

New Normal Era: Blended Learning Experience from the Lens of the Student Nurses

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Abstract:

Purpose of the Study: This research aims to explore student nurses' experience with blended learning since it is new to the nursing school system in the Philippines. Furthermore, its goal is to discover students' voices dealing with blended learning.

Research Method: The study utilized a qualitative descriptive phenomenological research design. It aims to understand and interpret emotionally laden topics. The investigation uncovers what a lived experience means to the individual through in-depth interviews. The researcher conducted this study according to ethical principles to avoid potential participant harm. The School's Research Ethics Committee reviewed the manuscript and granted authorization approval. The research team ensured the participants' privacy throughout the study by maintaining confidentiality for all collected data. Each participant was assigned a code to uphold confidentiality. In this study, ten (10) participants were interviewed via zoom and the transcripts were analyzed using the Giorgi method of thematic analysis.

Findings: The ten (10) transcripts yielded four hundred forty-seven (447) significant statements, four hundred ninety-five (495) final codes, fourteen (14) subthemes, and finally, two (2) emergent themes, namely: 1) The future of Nursing Education through adaptation, innovation, and revolutionary learning and 2) Blended learning empowers diversity of learners.

Implications: Based on the findings, teaching strategies heavily affect students' interaction, engagement, and attentiveness. Safe learning environments, rest or comfort at home, affordability, and reduced travel time are the advantages of using blended learning strategies for online learning, while simulations, schedules, reduced travel time, actual clinical exposures, and improved knowledge retention are the benefits of using blended learning strategies for face-to-face learning while fragile internet access, meeting deadlines for requirements, increased costs, teachers' differing approaches to handling requirements, schedule conflicts, and getting up early in the morning are challenges for student nurses using blended learning methodologies. Hence, creating a more equitable and effective system that benefits everyone is by transforming education and care through innovation and inclusion.

Keywords: New-Normal Era, Blended Learning, Experience, Lens of the Student Nurses

Background

Covid-19 has brought devastation worldwide since its emergence in late December 2019. As of April 2022, it has infected around 516 million people and caused over six million deaths worldwide [91]. In the Philippines, 3,685,403 people were infected, with a total casualty rate of 60,305 as of the same date [91]. In addition, it poses an unprecedented threat to public health, food systems, the workplace, and education [74]. Because of this, most countries have implemented quarantine rules and temporarily closed their

educational institutions. As a result, around 1.2 billion students in 186 countries are out of school during the pandemic [83].

The COVID-19 crisis in the Philippines has also impacted around 27 million students, one million educators and non-teaching staff, and learners' families [57]. In addition, 3.5 million college students enrolled in approximately 2,400 higher education institutions in the Philippines during the pandemic [41]. It also shaped a "new normal" education system, which resulted in significant transformations from traditional learning to online learning. Traditional learning refers to a learning delivery mode in which students and teachers are physically present. In contrast, online learning features the teacher as a facilitator, encouraging the active involvement of learners by leveraging diverse Internet-based technologies, especially when they are physically separated. [48].

Nursing education is one of those programs greatly affected by the education transition. Consequently, nursing programs halted and transferred online as COVID-19 cases rose worldwide [2]. Hence, students' skill development and clinical practice were set as online learning, which is not the standard approach in the conventional nursing curriculum [2]. The Department of Education (DepEd) issued guidelines for expanding limited face-to-face sessions to schools that meet the School Assessment Tool's qualifications [26]. Furthermore, the Higher Education Commission (CHED), in collaboration with the Covid-19 Interagency Task Force, issued guidance to higher education institutions for the progressive reopening of campuses for restricted face-to-face classes in areas with low Covid-19 cases [20].

Blended learning or the combination of in-person instruction with online distance learning, modular distance learning. [72]. Still, some schools in other countries also used this approach even before the pandemic [35]. It rose in fame in nursing schools because this type of learning enhances learning in nursing curricula due to the complexity of the nature of the program [72]. According to a survey in the United States, 35 percent of higher education institutions provided blended courses, which accounted for 12 percent of the 12.2 million reported distance education enrollments [28]. According to DepEd, 24.5 million students in the Philippines were enrolled in blended learning [71].

