

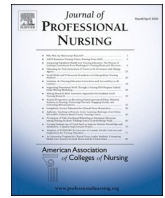


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A teaching role practicum during the COVID-19 for final year nursing students in Spain: A qualitative study

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ABSTRACT

Background: Due to the COVID-19 pandemic, suspension of face-to-face learning and clinical placements for nursing students in Spain led us to expand and adapt clinical training to a teaching role. Final-year nursing students conducted an online clinical training focused on developing their health education competence.

Purpose: The aim of this study was to explore the experiences of final-year nursing students who completed their clinical training in a teaching role practicum during the pandemic outbreak (March–June 2020).

Method: A qualitative content analysis of reflective journals from eighteen final-year nursing students was conducted.

Findings: Three themes were revealed: 1) An array of emotions due to not being able to complete their final clinical placement and deciding not to join the nursing workforce; 2) Perceived benefits of a teaching role such as being able to help, contributing to knowledge, acquiring competence, and learning support and companionship; and 3) Recognizing the teaching role as fundamental to the nursing profession and becoming aware of the importance of scientific evidence in clinical practice.

Discussion: Nursing students appreciated how teaching and health education are an integral part of the nurse's role. A teaching role allowed final-year students to acquire competence in a key nursing role during the pandemic outbreak providing a good practice for nursing education.

Introduction

The COVID-19 pandemic is the most serious public health emergency this century, with over 524 million confirmed cases and 6.2 million deaths worldwide as of 25th May 2022 (World Health Organization, 2022). Following the introduction of lockdown restrictions, nurse education in many countries was severely disrupted. For example, Australia, Canada (Dewart et al., 2020), Spain (Collado-Boira et al., 2020; Monforte-Royo & Fuster, 2020), the UK (Jackson et al., 2020; Swift et al., 2020) and the USA (O'Flynn-Magee et al., 2021; Spurlock, 2020), all suspended clinical placements for nursing students indefinitely. Although this measure was understandable given the enormous pressures that health systems were under, it meant that universities had to quickly devise new pathways for final-year students to meet requirements for graduation (Association of Deans of Spanish Colleges of Nursing, 2020; Canadian Association of Schools of Nursing (CASN),

2020).

The clinical hour requirements in undergraduate nurse education programs vary considerably across countries (O'Flynn-Magee et al., 2021). As a member of the European Union (EU), the requirement in our country, Spain, is a minimum of 2300 h of clinical training (Directive, 2013/55/EU of the European Parliament). Despite the suspension of clinical placements in response to the COVID-19 pandemic, the European Commission issued a statement reiterating the importance of clinical training hours (European Commission, 2020) to ensure consistency between training and recognition of healthcare qualifications across the EU, thus posing a challenge for nurse education providers.

Faced with suspension of clinical placements, the Association of Deans of Spanish Colleges of Nursing (representing the 96 faculties or schools of nursing in our country) proposed a number of options, one of which involved recognition, of volunteered hours by final-year students to the nursing workforce as auxiliary staff during the first wave of the

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COVID-19 pandemic (Association of Deans of Spanish Colleges of Nursing, 2020) in lieu of the traditional training. The use of final-year students to augment the workforce was an initiative introduced in a number of countries, and the experience has been reported in studies carried out in Spain (Collado-Boira et al., 2020; Martin-Delgado et al., 2021), the UK (Swift et al., 2020) and the USA (Intinarelli et al., 2020). Other options considered in our country were e-learning, group discussions, and clinical case scenario exercises and analysis, with similar proposals being made by the Canadian Association of Schools of Nursing (Canadian Association of Schools of Nursing (CASN), 2020). To our knowledge, however, only two studies to date have evaluated alternatives to hands-on clinical placements (Allande-Cussó, 2020; Liu et al., 2020).

