of students regarding the online clinical modality. In Section 4, I share my reflections on the strengths and limitations of the project as well as my personal development as a scholar, practitioner, and project developer. I also explore implications for positive social change and potential for positive social change.

Project Strengths and Limitations

Strengths

The problem addressed by this project was that clinical nursing courses have changed to an online modality, causing challenges to both students and to faculty in supporting students' academic needs. One strength of the project deliverable is the goal of the PDTP to increase nursing instructors' knowledge of effective teaching methods for online clinical modalities by educating them on explicit resources, such as Osmosis.com, that they can integrate into their curriculum. This is a strength because it directly addressed the problem. Another strength of the project is the use of summative assessment. I used this assessment style to understand whether the goal of my project was met. The survey that project participants will take at the conclusion of the PDTP serves as

a summative assessment because it will measure what was learned by the end of the project (see Van Groen & Eggen, 2020). I, the training program facilitator, will be able to understand if the goal of my project was met by comparing the pre-PDTP survey responses with the post-PDTP survey responses.

Limitations and Remediation of Limitations

A limitation of my project deliverable is that there is not a great deal of research about how gameful learning affects nursing students' attainment of learning goals. Another limitation of the project is the fact that the resource introduced during the PDTP, Osmosis.com, is a relatively new website that is adapting to accommodate the needs of educators. According to Tyson (2020), "Currently, newer additions [to the website] are not as robust; however, Osmosis representatives indicate that this content will continue to grow over time" (p. 346). Since Osmosis.com is growing and changing in content, it may necessitate continuous training for nurse educators on available resources through the website. Another limitation of the project is the evaluation plan. The formative evaluation will be administered to a director of nursing education and one nurse educator. The project will then be modified using the recommendations acquired through their evaluation. This limitation can be remedied by allowing a diverse set of leaders in nursing education to formatively evaluate the PDTP before future training.

Recommendations for Alternative Approaches

Given the results of the study, a recommendation report is an alternative approach to address the problem under study. Macy (2022) summarized how the COVID-19 pandemic has impacted nursing education in their conference recommendation report,

outlining “logistical challenges encountered during the pandemic and the innovative solutions that were tested in response” (p. S3). A similar approach can be used to assess the problem identified in the current study. The recommendation report would highlight the major themes from the study, such as online learning improvement, professor engagement, and student engagement. Strategies for improvement in each area would also be listed in the recommendation report. However, a recommendation report requires extensive research to determine if the strategies recommended could be used to successfully remedy the problem.

Scholarship, Project Development, and Leadership and Change

Scholarship

Scholarship is knowledge gained through educational experiences and is the understanding of a subject in theory or in practice. My coursework at Walden University has increased my ability to recognize and analyze sources that are reliable. I am now a stronger writer because my writing includes credible sources. I have also learned to appropriately cite sources in writing using the American Psychological Association formatting. This is important because it allows readers to understand how my work contributes to the larger body of work around a topic. American Psychological Association formatting also allows readers to access sources that I have used for their own research.

In addition to writing, I have also grown as a researcher as a result of my scholarship at Walden. Collaboration is an important element of research. My research exemplified how scholarship is difficult via online modalities because students do not feel supported from instructors due to the lack of interaction. As a scholar, I grew to

become more collaborative by intentionally engaging with instructors and peers. I have also improved my ability to create professional communities, which I will continue to benefit from as a scholar.

Project Development

Project development is a planning process that ultimately leads to the creation of a project deliverable. I learned that project development takes time, collaboration, and resources. When learning about how online nursing students felt, I realized that nursing instructors would benefit from a PDTP that targeted the specific areas that participants of the current study identified. These areas included engagement. When developing the project, I focused on providing opportunities for participants to discuss how they engage students via online modalities. I realized that discussing engagement was not enough; as the project facilitator, I had to engage PDTP participants. I overcame this challenge by including various opportunities for the nurse educators to collaborate with each other. I hoped that this would allow participants to remain engaged as I disseminated information. Furthermore, the group work will allow nurse educator participants to process information together. Finally, I learned that project development requires resources. I needed display screens, paper, writing utensils, and access to a reliable internet connection to make my project successful.

Leadership and Change

A scholar is a change agent with the knowledge to promote change. In a leadership role, I have the ability to envision future educational improvements. Leadership is a process in which many stakeholders have a desire for change. In the

collaborative process of leadership, new knowledge is attained. A leader with a vision must share it with the organization and work with others to achieve the vision.

