Original Article

Effects of Flipped Classroom Approach on Health Assessment Knowledge and Skills Among Undergraduate Nursing **Students**

Flipped Classroom Approach on Health Assessment Knowledge and **Skills**

Amna Rafique, Hajra Sarwer and Afsar Ali

ABSTRACT

Objective: To evaluate the effects of flipped classroom approach on Health Assessment knowledge and skills among undergraduate nursing students.

Study Design: Non Randomize Control Trail (NRCT) study

Place and Duration of Study: This study was conducted at the Department of Nursing, University of Lahore from 21st July 2022 to 21st December 2022.

Materials and Methods: Data was collected from nursing students of Allama Iqbal nursing College Lahore. The participants were divided into two groups of experimental and control group. Data was collected using adopted questionnaire before initial approval of university and concern nursing college.

Results: A significant (P=0.003), (P=0.000) differences among the pre and post mean knowledge and health assessment practices scores were assessed in the experimental group and control groups.

Conclusion: This study found that flipped learning improved nursing students' knowledge and health assessment skills.

Key Words: Flipped learning, flipped classroom approach, Health Assessment knowledge and skills, undergraduate nursing students

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INTRODUCTION

The concept of nursing education is fairly broad. Students learn how to apply what they have studied about nursing theory to a clinical context during their nursing program¹. In order to properly apply theoretically acquired knowledge in a practical situation, learners must exercise skills like critical thinking and clinical reasoning². Also, it is advised that educators consider the possibilities of implementing creative teaching strategies that emphasize engaging pupils in the learning process³.

Modern teaching methods like flipped learning have also been introduced to nursing students through nursing education. Flipped learning fosters a learnercentered learning environment that helps nursing students build high-order thinking skills⁴. Redesigning their courses to line with student-centered learning is a step that nursing institutions are taking.

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Integrated learning has been incorporated into this program⁵.

Flipped learning, a relatively recent educational innovation, to increase the effectiveness of instruction, the flipped classroom concept has been used in higher education settings⁶. Because it allowed teachers to adapt their lessons to the unique needs of each individual student, researchers came to the conclusion that this way of teaching was effective⁷.

Also, the flipped learning participant read the material aloud as homework at home. They arrive at class with a thorough comprehension of the subject, and under the teacher's guidance, they engage in extensive discussion of the subject⁸. Nonetheless, a number of cutting-edge teaching techniques have been tried to solve these challenges, such as problem-based learning with flipped learning and action learning with simulation education⁹. The flipped classroom method encourages students to participate in more active learning by having them preread the teacher-provided video content and visualize what they will see in the video¹⁰. Compared to other forms of traditional learning, the experimental group of BSN nursing students reported high levels of course satisfaction with flipped learning¹¹. The primary objective of the flipped classroom is to use class time to help students grasp the material. By flipping the typical lecture-based method, this approach improves student learning and achievement¹².

MATERIALS AND METHODS

This was a Non Randomize Control Trail (NRCT) study design. Students from the second professional of the general BSc.N. program at Allama Iqbal Medical College in Lahore participated in this study. Following initial university approval, the study was finished in nine months. The study's sample size was 100 second-year nursing students in total. The study's subjects were chosen through the use of purposeful sampling. Students from Section A received instruction using a flipped classroom model, whereas Section B students received instruction using a traditional model.

Data was collected using an adopted and validated checklist (CVI=0.89) and questionnaire (CVI=0.76). A pilot study was carried out on10% of the sample size. The Cronbach's Alpha of the practice tool was 0.702 and knowledge was 0.787. The students were divided into two groups i.e. experimental (n=50) and control (n=50). The intervention group received flipped classroom teaching, while the comparison group experienced traditional teaching. The study was approved from University of Lahore. Data were analyzed by using SPSS v. 26.

RESULTS

Socio-demographic profile: The majority (72%) of the participants were from the age group of 20 to 25 years, followed by more than 25 years (17%) and less than 20 years (11%). Overall, all the participant were reported that they used internet and the usage of internet is more than one hour per week. Similarly, all the participants were reported that they haven't used web based education (Table 1).

Effect of interventions (Knowledge):

Pre and post-interventional knowledge among experimental group: Pre-interventional knowledge among the nursing students regarding health assessment content was accessed before interventions and flipped interventions using Wilcoxon signed-rank test. Post-

interventional knowledge was again assessed. There was significant (P=0.004) difference among the pre and post mean knowledge score. The mean knowledge score from 11.90 was enhanced to 14.42 (Table 2).

Pre and post knowledge among control group: For comparison of the means Wilcoxon signed-rank test was applied. There was no significant (P=0.858) difference among the pre and post mean knowledge score (Table 3).

Table No.1: Socio-demographic profile of the participants, n=100

,	Frequency	Percent					
Age of the participants							
Less than 20 Years	11	11.0					
20 to 25 Years	72	72.0					
More than 25 Years	17	17.0					
Total	100	100.0					
Use of Internet by the participants							
No	0	0					
Yes	100	100.0					
Weekly internet usage by the participants							
Less than one hour	0	0					
More than one hour	100	100.0					
Web based education of the participants							
Yes	0	0					
No	100	100.0					

Effect of interventions (Health Assessment Practices):

Pre-post-interventional health assessment practices among experimental group: There was significant (P=0.000) difference among the pre and post mean health assessment practices score. Pre-interventional mean score of health assessment practices was 193 which enhanced to 231 after interventions (Table 4).