Due to the mentioned situation of the pandemic and the suspension of clinical placements, the alternative we devised for final-year students who did not join the nursing workforce was to conduct an online clinical training focused on developing their health education competence by being assigned a teaching role. Education is considered by the International Council of Nurses (2002) to be one of the four key nursing roles. The EU Directive covering nurse education (Directive, 2013/55/EU of the European Parliament) establishes, among other aspects, the competence to *participate in the clinical training of health personnel on the basis of the knowledge, and the competence to empower individuals, families and groups towards healthy lifestyles and self-care on the basis of the knowledge and skills*. However, this competence rarely plays a central role in the practicum (McKenna et al., 2018). Moreover, studies describing the switch to online academic teaching for nursing students date back to the SARS outbreak at the beginning of this century (Dewart et al., 2020; Docking, 2003). But only recently have reports emerged regarding alternative approaches to the practical side of training (Allande-Cussó, 2020; Liu et al., 2020; Martin-Delgado et al., 2021). The aim of this study was to explore the experiences of final-year nursing students who completed their clinical training in a teaching role by analysing the reflective journals they were required to keep.

Methods

Design and participants

This was a descriptive qualitative study involving the analysis of reflective journals kept by final-year nursing students during the teaching role practicum (March–June 2020).

Context

In March 2020, all clinical placements for nursing students in Spain were suspended indefinitely. As nurse educators we therefore had to devise alternative pathways to graduation for our final-year students. Some of them volunteered, under a government scheme, to join the nursing workforce as auxiliary staff, and the hours they worked were counted in lieu of the final clinical training. Those final-year students for whom this was not an option (e.g. because they were in an at-risk group) were assigned to a teaching role practicum with the aim of allowing them to complete the minimum number of hours and acquire core competences.

The proposed teaching role practicum had the same components (i.e. mentoring sessions, practical assessment, written assignment, self-assessment, etc.) as a standard clinical placement, but was transitioned online with the task for students to design and develop evidence-based educational material aimed at meeting the learning needs of their peers, final-year students who had joined the nursing workforce as auxiliary staff. Seven groups of 4–6 students were created, with each group being assigned an academic mentor for support and supervision. During the first week of the practicum, students received online training about COVID-19 and were introduced to resources and strategies for developing educational materials. The themes for the educational

materials derived from the educational needs proposed by their peers who joined the nursing workforce in an auxiliary role to the academic mentor in the online tutorials (Martin-Delgado et al., 2021). The proposed educational needs were in relation to the management of respiratory patients and mechanical ventilation, the use of protection equipment (mask, personal protective equipment (PPE), etc.), among others. Subsequently, each student group had an online tutorial with their academic mentor in which they discussed the learning needs proposed by their peers on the frontline and decided on strategies for meeting these needs. Over the following week, they produced learning capsules (comprising videos and both pictorial and written information) that their peers could access via Moodle. This process (i.e. a tutorial to discuss learning needs followed by the creation and hosting of tailored online material) was replicated for each week of the practicum. As a written assignment, students had to keep a reflective journal of their experiences throughout the teaching role practicum. No instructions were given regarding journal content, and students were free to record whatever information they considered important.

Inclusion and exclusion criteria

The sole inclusion criterion was having completed the teaching role practicum and signing informed consent for the analysis of their reflective journals. No exclusion criteria were established.

Procedure and data collection

The reflective journals were completed and stored as digital files submitted by students through an online platform for assessment, as per course requirements. At the end of the practicum, and subsequent to the publication of students' final grade, the academic mentors, who were part of the research team, informed students about the study and invited them to participate by email, and sought consent to analyse their reflective journals for research purposes. It was made clear to them that all journals would be anonymized prior to analysis and participation had no effect on their final grade. We thus ensured that participation was voluntary and that students did not feel coerced into participation.