Stakeholders at the study site are aware of my research topic and are interested in knowing more about the findings. I will meet with the research coordinator and the director of nursing at the study site to discuss the PDTP project and its implementation.

Reflection as a Scholar

A scholar is a diligent practitioner with a desire for inquiry. In this evolving process, my professors at Walden University contributed greatly to my development as a scholar and supported me in the growth process. I started this doctoral program in education as a clinical nurse educator at a local community college. Though I had been involved in previous research, I had not fully emerged as a scholar. With the completion of my prospectus at Walden University and while working on my research proposal, I started to understand the magnitude of work involved in conducting qualitative research and its relevance. Being a first-time research scholar, I was careful and needed guidance from my chair to ensure my research methods accurately followed the protocols of Walden's curriculum and published research studies. As my research progressed, I was nervous about conducting a productive research study capable of providing answers to my research questions. However, I gained confidence in my ability to conduct future research and publish my present study if the opportunity arises. My research will also add to the body of knowledge on teaching methods to engage nursing students in online clinical modality. The current study will also aid future researchers in understanding the perceptions of students regarding the online clinical modality post-COVID-19 pandemic.

Reflection as a Practitioner

As a clinical educator, I have had the opportunity to teach nursing students in face-to-face and online learning environments. I strived to provide students with learning opportunities regardless of the learning medium. My personal experiences as an online doctoral student at Walden University has led to the refinement of my pedagogical methods. I am now better equipped to utilize scholarly literature. I gained additional knowledge and insight on the challenges of nursing students in online clinical modality through this study and had the opportunity to develop a PDTP for nursing educators to improve their teaching with best practices.

Reflection as a Project Developer

To design the project deliverable, I started with the themes that emerged from the study participants' responses to interview questions. The 3-day PDTP will provide nursing instructors with a greater understanding of engaging students in online clinical modalities. Addressing the needs of nurse educators constituted some challenges because I had to summarize vast amounts of information into actionable resources. Other challenges in developing the PDTP related to the use of PowerPoint. Using technology is difficult for me, so developing this project helped me to grow as a digital creator. I learned to insert images onto PowerPoint slides and create different backgrounds. I also paid close attention to my font design to produce a presentation that was cohesive. I grew as an educator as well because the PDTP required lesson planning for each day. Engagement was my final challenge in creating my project deliverable. To make my presentation engaging, I included group discussions and creative activities.

Reflection on Importance of the Work

As employers seek skilled and knowledgeable nurses, schools of nursing will continue to find innovative ways to teach using online clinical modalities. Alternative ways of meeting students' learning needs and the needs of other stakeholders will be considered while designing teaching methodologies. My PDTP could help nurse educators with traditional educational structures that no longer meet the needs of present-day, nontraditional college students.

Improving nursing education is at the heart of the work that I did in this study and that is why the work is important. This project is going to help nurse educators in training nurses using online clinical modalities. The project may also be helpful to nursing faculty at other institutions who may want to participate in the PDTP or use the training format at their institutions for online nursing instruction.

Implications, Applications, and Directions for Future Research

The findings of this doctoral study led me to create a PDTP for nurse educators. I designed the PDTP to assist in teaching online clinical modalities and foster nursing student engagement in the online environment. The project deliverable promotes positive social change in the field of nursing education because it increases nurse educators' awareness of digital resources and nursing students' desires. Nurse educators can apply the information in the project to teach students and the nursing students will graduate and become nurses who better serve their communities and are better able to provide for their families. The nurses' communities will have more trained nurses to improve the health of individuals. This stream of positive social change begins with my project because it

supports faculty in understanding online pedagogical practices that actively engage their students. The PDTP also presents an opportunity for nurse educators at the study site to promote faculty presence and professional community building.

In this study, I investigated nursing students' perceptions of an online clinical modality. The population under study was students who had taken at least one semester of online clinical courses in nursing at the study site or were enrolled to continue an online clinical modality course. The study focused on students' experiences in online learning as an effort to enhance the pedagogical practices of online nursing instructors. Because this study offers a means for continuous improvement of the online clinical modality, it may also increase nursing student retention.

