

Evolving Nursing Roles during COVID-19: Innovations in Education and Administration

Vaishali Santosh Jadhav

Department of Medical Surgical Nursing, Bharati Vidyapeeth Deemed to be University, College of Nursing, Navi Mumbai, Maharashtra, India

INTRODUCTION

The COVID-19 pandemic has reshaped the global health-care landscape, placing nurses at the forefront of crisis response. As they adapted to surges in patient volumes and resource shortages, nurses expanded their roles, taking on critical responsibilities in crisis management, telehealth, and public health education. This editorial reflects on how these transformative changes underscore the adaptability and resilience of nursing professionals, highlighting their crucial contributions during the pandemic and exploring the lasting impact these innovations may have on the future of nursing practice and education.^[1]

PRE-PANDEMIC NURSING ROLES

Before the COVID-19 pandemic, nursing roles primarily revolved around direct patient care within structured clinical settings such as hospitals, clinics, and long-term care facilities. Nurses focused on monitoring patient conditions, administering medications, and providing emotional support and education, with their duties largely confined to routine and elective health care. Emphasizing patient safety and evidence-based care, nurses worked closely with multidisciplinary teams, with less involvement in emergency response or digital health integration. Their roles, while crucial, were well-defined within the established health-care framework.^[2]

Date of Submission: 12-07-2024

Date of Revision: 26-07-2024

Date of Acceptance: 19-08-2024

Access this article online

Website: <https://innovationaljournals.com/index.php/ijnh>

ISSN No: 2454-4906

DOI: 10.31690/ijnh.2024.v010i03.004

INITIAL PANDEMIC RESPONSE

The initial outbreak of COVID-19 revolutionized nursing practices, thrusting nurses into unprecedented roles as hospitals were inundated with critically ill patients. They swiftly adapted to new challenges, expanding their responsibilities to include advanced infection control, operating makeshift intensive care units, and managing evolving treatment protocols. This shift from routine care to high-stakes emergency management demanded exceptional resilience and leadership. The pandemic underscored the vital role of nurses in not only delivering direct patient care but also in navigating and managing health-care systems under crisis conditions.^[3]

CLINICAL ROLE ADJUSTMENTS

The COVID-19 pandemic has driven remarkable innovations in nursing roles. Nurses have embraced new technologies, including telehealth and digital monitoring tools, to enhance patient care and manage remote consultations. They have also spearheaded the development of novel protocols for infection control and crisis management. In addition, nurses have taken on expanded roles in public health education, providing crucial information about virus prevention and vaccination. These innovations reflect the profession's adaptability and underscore the vital role nurses play in advancing health-care practices amidst unprecedented challenges.^[4]

INNOVATIONS IN NURSING ROLES

The COVID-19 pandemic has driven a rapid transformation in nursing education, moving from traditional in-person instruction to innovative online learning and simulation-based training. With limited access to physical classrooms, nursing programs swiftly adopted virtual platforms, allowing students to acquire theoretical knowledge and engage in interactive content remotely. Simulation-based training has played a

Address for Correspondence:

Vaishali Santosh Jadhav, Department of Medical Surgical Nursing, Bharati Vidyapeeth Deemed to be University, College of Nursing, Navi Mumbai, Maharashtra, India. E-mail: vaishalijadhav25@gmail.com

This is an open-access journal, and articles are distributed under the terms of the Creative Commons Attribution Noncommercial Share Alike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms

crucial role, providing realistic scenarios for hands-on practice in a controlled, virtual environment. These adaptations have ensured that nursing students continue to develop essential skills and clinical competencies, preparing them for the evolving challenges of modern health care.^[5]

SKILL DEVELOPMENT

The pandemic has necessitated a shift in skill development for nurses, emphasizing competencies crucial for pandemic care and remote health-care delivery. Nurses have had to quickly acquire skills in managing complex COVID-19 cases, including advanced infection control and critical care techniques. The rise of telehealth has also underscored the need for proficiency in virtual communication and digital health technologies. These new skills are essential for providing effective care in both physical and virtual environments, ensuring that nurses are equipped to handle diverse and evolving patient needs during the pandemic and beyond.^[6]

LEADERSHIP ROLES

Nursing leaders have been crucial in steering the profession through the challenges of the COVID-19 pandemic. They quickly adapted to crisis conditions, implementing emergency protocols, ensuring safety, and integrating new technologies such as telehealth. Balancing immediate needs with long-term planning, their leadership fostered resilience and adaptability within their teams, underscoring the vital role of strong, responsive leadership in navigating health-care crises.^[7]

