

Evaluation of the flipped classroom at the Li Ka Shing Faculty of Medicine



N Sharma, CS Lau, D Harbutt, G Morris, I Doherty. Li Ka Shing Faculty of Medicine, The University of Hong Kong

Abstract

The utilisation of video based materials prior to a teaching session with active problem solving during forms the basis of the novel flipped classroom instruction. Our study evaluated the use of this format during the teaching of rheumatology to third year medical students. 87/106 students evaluated this format through the use of a strongly disagree (1) to strongly agree (5) Likert scale and provided mean scores of 3.7 to 4.1 for statements allied to better understanding, preparedness, peer and teacher interaction, peer to peer problem solving, motivation, usefulness, achievement of learning outcomes and a desire for future classes to be delivered in this way.

From a qualitative perspective, students commented that this format allowed for active engagement, discussion, consolidation of knowledge, immediate feedback, application of theory to real life patient problems and the ability to watch and revisit the video material as necessary. Potential downsides included the lack of an electronic voting system, the perceived heavy workload and the fact that this form of interaction may not be best suited to East Asians

The flipped classroom allows for worthwhile reflection of clinical knowledge and subsequent application. The findings from this initial study are encouraging and we plan to continue work on evaluating this format alongside other forms of delivery

Flipped classroom

- A teaching approach in which lecture and "homework" elements of a course are reversed
- Students view or listen to pre-recorded lectures of 7 to 10 minutes at home
- Class time is spent to engage in exercises, projects or discussions
- Trades off of active learning, student engagement, motivational techniques

Aims

- · Evaluate the merits of the Flipped Classroom
- · Mixed methods format

Methods

- · Rheumatology teaching
- 2 lecture sessions; videos emailed prior
- · 15 groups of students
- · Patient cases; MCQs; A-E response cards
- Questionnaire; Likert scale, free text responses

Procedure





Procedure

Onto here....





Cases discussed

- · Hypermobility syndrome
- Fibromyalgia
- Lyme Disease
- · Polymyalgia rheumatica
- Gout
- Osteoarthritis
- Rheumatoid arthritis
- Systemic lupus erythematosus

Case presentation

- Brief history plus clinical signs and investigation findings
- Differential diagnoses
- · Further investigations
- Clinical management
- Pathophysiology of condition
 Free interactive discussion

Results - Questionnaires

87/106 students (82 % RR)

Mean Score	SED
4.14	0.70
4.03	0.77
3.83	0.80
3.83	0.77
3.75	0.81
	4.14 4.03 3.83 3.83

Statement	Mean Score	50
The secsion inspired me to pursue further learning in the subject	3.72	0.5
This teaching format is more useful/effective as compared to the conventional lecture style	3.83	0.8
Overall the model of deliverywas effective in supporting me to achieve the learning outcomes	3.97	0.7
Would you like future class sessions to be delivered in this way	5.75	0.8

Qualitative Data

- Time for discussion, video taped lecture facilitates discussion
- Really encourages us to actively engage in the interactive activities
 We are allowed to play back the video and review another.
- We are anowed to play back the video and review anytime
 Case discussions with lecturer helped to further consolidate our
- Able to explore more key concepts and explore knowledge beyon lecture notes
- · Watching the video beforehand means we will not miss anything
- Flexibility in schedule of watching lecture at time of maximal focus
 Supplementing the lecture with cases is a good way to reinforce memory.
- No need to force individuals to answer questions by passing microphones because it induces unnecessary stress which impair
- Gives us time to think of questions to ask lecturer if we view the video beforehand
- I like how it involves peer interaction and increases interaction between students and teachers. I also retain more of the facture as the flipped classroom session left a deep impression of the concepts on me.
- Provides a chance for students to review the pit falls of our understanding.
- Case discussion with immediate feedback

- Real life cases were more clinically relevant for us and it was usefu to learn about investigations and management that might not be mentioned in lectures
- Questions can provoke thinking
- Found that even after lectures at home still unable to answer some questions but the discussion process in cases helps to do so
- More relaxed way to learn and interact
- Motivates me to prepare for the lecture beforehend, enjoyed the interaction and active thinking process in case discussion
- By having mcqs and no pressure even if the answer is not correct also very good and allows us to think and answer more freely



The teacher

- Thinking about the teaching approach and how to design the flipped classroom
- Learned how to use new software to record
 lecturer
- · Developed quizzes for students

Possible downsides

- Maybe a reference for the colour code of the MCQ answer cards so that those who are not holding the cards know what answers are being given
- Electronic voting system should be explored so that each individual can participate
- Heavy workload for students, despite interesting
- It is a cultural problem that this kind of interactive session does not have optimal participation – treat the Chinese

Future studies

- · Pre and Post
- · Two modality comparison