Future studies will continue to refine this current research by analyzing more deeply, through qualitative research, students' perception of which interaction factors can strengthen students' online clinical learning experiences. Future researchers may also want to examine research questions not addressed by this study, such as: To what extent does Osmosis.org positively influence nursing students' knowledge retention? How do nursing students in online clinical modality utilize instructor office hours? Future researchers may also aim to answer if paid subscriptions to digital resources improve nursing students' abilities. Using a larger study sample in a similar nursing institution may also provide new data as well as other methods for nurse educators to foster instructor presence in online clinical modality courses.

Conclusion

Nursing education programs need improvement. The study findings showed that nursing education will be improved by increasing student and instructor engagement, collaboration, and instructors' knowledge of digital resources. To answer the research questions guiding the study, the themes of nursing students' desire for professor engagement, student engagement with instructional materials, and barriers in online learning emerged. With the results from data analysis, I developed a 3-day PDTP for nursing instructors. The strengths of this project include a focus on nursing student retention, the inclusion of student perceptions, and the ability to increase nurse educators' knowledge of meeting nursing students' educational needs in an online clinical modality.

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Appendix A: The Project

Pre- PDTP Survey for Participants

Question	Response
How confident are you in your ability to teach nursing students via online clinical modalities?	1 2 3 4 5
Justify your rating above with details from your teaching experience	
To what extent do you agree with following statement: <i>Collaboration with other educators will improve my students' learning in an online clinical modality.</i>	1 2 3 4 5
Justify your rating above with details from your teaching experience	
1 = Not very confident / I do not agree 5 = Very confident / I completely agree	

Post- PDTP Survey for Participants

Question	Response
How confident are you in your ability to teach nursing students via online clinical modalities?	1 2 3 4 5
Justify your rating above with details from your teaching experience and the PDTP	
To what extent do you agree with following statement: <i>Collaboration with other educators will improve my students' learning in an online clinical modality.</i>	1 2 3 4 5
Justify your rating above with details from your teaching experience and the PDTP	
1 = Not very confident / I do not agree 5 = Very confident / I completely agree	

Project (PDTP) Implementation Timetable

Day 1	
8:30am – 9:00am	Participants arrive, sign in, and take Pre-PDTP Survey
9:00am – 10:00am	Introductions, ice breaker, goals of PDTP presented
10:00am – 10:10am	Day one’s agenda is presented
10:10am – 12:00pm	Barriers break out groups and poster presentations
12:00pm – 1:00pm	Lunch Break
1:00pm – 3:00pm	Presentation on importance of Professional Learning Communities & reflective discussion
3:00pm – 3:45pm	Steps to building a strong PLC discussion
3:45pm – 4:00pm	Close with take home assignment
Day 2	
8:30am – 9:00am	Participants arrive and answer question on desk. Agenda is presented.
9:00am – 9:30am	Table talk – See slide 14 for details.
9:30am – 10:00am	Reflection and table talk about previous practice strategies
10:00am – 10:15am	Break
10:15am – 10:30am	Answer questions
10:30am – 12:30pm	Presentation about game-based learning (slides 19-22)
12:30pm – 1:30pm	Lunch Break

1:30pm – 2:30pm	Presentation about game-based learning continues (slides 24-25)
2:30pm – 3:45pm	Discussion - pros and cons game-based learning options
3:45pm – 4:00pm	Close with take home assignment
Day 3	
8:30am – 9:00am	Day three's agenda presented; nurse educators answer 3 review questions independently before discussing with table (slides 28-29)
9:00am – 11:00am	Reflect on Practice, Presentation about new digital resources, digital resource research and poster creation (slide 30-32)
11:00am – 11:15am	Break
11:15am – 12:00pm	Poster presentations (slide 34)
12:00pm – 1:00pm	Lunch Break
1:00pm – 1:15pm	Question & Answer session
1:15pm – 2:00pm	Presentation about building relationships via digital resources
2:00pm – 3:00pm	Full group discussion about relationship building
3:00pm – 3:15pm	Independent Reflection
3:15pm – 3:45pm	Group reflection and impact of collaboration discussion
3:30pm – 4:00pm	Post PDTP Survey