Compared to traditional learning in health education, blended learning consistently produced more excellent knowledge outputs [87]. Students become more involved in the learning process and enthused, improving their perseverance and commitment [5]. In addition, Saiz-Manzanas [72] claimed that within one nursing program, a comparison study between blended learning and traditional learning reported that 68 percent of the student population favored blended learning over face-to-face courses. However, Schwartz [75] emphasized that online learning in nursing programs has caused frustrations among teachers due to higher absenteeism and less work completion among students. In addition, students suffered from self-regulation challenges and an inability to effectively use technology for studying [69]. Moreover, the Philippines needs more facilities, such as gadgets, computer sets, and connectivity [84].

Because blended learning is a new method in the nursing curriculum, this study will be valuable to nursing education. Additionally, this study could help nursing schools decide whether to implement blended learning in nursing programs based on the results. The survey result may also give rise to additional research supporting or contradicting the study's outcome. Additionally, this study can serve as a basis for continuous improvement in nursing education. Moreover, the program's scope catches the researcher's attention because of the increased demand for blended learning, particularly in nursing education. Most of the research studies are quantitative and state that many student nurses complain about online learning due to technology struggles, time-consuming, and becoming stressful when the internet connection has problems. However, a study reported that most students were satisfied with blended learning. Furthermore,

due to the different contradicting data, the researcher wants to explore the diverse experiences of student nurses in the new-normal era of blended learning.

Research Questions

1. What are the teaching strategies that the school currently utilizes?
2. What is the effect of blended learning among graduating students?

Methods

Research Design

The study utilized a qualitative descriptive phenomenological research design. It aims to understand and interpret emotionally laden topics to uncover what a lived experience means to the individual through in-depth interviews [61]. In this study, the participants shared their experiences with blended learning during the new-normal era of nursing education.

Study Site

Commission on Higher Education commanded higher education institutions to conduct flexible learning, which is an equivalent condition for blended learning [55] promulgated in Joint Memorandum Circular No. 2021-001, which includes schools that offer health-related degree programs like Nursing, especially in their laboratory and clinical rotations. For this reason, the researcher selected one of the Schools of Nursing in Davao City, Region XI, for the 2022-2023 academic year. The researcher chose fourth-year nursing students because they are the ones who will indeed undergo blended learning this coming semester as fourth-year students need to comply with their regulatory requirement from the Professional Regulation Commission, which is to comply with their clinical cases. The researcher used the Zoom platform. Each participant had a choice to select a type of online platform they were comfortable with, like Messenger, Discord, Google Meet, or any video-conferencing application.

Participants

There were ten (10) participants selected through non-probability sampling, precisely the purposive sampling technique. It is the most generally used method in qualitative research studies, in which the researcher can consciously choose participants based on her expertise and understanding of the study objectives.

Inclusion Criteria:

In this study, the selected ten (10) participants were fourth-year nursing students aged 21 to 24 years old, currently enrolled at the selected school in Davao City in the academic year 2022-2023, and able to speak and write Tagalog or Visayan dialect or English language. Those with a stable internet connection, possess a laptop or desktop or tablet or mobile phone, and well during the in-depth interview can only participate. However, all participants can participate regardless of sex, religion, and residence if enrolled in the selected nursing school in Davao City.

Exclusion Criteria:

During the scheduled interview, the following had a chance to decide not to be present because of illness, residing in an area with an unstable internet connection, and withdrawing during the scheduled date of the interview. Hence, those who are in these situations are excluded from the study.

Data Measures

The study utilized open-ended questions formulated by the researcher based on the two (2) major research questions. The interview guide questions underwent a validation process by three validators. The pre-testing of guide questions was tested on one (1) participant after obtaining consent. Then, the guide questions are finally given to the ten (10) participants after obtaining consent. During the interview, they shared their experiences with blended learning utilized by the school. Informed consent, the participant's data information sheet, and the interview guide questions are the two primary components of the interview guide.

The data information sheet contains the participant's coded name, age, sex, year level, and courses enrolled in, found in the first section of the interview guide. The interview guide questions are divided into two categories: (a) teaching strategies and (b) effects of blended learning. The participants were gathered and interviewed individually for 30 to 45 minutes via Zoom.

Data Collection

Study participants were selected through non-probability sampling, precisely the purposive sampling technique that meets the inclusion and exclusion criteria.

Each participant was a fourth-year student nurse currently enrolled at the selected school in Davao City in the academic year 2022-2023 and able to speak and write Tagalog or Visayan dialect or English with a stable internet connection and functioning gadget. The researcher sends Facebook messenger invitations to ten (10) participants. Participants received the digital invitations and copies of informed consent through Facebook Messenger.