Analysis

The anonymized journals were first analyzed using an inductive method. Four researchers (LMD, BGF, CMR, PF), all with experience of qualitative analysis and working independently, began by reading and re-reading five students' journals so as to gain a broad overview of the content and to identify key concepts in the narratives. Therefore, the researchers individually identified the possible units of analysis and initial emerging categories (inductive method). Throughout various online meetings, the researchers agreed on the possible categories as well as the relation between them, and the identification of the emerging sub-themes and themes. The four researchers discussed their interpretations with all members of the research team in order to agree on the analytical framework that would be used to identify themes, sub-themes and categories in a more detailed reading of the material. Further, each of the researchers, individually, continued with the content analysis following the proposed analytical framework using a deductive method to confirm and complete the initial results agreed upon. Throughout this process the researchers remained open to the possibility that new categories might emerge from the material, therefore these categories and the relation between them were agreed within the researchers. Both the coding system and the results were discussed with the other members of the research team in an attempt to minimize possible bias. An excel sheet was used for the analysis.

Rigor and trustworthiness

Rigor and trustworthiness were established according to the criteria

Table 1

Overview showing the themes, sub-themes and categories, along with illustrative quotations, that describe the experiences of final-year nursing students who completed the teaching role practicum during the COVID-19 pandemic.

Themes	Sub-themes	Categories	Quotations	
1. An array of emotions	1.1 Reasons for not joining the nursing workforce	1.1.1 Feeling unprepared	S1: "I didn't volunteer because it wasn't the right time, I wasn't ready because of what was going on around me, but that doesn't mean I was just sitting around."	
		1.1.2 Ensuring family safety	S16: "At the beginning I got offers to go in and work, but after discussing it with my family and seeing that not everybody was in favour [...] I decided it wasn't worth it, for the stress it would put me under and because I'd be exposing my family to the risk of infection."	
		1.1.3 Personal reasons	S3: "Everyday we get emails with job offers, and you sense that the public needs you, your colleagues need you, and I tell you, how I would have liked to have gone and worked on the frontline to help out! But I have to face reality, and family problems mean that my priorities have changed, and right now they need me at home."	
	1.2 Feelings of loss	1.2.1 Unable to complete the final clinical placement	S17: "My final placement was going to be in the emergency department, I'd specifically requested it, because I wanted to gain as much experience and confidence as possible, all what I still feel I lack, and in these particular circumstances I don't think a placement in a teaching role will be as useful or teach me as much, but there was no other option."	
		1.2.2 Missing out on the usual study-to-work transition	S14: "I've missed out on the final few months of being a student on placement and I'll be going straight into a job without having another opportunity to work under supervision, with somebody whose responsible for what I do."	
	1.3 Not being able to help	1.3.1 Dilemma: wanting to help and not being able to	S2: "[...] when you can't be there on the frontline, you go over and over it in your head, feeling that while you're there at home you're not doing much to help. But then the chance of a teaching role appeared."	
	2. Perceived benefits of a teaching role	2.1. Being able to help	2.1.1 Supporting classmates on the frontline	S2: "We wanted to do more than just provide them with info, we wanted to send a message of encouragement, strength to all those who are out there fighting to save lives and who give meaning and a voice to our profession in such difficult times."
			2.1.2 Opportunity to help	S5: "It's been a different kind of practicum, but I've also learnt things, we've been able to do our bit during the health crisis, even though we couldn't leave the house."
			2.1.4. Feeling useful	S3: "I feel good, and useful, I've been given responsibility and I want to do a good job, to contribute something [...] and in some way or other I feel I've done my bit."
		2.2. Contributing to knowledge	2.2.1. Providing information that is useful to classmates and professionals	S15: "We've been able to provide our classmates with information they could make use of [...]."
2.2.2 Developing educational material based on learning needs			S17: "We chose this topic at the request of some of our classmates who said that they'd never come across patients having to be in the prone position and it was causing them problems."	
2.2.3. Focus on relevance, format and readability			S18: "[...] the best way of addressing this topic, and which was the most straightforward for our classmates, was to create a presentation using Canva (an online graphic design platform), it was a practical way of showing them what to do [...]."	
2.3. Acquiring competence		2.3.1. Acquiring knowledge		S10: "I've learnt the protocols for how to put on and remove PPE, how to use a face mask, how long the virus remains on different surfaces and how they should be cleaned, as well as a lot of ethical issues about how to protect yourself both at work and outside, the things that professionals need to bear in mind everyday, not just during a crisis."
			2.3.2. Teamwork	S2: "This role wasn't only about your own learning and creating materials so that others could learn, it was also about working as a team."
		2.3.3. Being able to manage information		S2: "Me, I learnt a lot, not only the theory behind face masks but also how to manage information."
			2.3.4. Gaining competence in the use of online resources and platforms	S17: "The teaching role has helped me in terms of searching for reliable information and using platforms such as Padlet and Kahoot, which I'd never used before, to create content."
2.4. Value of the tutorials: learning support and companionship	2.4.1. Support from the academic mentor and other students		S17: "The tutorials with other students and the academic mentor have been really good, as you find other classmates are in a similar situation, and the tutor gave me loads of advice and encouragement, which I'm really grateful for."	
		2.4.2. Facilitating learning	S2: "This kind of placement also helps me to see my strengths and weaknesses, and it gives me the chance to boost the former and work on the latter."	
3. Recognizing the teaching role as fundamental to the nursing profession	3.1. Importance of scientific evidence in nursing practice	3.1.1. Learning by doing	S4: "After a few weeks in the teaching role [...] you feel that when you start work in a few weeks' time you'll know what protective measures you have to take to avoid infection, and you'll do it based on the scientific evidence, which wasn't the case before."	
		3.1.2. Awareness of the importance of scientific evidence	S4: "This placement has helped me realise how important it is to get your information from a reliable scientific source."	
	3.2. Appreciating the value of the teaching role in nursing	3.2.1. Teaching as part of nursing practice		S5: "During the teaching role practicum, I've realised how important and influential nursing is with respect to the general public, because in