Day 1 Take Home Task

Directions: Please view at least 2 videos tonight

Video 1: **“Asynchronous Flipped Gameful Mastery Learning”**

<https://www.youtube.com/watch?v=u61KTQGTQV0>


Video 2: **“Nursing Card Game”**

<https://www.youtube.com/watch?v=krAtpyl63zQ&t=51s>

Video 3: **“UNMC College of Nursing Sepsis Escape Room”**

https://www.youtube.com/watch?v=FB_mtFUyRow

Professional Development Training Slides




**Nurse Educators
Professional Development
Training Program**

Day 1

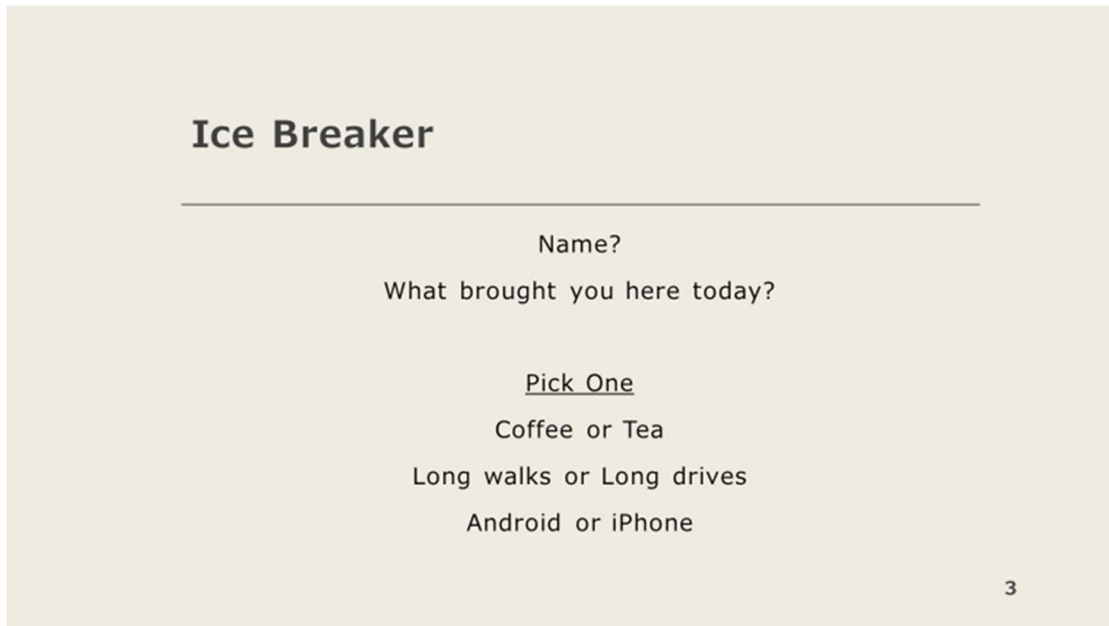
1

Welcome Educators

Please complete pre-PDTP survey.



2

A slide titled "Ice Breaker" with a light beige background. The text is centered and includes a horizontal line below the title. The questions are: "Name?", "What brought you here today?", "Pick One", "Coffee or Tea", "Long walks or Long drives", and "Android or iPhone". A small number "3" is in the bottom right corner.

Ice Breaker

Name?

What brought you here today?

Pick One

Coffee or Tea

Long walks or Long drives

Android or iPhone

3

Facilitator Notes (slide 3):

Day 1's agenda will be written on post-it super stick poster. I will present the agenda once the icebreaker is completed.

The purpose of this icebreaker is to engage nurse educators. I intend introducing myself using this icebreaker as well. Additionally, I will advise the nurse educators to replicate this activity, as it encourages peer interactions and professor engagement. Participants in my research voiced their desire for professor engagement and desire for peer interactions.

Goals

- To increase nurse educators' knowledge of effective teaching strategies for online clinical modalities
- To increase nurse educators' understanding of nursing student perceptions of online learning

4

Barriers Break Out

In **groups of 3**, create a poster that **describes the barriers and challenges you face as an online nurse educator**. Be prepared to **present your ideas**.

