

The world is facing unprecedented challenges in the face of a global pandemic. This pandemic will forever shift the educational landscape; it already has. Exposure to repeated and disturbing images in the media related to the COVID-19 epidemic, such as overworked and understaffed units, can be psychologically distressing for many people (Garfin et al., 2020). These choices are already occurring in other countries, with examples of fast-tracking nursing programs internationally (Al-Arshani, 2020), and there is a genuine chance that educators could be called in to quickly train people with little foundational knowledge or skills to provide nursing care. As Registered Nurses, we are wrestling with guilt from the tension between wanting to urgently join our colleagues on the frontlines and staying in our current roles, recognizing that in the intermediate and longer-term, this will enable the addition of more Registered Nurses to the workforce. There have already been requests to nursing alumni and retired nurses for increased support in the COVID-19 response, and the impulse to contribute to direct pandemic care is compelling. While the majority of learning is conducted online, students in this program must complete in-person clinical placements to fulfill the Bachelor of Nursing degree requirements. Within our program, most students work regular hours as Licensed Practical Nurses in their respective communities across Canada in addition to pursuing their educational commitments, including theory and clinical courses. The responses from students highlight a central issue in removing students from clinical: the academic institutions' concern about the risk to the student, and the student's willingness to take on the risk if it means the completion of their program. Is it responsible and ethical to advocate for accelerated programs to licensure, and reduced clinical practicum hours? If educators, who are also nurses, are pulled into providing clinical care and frontline service, how does that affect our responsibility and capability to educate when, in a year, an exhausted and diminished workforce needs more nurses? Specifically, the risk that a nursing student as either an asymptomatic or mildly symptomatic carrier of COVID-19 could return to their community and cause a further unconscionable spread of the infection. Nurse academics may also feel a heightened and acute sense of guilt for not contributing as frontline health care workers during the pandemic. We have also witnessed globally the recognition of the dedication, roles, and significant contributions that nurses play in the health care system. Drawing from firsthand experience as nurse educators leading clinical courses in a post-licensure nursing program, we consider some of the early lessons as we face this health crisis. We question how we will continue to educate nurses in a society facing social distancing, isolation, and quarantine measures, while also needing nurses at the frontline. In the days preceding this decision, numerous questions and concerns were shared in online meetings, over conference calls, and in urgent emails amongst colleagues. Athabasca University did not experience the same challenges that other academic institutions faced with the quick pivot to distance learning in a digital environment. Many students in clinical placements were in their final focus clinical practicum, and thus close to successfully completing their program. The risk of acquiring COVID-19 as a care provider is significant (Bernstein et al., 2020). Examples include students who would consider volunteering for pandemic related service if it accumulated clinical hours necessary for degree progression. Mounting concerns regarding the strain on health care systems globally are already occurring and likely to get significantly worse. This health crisis impacts not only frontline staff and clinical leaders but all systems and communities. COVID-19 has also already disrupted universities and

academic institutions. Within the health field, schools of nursing are bracing for unique challenges related to our role in helping develop the next generation of care providers. This article focuses on the unique needs and concerns of nursing educators and nursing students in the face of the COVID-19 pandemic. Athabasca University offers a Bachelor of Nursing program to Licensed Practical Nurses from across Canada in an online environment. Ethically we had to consider weighing the value of education against the risk and strain to the learner personally and professionally. Students often travel hundreds and sometimes thousands of kilometres from their home province to come to Alberta to complete clinical courses. When rates of COVID-19 increased, there were concerns from both faculty and students on the possible restrictions or limits to travel within Canada. How will we recover from the pandemic?