(continued on next page)

Table 1 (continued)

Themes	Sub-themes	Categories	Quotations
		3.2.2. Importance of health education within the nursing profession	addition to caring for patients we can inform and educate the healthy population to prevent disease.” S10: “Nurses, our role now isn't just patient care, it's health education, and that is often overlooked and not given the importance it deserves. As nurses we have to make the role of health educators our own, and it was only through the teaching role practicum that I realised this.”

of credibility, transferability, dependability, and confirmability (Lincoln & Guba, 1985). Credibility was granted by the discussion of the interpretations of each of the researchers in several online meetings to enable triangulation of data. Data saturation was achieved after the analysis of 10 journals, however a total of 18 student journals were analyzed to ensure that no new themes emerged. The context and the participants are clearly detailed to ensure transferability and dependability. Regarding confirmability, we have detailed the process followed for the analysis of data and we provide numerous examples of participants' quotations.

Ethical issues

The study was approved by the Research Ethics Committee of the Universitat Internacional de Catalunya (INF-2020-04).

Results

A total of 34 final-year nursing students (40 % of the total number enrolled) completed the teaching role practicum, of whom 18 (53 %) gave consent for analysis of their reflective journal. They ranged in age from 21 to 28 years (mean 23.89, SD 2.49), and 13 (72.2 %) were women.

Analysis of the reflective journals revealed three main themes in students' narratives. Table 1 shows the themes, sub-themes and categories that emerged from the analysis, along with illustrative quotations. The supplementary file contains additional quotations that support our interpretation.

An array of emotions

Not being able to complete their final clinical placement and deciding, for whatever reason, not to join the nursing workforce generated an array of emotions in students.

Reasons for not joining the nursing workforce

Feeling insufficiently prepared to work on the frontline with COVID-19 patients and wanting or needing to protect their own and their family's wellbeing were among the reasons for not volunteering to join the nursing workforce.

S4: “[...] I wanted to help, but I couldn't, I didn't feel ready, I froze. I'd cry at night, thinking that I should be there at the hospital, helping out, but something stopped me. I guess that the fact we had my gran with Alzheimer's living at home didn't help. My Mum said she needed me, although I don't know if she really needed me or if it became my excuse, because I felt unprepared to work on the frontline. But I didn't want to put her at risk. Because I knew that if she got infected, it would be her death sentence.”