5

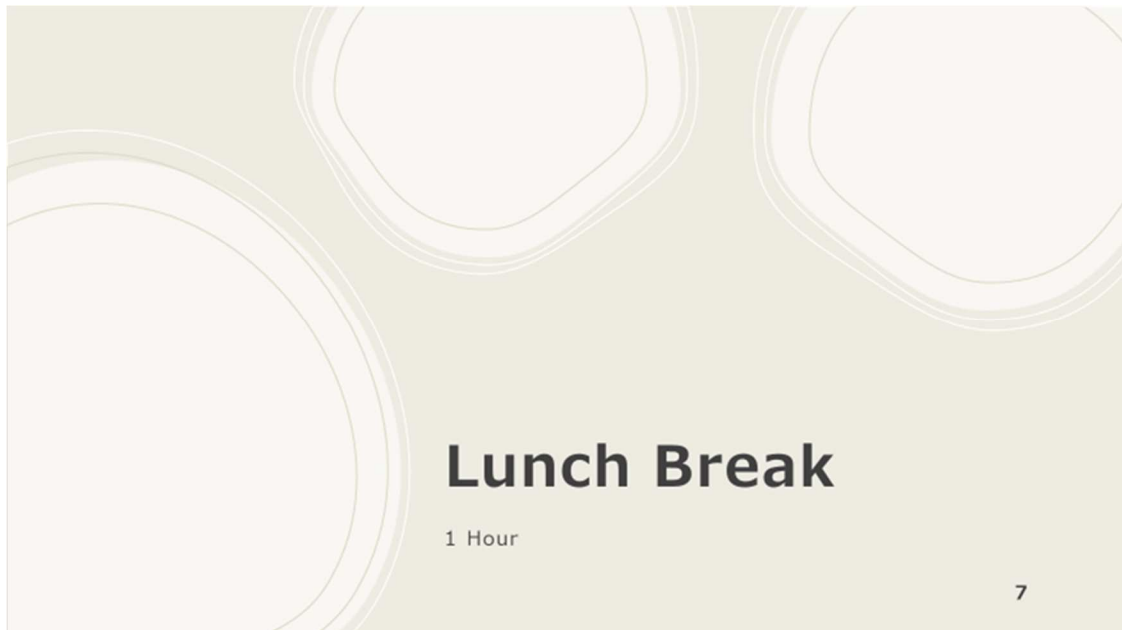
Facilitator Notes (slide 5):

Nurse educators will use Post-it super sticky easel paper and markers to create posters.

Each group will have no more than 4 members, so the number of groups will depend on the number of nurse educators taking this PDTP.

Barriers Poster Presentation

Each group will present poster that describes the barriers and challenges they have faced as online nurse educators.



The Beauty and Benefits of Professional Learning Communities

There is compelling evidence that collaboration among nursing faculty could be the first of many strategies to improve online learning.

Nursing program leaders in the New Mexico Nursing Education Consortium (NMNEC) processed how the COVID 19 pandemic would impact their learning communities by bringing together program directors from over 12 nursing schools to discuss barriers of online education and problem solve once a week in March 2020 (Liesveld et al., 2021).

Facilitator Notes (slide 8):

I will explicitly tell learners about the importance of Professional Learning Communities (PLCs).

The Beauty and Benefits of Professional Learning Communities

- What are Professional Learning Communities (PLC)?
- How would you define a PLC?
- Are you currently part of a PLC?

PLCs promote continuous growth through collaboration

Steps to building a Strong PLC

Bassi and Polifroni (2005) stated five key elements to creating a learning community:

- 1) supportive and shared leadership
- 2) collective creativity**
- 3) shared values and vision
- 4) supportive environment
- 5) shared practice

We worked on this today
- Day 1




Bolam et al. (2005) also recognized similar features in their study of the sustainability of effective professional learning communities.

Facilitator Notes (slide 10):

I will guide conversation so that nurse educators discuss how each of the five elements may be put into practice.

Day 1 Closing & Home Task

Watch at least two videos of your choice tonight.

1	2	3
		

If you are struggling to access the video, please email me!

11

Facilitator Notes (slide 11):

I will pass out Day 1 handout. Students will be instructed to watch at least two videos at home. Essentially, this is “homework”. Also, I will tell students that they may email me as late as 8pm and I will respond in a timely manner. I intend on writing my email address on the white board.



Nurse Educators Professional Development Training Program

Day 2

12

Welcome Educators

Please sit at a table and write answers to the question that coincides with your table number.

- 1. What was your biggest take away from Day 1?*
- 2. How can we, the educators in this room, build a sustainable PLC amongst ourselves?*
- 3. What questions do you have?*



13

Facilitator Notes (slide 13):

Before Day 2 begins I will place sticky notes and markers at each table. Additionally, tables will be numbered with a 1, 2, or 3. Agenda for Day 2 will be written on a Post-it poster and I will present the agenda before referencing this slide.

Table Talk

Discuss answers with table group.
One person should be prepared to speak for each table.