INCREASED WORKLOAD AND STRESS

The COVID-19 pandemic has sharply intensified the workload and stress on nursing staff, pushing them to their limits. With surging patient numbers and the complexities of severe cases, nurses have faced extended shifts, stringent infection control measures, and the emotional strain of witnessing widespread illness and loss. These pressures have increased burnout, anxiety, and fatigue, affecting their well-being and job satisfaction. To sustain effective health-care delivery, it is crucial to provide nurses with adequate resources, mental health support, and manageable workloads.^[8]

BURNOUT AND MENTAL HEALTH

The COVID-19 pandemic has intensified burnout and mental health issues among nurses, underscoring the urgent need for systemic change. To support a resilient workforce, health-care institutions must prioritize mental health resources, manageable workloads, and recognition of nurses' efforts. Addressing these challenges is vital for improving both staff well-being and patient care.^[9]

POSITIVE OUTCOMES AND LESSONS LEARNED

The COVID-19 pandemic, while challenging, has driven significant advancements in nursing, including the rapid

adoption of telehealth and improved infection control protocols. Nurses have shown remarkable adaptability and resilience, embracing new roles and technologies. The crisis underscored the need for stronger mental health support and reinforced the value of interdisciplinary collaboration and leadership in health care. These experiences are shaping a more innovative, flexible, and holistic approach to nursing, ensuring a stronger, more resilient health-care system moving forward.^[10]

OPPORTUNITIES FOR FUTURE IMPROVEMENTS

The COVID-19 pandemic has transformed nursing roles, extending beyond traditional patient care into crucial areas such as crisis management, infection control, and digital health. This shift, coupled with the adoption of telehealth and enhanced simulation training, highlights nurses' adaptability and the evolving nature of their practice. To build on these advancements, it is essential to prioritize mental health support, continuous education, and policy refinement. By investing in these areas, we can ensure that nurses remain resilient and well-equipped, reinforcing their critical role in the future of health care.

REFERENCES

1. Simbola G. Soins infirmiers et fin de vie à domicile en période de crise sanitaire [Nursing and end-of-life care at home in a health crisis]. *Rev Infirm* 2023;72:38-9.
2. Kang YJ, Monsen KA, Jeppesen B, Hanson C, Nichols K, O'Neill K, *et al.* Interprofessional roles and collaborations to address COVID-19 pandemic challenges in nursing homes. *Interdiscip J Partnersh Stud* 2022;9:7.
3. Rajamani A, Subramaniam A, Shekar K, Haji J, Luo J, Bihari S, *et al.* Personal protective equipment preparedness in Asia-Pacific intensive care units during the coronavirus disease 2019 pandemic: A multinational survey. *Aust Crit Care* 2021;34:135-41.
4. Morle DA, Kilgore C, Edwards M, Collins P, Scammell JM, Fletcher K, *et al.* The changing role of advanced clinical practitioners working with older people during the COVID-19 pandemic: A qualitative research study. *Int J Nurs Stud* 2022;130:104235.
5. Woo BF, Poon SN, Tam WW, Zhou W. The impact of COVID-19 on advanced practice nursing education and practice: A qualitative study. *Int Nurs Rev* 2022;69:330-9.
6. Currie J, Thompson C, Grootemaat P, Andersen P, Finnegan A, Carter M, *et al.* A scoping review of clinical skill development of preregistration registered nurses in Australia and five other English-speaking countries. *J Clin Nurs* 2023;32:283-97.
7. Zhang F, Peng X, Huang L, Liu Y, Xu J, He J, *et al.* A caring leadership model in nursing: A grounded theory approach. *J Nurs Manag* 2022;30:981-92.
8. Biganeh J, Ashtarinezhad A, Behzadipour D, Khanjani N, Tavakoli Nik A, Bagheri Hosseinabadi, M. Investigating the relationship between job stress, workload and oxidative stress in nurses. *Int J Occup Saf Ergon* 2022;28:1176-82.
9. Chidiebere Okechukwu E, Tibaldi L, La Torre G. The impact of COVID-19 pandemic on mental health of nurses. *Clin Ter* 2020;171:e399-400.
10. Cleary M, Cunneen J, DeMaio S, Rebesch LM, Fisher D. Reshaping the future: An innovative academic-practice collaboration for COVID-19 vaccinations and testing. *Nurs Adm Q* 2022;46:167-76.

How to cite this article: Jadhav VS. Evolving Nursing Roles during COVID-19: Innovations in Education and Administration. *Innov J Nurs Healthc.* 2024;10(3):19-20.