Feelings of loss

Not being able to complete the final clinical placement was experienced by students as a loss, and it also meant they missed out on the usual study-to-work transition.

S11: “[...] it was the final placement, the last opportunity to learn a bit more, the end of our training, and many of us were going to be

assigned to the clinical area in which we wanted to work after graduating, but we've lost that opportunity [...].”

Not being able to help

The perception that by not joining the nursing workforce they were not doing their bit was something that concerned many students. Wanting to help in that way but, for whatever reason, feeling unable to was experienced as a dilemma.

S4: “You feel impotent, and angry, you want to join your classmates at the hospital and do your bit, but because of your situation at home you can't [...].”

Perceived benefits of a teaching role

By being given a teaching role, students came to realise that, although they weren't working on the frontline, they could still make a useful contribution. They felt they were contributing to knowledge, and also that it was a way of developing their professional competences. In this respect, the weekly tutorials with the academic mentor were experienced as an important source of learning and support.

Being able to help

In the process of preparing educational material, students came to feel that they were supporting and motivating their classmates on the frontline, and thus that they too were helping with the crisis response. As a result, they felt useful and satisfied that they were contributing something of value.

S9: “[...] I felt like I was of use to my classmates, because they were grateful for what we did [...]. It's satisfying, being able to help those who are out there where you can't be, it makes you a better professional, a better person. [...] I think they're the ones we should most help, because of what they're going through every day in our hospitals.”

Contributing to knowledge

Students felt that the teaching role practicum had allowed them to contribute to knowledge by collating and sharing information that would be useful not only for their peers who had joined the nursing workforce but also for health professionals, patients, families and the general public. In this context, they emphasised the need to consider the relevance, format and readability of any material so as to promote learning and health education.

S11: “It's a way of presenting, visually, high-quality information that can be easily understood and which can be used by professionals and our classmates out there in hospitals, to train future nurses and also to offer good health education to the general public.”

Acquiring competence

They also referred to what they themselves had learned during the practicum, the knowledge they had acquired and the competence they had gained in terms of managing information and using online resources and platforms.

S17: “[...] it was really useful going over the different types of face masks and the protocol for removing PPE, and also using Kahoot, managing information and taking what was useful from the different pages to create material.”

Students also felt that the practicum had helped them to appreciate the value of teamwork, of the teaching role and of evidence-based decision making, all of which contributed to their growth both as nurses and as individuals.

S13: “[...] reflecting on things such as the importance of the teaching role, making decisions based on evidence, teamwork, and reflecting on the essence of caring for others. All these things have helped me to grow as a person and as a nurse.”

Some students mentioned the challenge of working exclusively on-line and how this became a learning opportunity.

S9: “Another thing I learned was how to work online [...] I found it difficult at first, all that screen time, but gradually, when I saw the results and that it made it easy to connect with my classmates, then it became increasingly easy to work in that way [...]”.

Value of the tutorials: learning support and companionship

Students were positive about the weekly tutorials they had throughout the practicum and considered that the support from academic mentors and companionship with classmates had facilitated their learning.

S4: “[...] I would emphasise the teamwork, the useful feedback we got in tutorials, which has really helped throughout, and all we learned.”

Recognizing the teaching role as fundamental to the nursing profession

The practicum allowed students to discover and recognise the relevance of a teaching role to the nursing profession. They also became more aware of the importance of scientific evidence and its application in clinical practice.

Importance of scientific evidence in nursing practice

Students referred to their growing awareness of the need for educational material to be evidence based.

S13: “I’ve learned that, if you want to produce material that reflects the scientific evidence, you need to use reliable and high-quality sources of information. Thanks to this tutorial I’ve discovered various resources that enable you to make evidence-based decisions related to health.”

In this regard, students stressed the importance of evidence-based practice in the nursing profession.

S4: “During this placement I’ve realised that a good nurse should be guided by the scientific evidence and always look to corroborate it, and I hope that’s what I’ll always do.”