- 1. What is your biggest take away from Day 1?*
- 2. How can we, the educators in this room, build a sustainable PLC amongst ourselves?*
- 3. What questions do you have?*




Table 3 – Please create poster of questions

14

Facilitator Notes (slide 14):

I will walk around the room during table discussions. I will intentionally begin at tables labeled with the number 3. I will instruct these tables to leave room for further questions on their poster, because these posters will remain posted on the wall and I will continue to refer to them during each day of the training program.

Reflect on Practice: How do you engage your students?

Please write down lessons or unit that you are particularly proud of, Be sure to think about how you engaged students during this lesson.

Be prepared to share with your table group.

15

Table Talk: Share Reflections

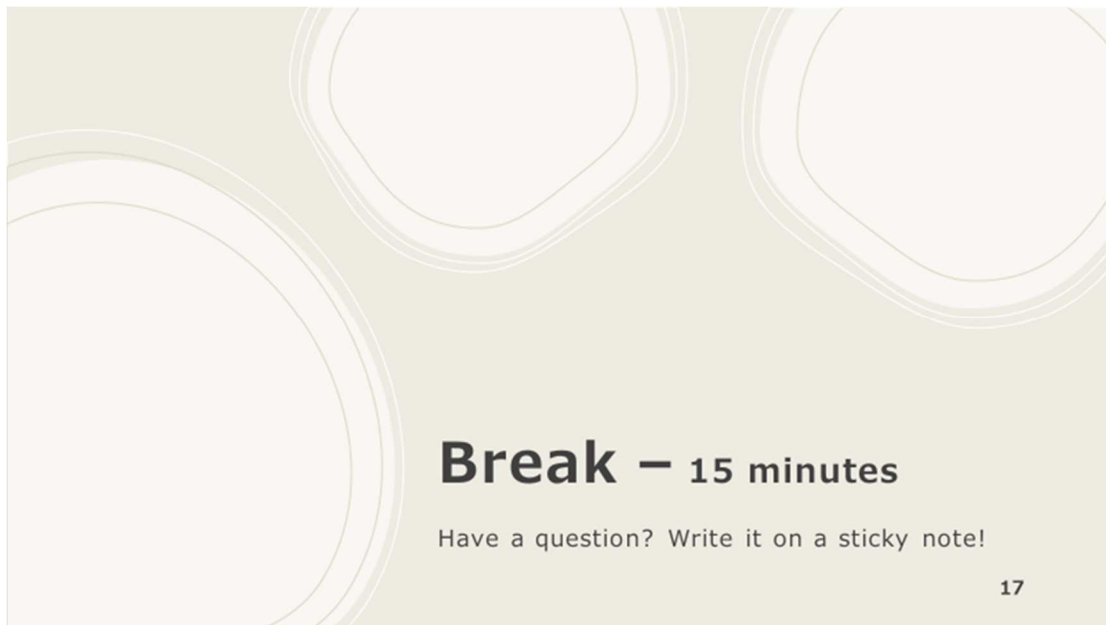
Please reflect on a previous lesson or unit that you are particularly proud of.

Share your thoughts with your table.

16

Facilitator Notes (slide 16):

Findings from my research study showed that nursing students desired more time for peer interactions, so during this slide I am intentionally providing moments for the nurse educators to interact. By discussing reflections from their previous practice, the nurse educators will learn about each other while learning from each other. After discussion or “table talk” I will explicitly tell the nurse educators that providing time for peer interactions should be replicated in their learning spaces. I will also advise them to allow students to have a time for reflection or independent thinking before peer interactions begin.



Question & Answer

Instructor answers few questions from chart created by table 3

18

What is Gameful Learning?

Gameful learning is a teaching strategy that combines components typically found in games, like collecting points and competition among players, and academic learning outcomes. An observational study evaluating a gameful teaching approach found that utilizing games in nursing education promoted student learning via creativity, risk taking, and competition, while simultaneously increasing peer interaction, teamwork, and motivation (Kranz et. al., 2021).

19

Gameful Learning Options

Last night you learned about game-based learning options. Today we will discuss each option in depth.