However, the set of questions tested to one (1) participant if the language is understandable, the set virtual meet link was appropriate, and the location with an internet connection was stable. After a specified amount of time had passed, the researcher began to compile a list of participants who would affirm their willingness to participate in the study. Students who engage in the study are assumed to know their objectives and will abide by mutual privacy and confidentiality norms. The researcher anonymized each participant by excluding personal information from the study record.

The research team conducted an orientation via Zoom or any convenient online platform the participant chose, where they electronically signed the informed consent. We reiterated participants' rights during the direction preceding the interview. The researcher had set an interview according to the participant's most convenient time and online platform. The sharing of experiences lasted about 30-45 minutes with the counselor for the research interview, who was present to hasten the interview process. He asked the interview questions on behalf of the researcher, but the researcher also asked follow-up questions if needed. The data analyst assisted in analyzing the transcribed verbatim for the final themes. The researcher currently holds the data securely, but they will delete it after one (1) year.

Data Analysis

The researchers utilized the Giorgi thematic analysis method to analyze the collected data, and the description is presented below.

1. Sense of the Whole. One reads the entire description to acquire a general sense of the whole statement.
2. Differentiation of Meaning Units from a Psychological Perspective with a Focus on the Investigated Phenomenon. After establishing a comprehensive understanding of the entire context, the researcher revisits the beginning of the text, conducting a thorough reading to identify instances of meaning

transitions. The objective is to differentiate "meaning units" within a psychological framework and with a dedicated focus on the phenomenon under investigation. Then, eliminate redundancies and clarify and elaborate on the meaning of the units by relating them to each other in the sense of the whole.

3. Translating everyday expressions of participants into psychological language, with a specific emphasis on the investigated phenomenon. After formulating meaning units, the researcher reviews all of them, expresses them in the concrete language of the participants, reflects on each, and distills the essence of the experience for the participant. The researcher next transforms each relevant unit into the language of psychological science.
4. Integration of transformed meaning units into a coherent representation of the structure of the experience. Following an imaginative variation on these converted meaning units, the researcher develops a consistent statement regarding the participants' experience.
5. Final Synthesis. Finally, the researcher synthesizes all the statements regarding each participant's experience into one consistent view of the structure of the incident, which describes and captures the essence of the experience.

Ethical Considerations

The researcher conducted this study according to ethical principles to avoid potential participant harm. The School's Research Ethics Committee reviewed the manuscript and granted authorization approval. The research team ensured the participants' privacy throughout the study by maintaining confidentiality for all collected data. Each participant was assigned a code to uphold confidentiality.

Findings

The researcher utilized the Giorgi method of analyzing qualitative data. The verbatim transcripts were translated from the participants, extracting four hundred forty-seven (447) significant statements from their total of eight hundred fifty (850) views.

It revealed one thousand ninety-five (1,095) codes through discrimination of the meaning of every significant statement by eliminating redundancies. After thoroughly rereading, it showed four hundred ninety-five (495) final codes that addressed the researched phenomenon. Coded words were transformed into the concrete language of the participants, reflecting fourteen (14) answers to each question under study. Then, fourteen (14) sub-themes appeared after the synthesis of transformed defined units into a structure yielded from their experience. Finally, two (2) emergent themes emerged: 1) The future of Nursing Education through adaptation, innovation, and revolutionary learning and 2) Blended learning empowers diversity of learners, which emerged after synthesizing all the sub-themes relating each participant's experience into one consistent statement of the structure of the experience which describes and captures the essence of the experience.

Emergent Theme 1: The future of Nursing Education through adaptation, innovation, and revolutionary learning.

Subtheme 1: Navigating the modern education landscape.

The courses (subjects) in the nursing program that used online teaching strategies are Contemporary World, Literature, Theology, Gen. Ed, Leadership and Management, and Nursing Concepts (NCM 218) to engage learners in managing time, setting goals, & monitoring their progress while Related Learning

Experience (experiential learning/hands-on learning opportunities) and Competency appraisal used face-to-face (blended) teaching strategies.

Subtheme 2: Clinical instructors redefine pedagogical innovation.