Appreciating the value of the teaching role in nursing

Students considered that through this practicum they had come to see the teaching role as an integral part of the nursing profession.

S13: “[...] I’ve been able to see the need for a teaching role in clinical practice. Patient care isn’t everything, even if it’s very important, but there’s more to nursing. The teaching role has become important, for training other health professionals, as well as the general public.”

They also recognised that nurses have an important role to play in health education.

S6: “I was aware to an extent that health education and teaching were part of the profession. However, until I was given the task of creating evidence-based educational material, I didn’t realise how important it was for nurses to make this role their own, and not to see it as less important than direct patient care.”

Discussion

The analysis of reflective journals revealed three themes that describe students’ experiences of the teaching role practicum that were devised as an alternative to the final hands-on clinical placement that they were unable to complete due to the COVID-19 pandemic. These themes were: *An array of emotions*; *Perceived benefits of a teaching role*; and *Recognizing the teaching role as fundamental to the nursing profession*.

Not being able to join the nursing workforce as auxiliary staff, as some of their classmates did, produced a variety of emotions in these students. Some of them expressed a lack of preparedness for such a role. This is consistent with one of the findings of a recent study by Cervera-Gasch et al. (2020), who reported that while 74.2 % of the nursing students they surveyed were willing to care for patients with COVID-19 if needed, 65.3 % did not feel sufficiently prepared for the task. Swift et al. (2020) similarly found that some students were concerned about causing harm to patients if they were not properly supervised, while others were worried about placing their families at risk. A recent systematic overview likewise found that the fear of infecting family members was a key factor influencing students’ willingness to work (Goni-Fuste et al., 2021). Whether or not students should have been allowed or even encouraged to join the workforce during the health crisis has been the subject of debate within universities, especially given that a primary duty of universities is to care for their students (Hayter & Jackson, 2020; Monforte-Royo & Fuster, 2020). In line with this perspective, there have also been a number of editorials and commentaries questioning this strategy (Dewart et al., 2020; Hayter & Jackson, 2020; Swift et al., 2020). What no one expected, however, was that being unable to join the workforce would leave students with a sense of failure (Swift et al., 2020), by letting down society in a time of need. Like their peers who did volunteer, these students wanted to help and felt a moral duty to do so (Collado-Boira et al., 2020; Martin-Delgado et al., 2021).

Alongside this array of emotions, our students highlighted several benefits to being given a teaching role. One benefit was the positive feedback and gratitude they received from their classmates on the frontline with regard to the educational material they had produced. As a result, they felt they were contributing to knowledge and were doing their bit to help with the health crisis. In the process, they came to appreciate the value of a teaching role within the nursing profession, and the experience allowed them to continue developing as professionals even though they were not providing direct patient care. The weekly tutorials with academic mentors were also important in this respect, insofar as they supported students’ learning and encouraged them to see the importance of the role they were fulfilling.

This aspect is closely related to the third theme to emerge from the analysis, namely the recognition by students that a teaching role is integral to the nursing profession. Although they may have been aware that education is considered by the International Council of Nurses (2002) to be one of the four key nursing roles, we believe the practicum allowed them to experience this in practice. In a recent study (Kajander-Unkuri et al., 2021) that explored the self-assessed competence of graduating nurses across 10 European countries, including our own, one of the variables considered was the teaching-coaching role. The mean rating (on a scale of 0–100) for Spanish students was 65.9 (SD = 16.3), slightly above the mean across all participating countries (62.6, SD = 17.3). In addition to supporting the idea that nursing students recognise

the importance of the teaching role, it is worth noting that the authors of this study found higher level of perceived competence by students who reported a higher level of study achievements and those more satisfied with their degree programme. With regard to our participants, it would obviously be useful to follow them up as they embark on their professional careers in order to see whether they continue to ascribe the same importance to the teaching role, and to what extent it forms part of their nursing practice.