1



2



3



After understanding each option, you will consider the pros and cons

20

Gameful Learning Option 1

Structuring course using elements in games like scoring points

- Flipped classroom – Students learn new material independently and class-time is spent engaging in learning activities that demonstrate learning or practice skills
- Points vs. Grades – Assign points for assignment completion. Once a student receives a reward

21

Gameful Learning Option 2

Transform card games into learning experiences

- Heart, Spade, Diamond, & Club – The symbols on the cards symbolize different patients or different diagnosis
- Draw cards - the number drawn represents patient data

22

Lunch Break

1 Hour

23

Gameful Learning Option 3 Escape Room

- Used to test knowledge of specific learning goal
- Different puzzles test students' ability to complete different tasks
- Requires the use of a timer and creativity

24

Table Talk: Pros & Cons of Gameful learning

Discuss the benefits and challenges of ONE gameful learning option

Be sure to answer the following question:

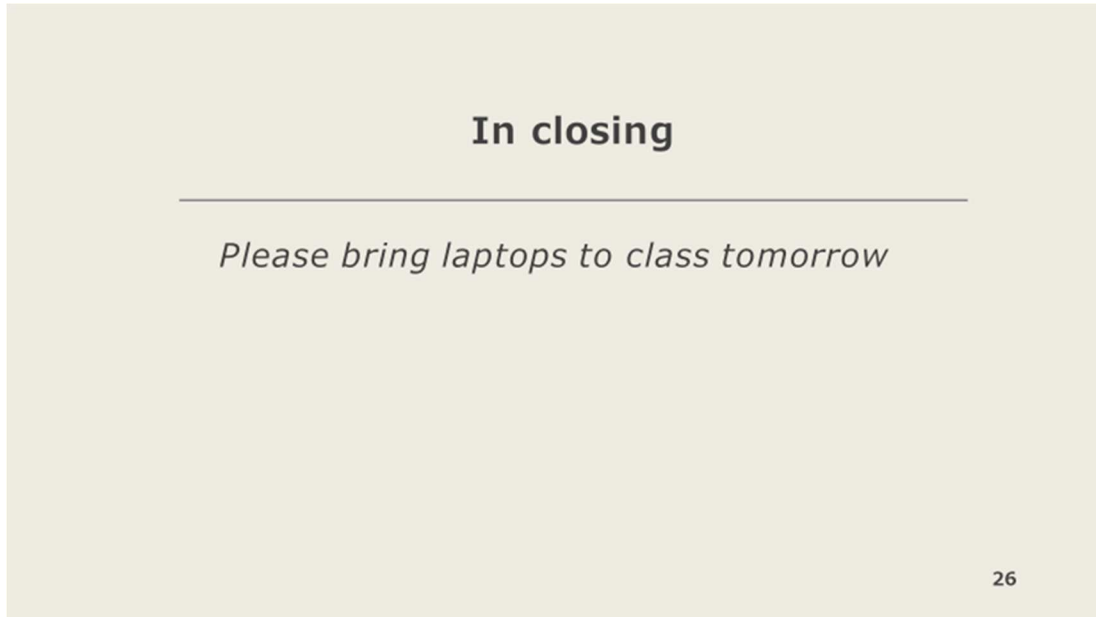
- **How could this option be used via online modalities?
(Please provide specific examples)**

One member of your table should be prepared to share ideas with the group

25

Facilitator Notes (slide 25):

I will assign a specific gameful learning option to each table. I will instruct learners to use materials (Post-it super sticky easel paper and markers) to create a poster.



Facilitator Notes (slide 26):

The nurse educators will be told that laptops will be used to explore digital resources tomorrow. Before dismissing students, I will advise the nurse educators to write questions or comments on a sticky note and stick it to one of the two posters created on Day 1 (see slide 14).



Nurse Educators Professional Development Training Program

Day 3

27

Welcome Educators

Please sit at a table and begin answering the questions below.

1. *What is your biggest take away from Day 2?*
2. *How do you plan on engaging students via online modalities in the future?*
3. *How can we become a strong PLC and continue to connect after Day 3?*



28

Facilitator Notes (slide 28):

Once all the nurse educators arrive, I will go over Day 3's agenda. Then I will provide roughly 3 minutes for nurse educators to independently answer each question.

Sticky notes and markers will be placed on each table.

Table Talk

Discuss answers with your table group.

- 1. What is your biggest take away from Day 2?*
- 2. How do you plan on engaging students via online modalities in the future?*
- 3. How can we become a strong PLC and continue to connect after Day 3?*



Write any questions on sticky note and place them question poster

29

Reflect on Practice: Which digital resources do you use?

Think about digital resources that you use while teaching.