To adapt to the current educational system's blended learning transition, clinical instructors must innovate different teaching strategies to improve student learning. In academics and Related Learning Experiences, students said their instructors used the same teaching strategies. The teaching strategies used synchronously and face-to-face are simulation, case-based learning, team teaching, live lectures, discussion (exchange of ideas), and return demonstration. In contrast, inquiry-based learning flipped classroom (engage instructional materials, e.g., video), interactive digital learning, and web-based application evaluation are used during asynchronous.

Subtheme 3: Students' adaptability to blended learning modality. According to nursing students, blended learning is taxing, especially if they travel to their classes with minimal time in between. Nursing students prefer face-to-face teaching strategies for nursing courses because it is skill-based performance. They like online teaching strategies for academic subjects because most apply concept-based learning strategies.

Subtheme 4: Bridging the gap in the virtual learning world.

Teaching strategies help connect the gaps between the students and their learning environment, especially when facing the computer. They benefit learners by enhancing knowledge retention, increasing focus, motivating them to participate during interactive learning, and helping them cope with/ stress and manage time.

Subtheme 5: Empowering New Normal Nursing Education.

Teaching strategies should strengthen the current trend in nursing education. Teaching strategies done face-to-face worked best for nursing students because in-person instruction provides access to clinical simulation laboratories, allowing them to practice clinical skills in a safe & controlled environment.

Subtheme 6: Meeting challenges and rewards.

With this new trend in our educational system, the students encountered different experiences and challenges. The best experiences encountered by nursing students during blended learning sessions were the actual performance of procedures, clinical rotational duty, leadership training, better study time, and discovering new technology. Conversely, participants grappled with challenges, including unreliable internet connectivity, the high cost of technology usage, power interruptions, strained interpersonal relationships between students and clinical instructors, and fatiguing night duties.

Emergent Theme 2: Blended learning empowers diversity of learners.

Subtheme 1: Access to a broader range of resources during capacity restriction.

The participants expressed their thoughts on the accessibility of the resources during capacity restrictions brought about by the pandemic. Nursing students agreed to the current blended learning strategies utilized by the school because they can have both face-to-face and online schedules. Relaxation and resting periods, not costly, and safety against COVID-19 are the common expressions about blended learning.

Subtheme 2: Accommodation of different learning styles.

The accommodation of the different learning styles, such as the synchronous-asynchronous sessions and face-to-face, helped them a lot. The participants thought blended learning strategies are essential, especially for graduate students, because they allow them to practice real clinical nursing experience.

Subtheme 3: Efficient use of instructor time.

Clinical instructors had a more significant impact on blended learning, which may affect students' learning.

The advantages of utilizing blended learning strategies for online strategies are a safe learning environment, providing rest/comfort at home, not costly, & less travel time. In contrast, face-to-face strategies are the simulations, providing a schedule, less travel time, actual clinical exposures, and better knowledge retention. Nevertheless, we prioritize strict health protocols to promote health and wellness.

Subtheme 4: Building Student Authentic Mastery.

Students were able to examine in the context of personally relevant real-world issues about blended learning, wherein students learn to adjust to the situation. The struggles of student nurses in utilizing blended learning strategies are frail internet connectivity, meeting the deadlines of the requirements, additional expenses, teachers having different strategies in dealing with school requirements, conflicts of schedule, and waking up early in the morning.

Subtheme 5: Fostering a student-centered blended learning environment.

Some of the participants thought that fostering a student-centered learning environment is beneficial for their learning. Some of the teaching strategies are giving quizzes after discussion during the synchronous session, major subjects not all in synchronous, shifting asynchronous sessions into synchronous per week, materials needed for RLE demonstration should be provided by the school, more exposure to skills laboratory for practice demonstration, and minor subjects discussion should be done synchronously once in a month. Teachers must understand students' behavior during blended learning sessions to lessen stress.

Subtheme 6: Enhancing nursing skills and confidence for future real-life practice.

Nursing students benefit from enhancing their nursing skills for future clinical practice. They stated that blended learning is effective because they can practice in clinical settings, manage time to complete the requirements, and it helped develop confidence before becoming a staff nurse.

Subtheme 7: Navigating home-school transition.

Student nurses expressed that it restricts learning opportunities during online and face-to-face learning strategies. They find it challenging to perform when the basis is videos; discussions are quick and difficult to follow, and very short intervals (1 hour) of shifting online to a face-to-face session. However, there are student nurses who appreciate and are thankful to the school that manages to adopt blended learning strategies.

Subtheme 8: Creative synergy approach of blended learning.