Finally, the analysis of students' journals indicated that they had become increasingly aware of the importance of scientific evidence, not only when creating educational material but for the nursing profession in general. Evidence-based practice, that is, the ability to use current best evidence when making decisions related to patient care, is a core competence comprising knowledge, skills and attitudes that students must begin to acquire during their nurse education programme. Lab-rague et al. (2019) argue that although students are generally familiar with the concept of evidence-based practice, further efforts, especially as regards attitudes, are required to ensure its implementation in clinical settings. In this respect, our results suggest that a teaching role practicum of the kind described here could help to consolidate the appreciation and application of evidence-based practice by nursing students.

Strengths and limitations

To our knowledge, this is the first study to explore the use of a teaching role practicum as an alternative to a hands-on clinical placement in the context of COVID-19. The results suggest that despite the challenging and novel circumstances, students were able to develop their competence in one of the four key nursing roles: education.

Although the availability of 18 reflective journals enabled us to reach data saturation, we were unable to verify our interpretation of the content with students prior to their graduation and departure. A related limitation is the qualitative design and recruitment of participants from a single university. Further empirical and follow-up studies are therefore required to determine the impact that a practicum of this kind may have on students' competence as teachers once they enter professional practice. We also recognise that students were offered this practicum as a pathway to completing their studies in the context of the COVID-19, and it is unclear whether it would have the same impact were it to form part of their core study programme. However, this alternative practicum was a good practice to develop nursing competences and to reach an adequate training during the pandemic outbreak.

Implications for education

This study provides a platform for further investigation of the impact that giving nursing or other health sciences students a teaching role may have on their competence in this respect. The results suggest that a teaching role practicum in the context of the pandemic outbreak, could be a useful component of nurse education programmes, and that it may enhance students' commitment to and application of evidence-based practice. In addition, it could allow for training of competencies in

future supervision of students in practice, as well as health promotion activities for patients. We acknowledge that the development of nursing practical skills is key to nursing teaching which should be based on clinical training (Qi et al., 2018), however, our results suggest the teaching role practicum proposed as an alternative to hand-on clinical placement due to the context of the COVID-19 is a good nursing teaching practice to acquire the competences set out in the nursing curriculum.

Implications for research

The potential benefits of a teaching role practicum now need to be explored beyond the specific context of a public health crisis, as was the case here. This would mean offering it to students as a standard part of their degree programme, offering them health education practicums in community public health programs for patients and families, health programs in schools, prisons, and social health with follow-up as they enter professional practice. This would enable understanding its impact on behaviours and attitudes, including their perceived preparedness and willingness to take on the role of clinical teacher or health educator.

Conclusions

Giving final-year students a teaching role provided them opportunities for competence development in one of the four key nursing roles (i.e. education) during the COVID-19 pandemic, which they felt made a useful contribution to the crisis response. In addition to recognizing the importance of evidence-based practice, they came to appreciate how teaching and health education form a crucial part of the nursing role. Although this study was devised in the context of a pandemic with lockdown restrictions, the results suggest that students can thrive in a teaching role practicum that includes intervention in the health education process (health promotion, patient education, self-care, nursing student clinical training supervision, etc.), including in online format. Further studies should evaluate the potential contribution of the practicum to nursing students' practical learning under normal circumstances.

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Data availability statement

The data that support the findings of this study are available from the corresponding author upon reasonable request.

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Authorship contribution statement

Author	Criteria 1 contributed to conception or design	contributed to acquisition, analysis, or interpretation	Criteria 2 drafted the manuscript	critically revised the manuscript	Criteria 3 gave final approval	Criteria 4 Agrees to be accountable for all aspects of work ensuring integrity and accuracy
Martin-Delgado, L	x	x	x	x	x	x
Goni-Fuste, B	x	x	x	x	x	x
Monforte-Royo, C	x	x	x	x	x	x
De Juan, MA		x			x	x
Martin-Ferreres ML		x			x	x
Fuster, P	x	x		x	x	x

Ethics committee approval

This work obtained the approval from the Research Ethics Committee of the Universitat Internacional de Catalunya.

Declaration of competing interest

The authors declare no conflict of interest.

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