Flipping the Nursing Classroom without flipping out the students

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Disclosures

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Background of Flipping the Classroom

- Touted as a method of ↑ student participation and improving learning outcomes (Bergmann & Sams, 2012).
- Best educational practices support moving away from content driven methodology to engaging students to “learn how to learn” (Billings & Halstead, 2012).
- Reinforces active learning, self-directed inquiry, student-center instruction, and constructivist learning theory (McDonald & Smith, 2013).
- Nurse educators are challenged to initiate innovative teaching/learning practices to create “radical transformation” in nursing education (Benner, Sutphen, Leonard, & Day, 2010).
Methodology

- Narrated PP – assigned before class time along with reading
  - Can also videotape one semester, upload the next
- Class time starts with PP questions (bring it up on screen)
- Questions → Mini lectures
- Case studies – small and large group discussions
- Active learning strategies – e.g. group work and presentations
- NCLEX style tests – 4 tests per semester, 50 questions per test, 110 minutes for each test.
- Test blueprint was held constant throughout
Results

- Student test scores before (n= 46) and after flipping the classroom (n=169)

- Statistically significant average increase of 8.04 points after the change in instruction (t -6.076, p < .0001)

- One way ANOVA: statistically significant F (15.852,  p = < .0001).

- Post hoc tests revealed that, as hypothesized, there was a statistically significant difference in the mean test scores of students in the traditional classroom (M= 69.89) and the first semester of the flipped classroom (M= 76.58) and the second semester of the flipped classroom (80.86).
How NOT to flip out the students 😊

- Start slowly*
- Tell them why
  - Increased retention
  - Active learning
  - Better test scores**
- Continuity among faculty/faculty development
- May want to avoid terminology “flipped classroom” → negative connotation?
- ACTIVE LEARNING 😊😊 STUDENT CENTERED LEARNING 😊😊

*My experience

**Note: It is not fair to test our students at the analysis level when our teaching is at the knowledge level
How NOT to flip out the students😊

- Put PP up at start of class and give students chance to ask questions.
- Remember importance of mini lectures –
  - student directed topics
  - topics YOU know are difficult to grasp (e.g. left vs. right sided heart failure)
- Refer to PP when you are using your other instructional techniques, e.g. case studies (“You will find that here in your PP.”)
- Active learning - Mix it up: case studies, role play illnesses, group work, NCLEX questions, e-learning, etc. (e.g. Med categories – group work, carousel/gallery walk)

***** FOSTER ENGAGEMENT *****