The school has created a mutually advantageous action through blended learning to cater and adjust to the new normal in the educational system. The interventions done by the school in response to the pandemic, which led to blended learning, are the utilization of Quipper as the virtual platform, innovative teaching strategies by some of the clinical instructors, live video demonstrations, case scenario or web-based scenarios, utilization of online quizzes and examination and vaccination drive for students. However, student nurses also expressed interest in opening additional computer laboratories, hoping to improve internet connectivity and provide buses for transportation, as well as other teaching strategies based on an evaluation to avoid information overload.

Discussion

The future of nursing education involves adaptation, innovation, and revolutionary learning. The flexibility of blended learning in nursing makes it possible to adapt to the current pandemic-related situation and the Commission on Higher Education's mandate under CHED Memorandum Order No.9 Series of 2022. [20] Students will still attend school for skill training even though the theoretical component is primarily offered online via digital technology. Clinical experience is essential to the course

because nothing can imitate a real-world situation. Therefore, nursing students will gain practical and hands-on experience through exposure to various healthcare institutions. The study results indicate that students prefer this modern pedagogical landscape. A study [7] saw online learning as a suitable adaptation for theoretical instruction and some clinically focused instruction, such as discussions of clinical cases and history-taking. Although there can never be a substitute for in-person instruction, blended learning is still a viable option in the post-COVID era.

Technology plays a critical role in supporting online nursing education. However, despite the increased accessibility and convenience that technology can provide, social and economic constraints can severely restrict access to technology for all students. The way pupils learn is still changing due to technological breakthroughs despite these obstacles [51]. Moreover, information and communication technology is advancing at a rapid rate in the twenty-first century, pushing teachers to modify the way they operate and the way they think about teaching. Clinical instructors who work with students at all educational levels also use the blended learning model to combine technology with education [25].

In addition, nursing educators are beginning to recognize the value of teaching strategies that promote active, engaged, experiential learning, just like in clinical education. Examples of learning methods that apply knowledge learned through didactic training to practical situations include case- and problem-based learning. Technology enhances these instructional methods, enabling students to apply what they learn in simulated settings [85].

We conducted simulation training in laboratories to support experiential learning and bridge the theory-practice gap without the constraints of real-world practice. As a result, nursing students could become competent in fundamental professional and clinical skills and prepared to work safely in various healthcare settings. An earlier study [81] among nursing students found that simulation-based instruction boosted learners' self-confidence. In a controlled and safe environment, simulation immerses students in scenarios resembling clinical conditions while reducing safety risks and promoting standardization across instructional activities. Simulation-based education can help healthcare workers deal with the emotional stress of their work environment and increase competence and confidence. Virtual learning environments also became a method to relieve strain on the higher education system [59].

Nursing is a skill-based profession, according to the participants. That's why most participants preferred face-to-face instruction for their lessons, particularly when it comes to nursing skills. A study [36] states that student nurses were predisposed to feel inept and unconfident to practice them on patients when they would ultimately be allowed to resume their clinical practice because of the lack of face-to-face practical sessions. In addition, students also can ask for clarifications from their instructors when the need arises. On the other hand, students also opted for online classes, especially in their academic subjects. Many students expressed favorable opinions about their educational experiences, mainly using pre-recorded online lectures. They claimed that access to these recordings gave them the convenience and freedom to examine courses at their speed, place, and time without worrying about missing any information.

Blended learning benefits students by enhancing knowledge retention, increasing focus, motivating students to participate during interactive learning, and helping them cope with stress and manage time. A study [47] stated that blended learning significantly raises nursing students' knowledge and satisfaction. Moreover, another study [76] said that with more flexibility in learning options and an improved learning environment, blended learning increases student accomplishment. It improves the learning experience for students by giving them the chance to deepen their comprehension through independent topic inquiry.

Nurse educators have always needed help determining the optimal teaching methods to maintain and advance nursing students' involvement in classroom and clinical settings. To sustain and enhance the academic engagement of nursing students, the school must provide various strategies. Based on the result of this study, the preferred teaching methods for nursing students are face-to-face or synchronous sessions because they give them access to clinical simulation facilities where they can practice their clinical skills in a secure setting. According to Ghasemi [32], active learning formed the foundation for most educational practices to enhance students' academic engagement. In this regard, numerous research studies have demonstrated that any teaching strategy involving students in the learning process can foster intellectual engagement and, ultimately, student academic accomplishment.