Discuss these resources with your table. Explain how they work and why they are useful.

One member of the table group should be prepared to share about one of the digital resources discussed.

30

NEW Digital Resources

Nursing instruction must evolve; courses that previously required lectures should now include resource links to interactive software and links to programs such as Kahn Academy for content, Osmosis.org for integrated learning and quizzes, and Sketchymed.com for illustrative examples (Weberg et al., 2021). In 2019, Osmosis.org began including content for health professionals like nurses, nurse practitioners, and physician assistants. Instructors with a site subscription are also able to clip, annotate, and embed content from Osmosis onto their preferred learning management system or instructional presentation, so that nursing students will have continued access to such materials (Tyson, 2020).

31

Digital Resource Research

Independent Work

Explore the following websites:

- [Osmosis.org](https://www.osmosis.org)
- [Khanacademy.org](https://www.khanacademy.org)
- [Sketchymed.com](https://www.sketchy.com)

Be sure to note what you learn about each website.

Group Work

As a group, choose TWO websites to discuss & create a poster about.

Poster should include the following:

- Benefits of each resource
- Challenges of each resource
- Which resource is best?

32

Break

After the break one member from each group will present group's poster

33

Digital Resource Poster Presentation

Before the Break

Explored the following websites:

- Osmosis.org
- Khanacademy.org
- Sketchymed.com

Worked together to create posters!

Now

One member of each group will present

Poster should include the following:

- Benefits of each resource
- Challenges of each resource
- Which resource is best?

34

Lunch Break

1 Hour

35

Question & Answer

Instructor answers 2-3 questions from board

36

Digital Resources for Building Relationships

In my research, I learned that virtual nursing students desire more professor interactions. One participant felt some elements of communication breakdown due to lack of physical interactions. Another participant said that though they felt supported when they reached out to review tests and quizzes with the instructor via zoom, they still often felt a sense of disconnection.

37

Digital Resources for Building Relationships

Some of my study participants felt more faculty presence with the use of webcams.

Watson et al. (2017) reported that the most effective aspects of faculty-student interactions were the professors' availability and willingness to interact and engage with the students.

38

Facilitator Notes (Slide 38):

I will tell nurse educators about the Remind app. I will be sure to mention how this application can help students feel like individuals and meet students desire for professor engagement which was identified as a student need during my research study.

Digital Resources Discussion

Which digital resources promote availability and further interactions with students?

Why is it important to build relationships with our students?

39

Independent Reflection:

Who have you connected with during this PDTP?

How do you intend on using technology to keep lines of communication open?

40

Steps to building a Strong PLC

- 1) supportive and shared leadership
- 2) collective creativity
- 3) shared values and vision
- 4) supportive environment
- 5) shared practice

Share the impact your colleagues have had on you during this 3-day program!

41

Farewell Educators

Please complete post-PDTP survey before leaving.



42

References:

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UNMC College of Nursing Sepsis Escape Room. (2021). Www.youtube.com. https://www.youtube.com/watch?v=FB_mtFUyRow

Appendix B: Interview Protocol

Title of Research: Perception of Nursing Students on using Educational Modality of Online Clinical Learning

The research questions that will guide this study are:

1. How do students perceive the instruction from online modality clinical nursing courses to support their academic needs?
2. How do nursing students describe their perceptions of faculty behaviors, and how do these behaviors in online nursing courses contribute to a supportive learning environment?
3. What do online nursing students suggest would improve online nursing education?

Hello, I am Esther Edgal. I thank you so much for joining me today. I will be asking the questions, please feel free to stop the interview if at any point you are uncomfortable.

Interview questions:

1. How did your instructor teach the online clinical course?
2. How did your instructor's behavior in the online environment support your learning?
3. In general, describe your experience in an online clinical learning environment.

4. Can you describe experiences in your online modality when you felt deeply engaged or unengaged?
5. What do you think could be done differently to improve online nursing education?
6. Can you tell me about opportunities you have to interact with other students in the course room? How do the interactions impact your experience in the course room?
7. How do interactions with your educator impact your online clinical modality?
8. Can you describe to me what it was like for you personally to transition from face-to-face to online clinical modality?
9. What specific things helped prepare you for online clinical learning?
10. What barriers, if any, have you faced in being successful in online clinical modality?
11. What was your biggest challenge in an online learning environment?
12. What are some strengths of online clinical modality?