Although poster boards and lectures remain the prevailing teaching techniques for nursing education at every level, embracing team-based learning and virtual reality is crucial to creating a ready nursing workforce for the future. Globally, the pandemic caused a significant loss of lives among medical workers. Digital health education is the most appropriate response to continuing nursing education. The technological evolution in healthcare is advancing and has created some modifications in the syllabi and struggles in the face of rapid practice change. Modifying the curriculum for student nurses aims to enhance a broad spectrum of professional informatics skills. Hence, future nurses will revolutionize a very different practice environment than today because of the pandemic. Nurse educators provide other techniques or models of care using blended learning strategies to lead these practitioners into the future [70].

However, learning from home may cause distance learning-related stress and stressors among nursing students depending on students' digital educational environment. According to Wong [90], there are three (3) psychological effects related to each other on blended learning. Namely, new dimensions, opportunities, and learning interactions for student nurses of differing learning styles. They expressed varied reactions focused on the "self." Blended learning outputs may turn into a positive spiral of development of recognition from others, may meet competence later after constant practice, leading to better identity formation, and ultimately, again to relatedness.

Blended learning empowers the diversity of learners. Utilizing blended learning among students continues to transform the educational system, uncovering various experiences. In this study, the actual performance of procedures, clinical rotational duty, leadership training, more time for studying, and learning new technology were the best experiences nursing students had during blended learning sessions. On the other hand, slow internet connectivity, expensive technology use, power outages, poor interpersonal relationships between students and clinical instructors, and exhausting night shifts were challenges. According to Agu [2], many students live in distant geographical areas with limited or no access to the Internet, inadequate financial resources, problems with the device, and a break in regular student socialization, which are some of the challenges of blended learning. Despite some of the restriction, students experienced because of blended learning, they expressed that it gives them relaxation and resting periods, especially during asynchronous sessions.

Moreover, they said it is not costly and protects them against the Covid-19 virus. In addition, some of the students favored blended learning because they can have both face-to-face in their clinical practice and online in their theoretical and academic lessons. Furthermore, blended learning has combined the benefits of in-person and online instruction, proving it to be a viable teaching strategy that students will benefit from [12].

Some benefits of blended learning strategies for face-to-face learning are simulations, less travel time, real clinical exposure, and better knowledge retention. For online learning, the benefits are:

- A safe learning environment.
- Providing rest or comfort at home.
- Being affordable.
- Reducing travel time.

To enhance health & wellness, however, strict health protocol is given priority. An article [27] supports this by stating that a blended learning environment fosters abilities such as interpersonal communication, time management, critical thinking, and teamwork. Additionally, a study [65] also supported the results of this study that poor motivation/self-direction, a lack of time and time management abilities, and other difficulties specific to conducting blended learning activities at home.

Nursing students emphasized that blended learning methodologies are crucial, particularly for graduate students, since they enable them to put what they have learned about pre-recorded nursing procedures into practice in a real-world setting. However, a recent study [56] states that students would not want videos to replace in-person training, which was underlined by using videos to conduct anatomical dissections.

Students said blended learning is effective because it allows them to practice in clinical settings, manage their time to complete the requirements and help them gain confidence before working as staff nurses. Shorey [78] said that blended learning improved their learning and gave them more confidence to handle comparable circumstances. Students were open to interprofessional education because it helped them better understand its significance and tremendous respect for other professionals.

The participants revealed that their school began utilizing a Learning Management System before the pandemic. The pandemic made their transition challenging, but it was not a seamless shift from exclusively face-to-face to entirely online and then blended learning. Then, the school adopted an online platform for synchronous meetings like Zoom and Google Meet until they helped students with their vaccinations in preparation for the blended learning modality. And now that they are utilizing blended learning, the opinions of the participants vary from each other. Still, to sum it up, the students are enjoying the advantages of blended learning while craving for a resolution to mitigate the benefits felt by the students brought about by this modern landscape of education.

The deliberate use of technology to enable flexible and equitable learning possibilities in higher education is still important today and even more so. Teachers are responsible for effectively integrating online resources into their lessons, crafting teaching, and learning plans incorporating purposeful technologies, and addressing student interactions with teachers, fellow students, and content. To conclude, teachers should make an extra effort to give students enough opportunity to interact not only with the learning content but also with the teacher and their fellow students while using blended learning styles. All these need to be supplemented by ongoing support for technical problems and effective blended teaching and learning.

Student nurses are uniquely taught primarily during the pandemic. Digital tools guide learners to continue learning and stay safe. To prepare for future careers, educators adjusted educational strategies to cater to individual needs. Evaluating technology is essential to align it with learners' needs and address areas needing improvement. By observing and participating in discussions with learners, educators can pinpoint problem areas and create an opportunity for students to contribute their ideas on utilizing technology to find solutions. The trained instructor uses their expertise and assessment tools to diagnose learner needs and crafts targeted instruction with the available resources since blended learning is a transformational set of dynamic experiences from students' experiences [52].

However, blended learning involves online and offline activities that cause learners emotional and academic experiences. Academic emotion is related to the teaching and learning process. Attention, self-regulation, and motivation are all factors that affect students' feelings while they aim to continue learning. Hence, instructors as course designers may modify some of the strategies based on the students' academic and emotional responses [92].

Conclusion

Based on the findings, the school has implemented an innovative teaching strategy, and the clinical instructors are currently employing this approach. Blended learning is a critical factor in empowering a diverse range of learners. The educational institution has embraced new and effective teaching methodologies, as evidenced by adopting innovative strategies. The demonstrated flexibility and integration of blended learning indicate a dedication to addressing the diverse needs and preferences of a varied student population, thereby nurturing an educational environment that is both inclusive and dynamic.

Implications

- Nursing students are in favor of blended learning for theoretical lessons. At the same time, total face-to-face clinical exposure builds more confidence and competence during the clinical exposure.
- Teaching strategies more heavily influence the learning of students. It improves students' interaction, teamwork, attentiveness, and engagement. Students find the face-to-face and synchronous component of the online setup to be exciting and beneficial to their learning, especially in their clinical exposure. Nonetheless, although they perceive asynchronous sessions as tedious and uninteresting, this tactic allows students to get the relaxation and time management needed to complete other academic tasks.
- Learners can benefit from teaching strategies because they improve memory retention, sharpen focus, encourage participation in interactive learning, and help you deal with stress and manage time.
- Clinical instructors should develop inventive teaching techniques that would suit the needs of the students. Students should also be receptive and adaptable to new teaching methods for a positive learning environment.
- In the context of blended learning, student nurses reported positive experiences, such as engaging in procedures, clinical rotational duties, leadership training, and having additional time for studying and learning about new technology. On the other hand, negative experiences encompassed challenges like sluggish internet connectivity, high costs associated with technology use, power outages, strained interpersonal relationships between students and clinical instructors, and demanding night shifts.
- Blended learning is frequently described as relaxing, inexpensive, and COVID-safe.
- Safe learning environments, rest/comfort at home, affordability, and reduced travel time are benefits of using blended learning strategies for online learning, while simulations, schedules, reduced travel time, actual clinical exposures, and improved knowledge retention are benefits of using blended learning strategies for face-to-face learning. To enhance health & wellness, however, strict health protocol is given priority.
- Fragile internet access, meeting deadlines for requirements, increased costs, teachers' differing approaches to handling requirements, schedule conflicts, and getting up early in the morning are challenges for student nurses using blended learning methodologies.

- Giving quizzes after discussions during synchronous sessions, having major subjects not all in synchronous, converting one asynchronous session into synchronous per week, having more exposure to the skills lab for practice demonstrations, and having minor subjects' discussions done synchronously are additional effective teaching strategies that the school does not currently use. Teachers may comprehend how students behave during blended learning sessions to reduce stress.
- Throughout online and face-to-face learning strategies, student nurses complained that it limited their options for learning, making it difficult for them to perform when videos served as the basis, made discussions challenging to understand, and disturbed their sleep patterns (quizzes were given in the morning while they are from 11-7 shift).
- The school's approach to the pandemic, which resulted in blended learning, included using Quipper as a virtual platform, creative teaching methods from some clinical instructors, live video demonstrations, case scenarios or web-based scenarios, and online quizzes and exams.
- Embracing innovation and inclusivity can enhance education and care systems. Implementing new and creative ideas ensures the quality of education and care, with a commitment to including and valuing everyone, irrespective of their background or identity. Implementing new technologies and teaching methods promotes diversity and equality and creates more supportive and accessible learning environments. Transforming education and care through innovation and inclusion may create a more equitable and effective system that benefits everyone.

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