Pre-post health assessment practices among control group: There was no significant (P=0.842) mean difference among the pre and post mean health assessment practices score among the control group (Table 5).

Table No.2: Mean knowledge score difference among pre and post interventional experimental group, n=50.

	Des	scriptive Stat	istics		•			
	N	Mean	Std. Deviation		Minimum		Maximum	
Pre-Interventional Knowledge	50	11.90	4.501		5		18	
Post-Interventional Knowledge	50	14.42		4.161		7	20	
		Ranks						
			N	Mean	Rank	Su	m of Ranks	
Pre-Interventional Knowledge -	Negative Ranks		15 ^a		20.50		307.50	
Post-Interventional Knowledge	Positive Ranks		33 ^b	26.32		868.50		
	Ties		2°					
	Total		50					
		Test Statistic	es .					
Z							-2.881 ^b	
Asymp. Sig. (2-tailed)							.004	
a. Wilcoxon Signed Ranks Test								
b. Based on negative ranks.								

Table No.3: Mean knowledge score difference among pre and post control group, n=50.

Descriptive Statistics									
	N	Mean		Std. Deviation		Minimum		Maximum	
Pre-Interventional Knowledge	50	11.9	92		4.521		5	18	
Post-Interventional Knowledge	50	12.1	10		4.325		5	18	
Ranks									
				N	Mean Rank		Su	Sum of Ranks	
Pre-Interventional Knowledge -	Negative Ranks			25ª	23.78		594.50		
Post-Interventional Knowledge	Positive Ranks			24 ^b	26.27		630.50		
	Ties			1 ^c					
	Total			50					
	Test Statistics								
Z								179 ^b	
Asymp. Sig. (2-tailed)				.858					
a. Wilcoxon Signed Ranks Test									
b. Based on negative ranks.	<u> </u>								

Table No.4: Mean health assessment practices score difference among pre and post interventional experimental group, n=50.

	Desci	riptive St	atisti	ics					
	N	Mean		Std.	. D	Minim	num	Maximum	
Pre-Experimental health assessment practices	50	181	.24		8.587		160	193	
Post-Experimental health assessment practices	50	225	5.94		2.896		220	231	
Ranks									
				N	Mean	Rank	Su	m of Ranks	
Pre-Experimental health assessment	Negative Ranks			O ^a	.00		.00		
practices - Post-Experimental health	Positive Ranks			50 ^b	25.50		1275.00		
assessment practices	Ties			0^{c}					
	Total			50					
	T	est Statis	tics						
Z								-6.162 ^b	
Asymp. Sig. (2-tailed)								.000	
a. Wilcoxon Signed Ranks Test	•							·	
b. Based on negative ranks.								·	

Table No.5: Mean health assessment practices score difference among pre and post control group, n=50.

Table No.5: Wear nearth assessing	-	scriptive S			re una pe	ost contro	n grot	ар, п–го.	
	N Mean		-	Std. Deviation		Minimum		Maximum	
Pre-Experimental health assessment practices	50	181	.24		8.587		160	193	
Post-Experimental health assessment practices	50	182.98		15.938		160		229	
Ranks									
				N	Mean Rank		Sum of Ranks		
Pre-Experimental health	Negative Ranks			23ª	21.28		489.50		
assessment practices - Post-	Positive Ranks			20 ^b	20 ^b 22.			456.50	
Experimental health assessment	Ties			7°					
practices	Total			50					
		Test Stat	istics						
Z								199 ^b	
Asymp. Sig. (2-tailed)								.842	
a. Wilcoxon Signed Ranks Test									
b. Based on positive ranks.									

DISCUSSION

In this study, those individuals who took part in the study and were assigned to the intervention group will demonstrate higher levels of skill. The difference between the intervention group and the control group was statistically significant, despite the fact that the intervention group had higher scores.

This result is consistent with the findings of Mekler et al. and Sailer and Sailer, who found that the flipped interventions have a significant effect on the students' knowledge and practices of health assessment. Sailer and Sailer reported that the students' knowledge and practices of health assessment improved as a result of the flipped interventions ¹³. Both of the studies revealed that the flipped interventions had a substantial influence on the nursing students' practices about the health assessment.

However, these findings were corroborated by another similar study that was conducted out by Lai et al., who revealed a significant improvement in practical skill ratings in students of the study group, and this may be because group teaching occurred face to face. The study was carried out by Lai et al (lectures and hands on training). In addition, flipped activities were carried out in the classroom, and the researcher made use of flipped components in conjunction with three different gamebased learning methodologies while the class was in session¹⁴.

In addition, flipped activities were carried out in the classroom, and the researcher made use of flipped features in conjunction with traditional teaching methods while the class was in session. Another study by Kim and Kim found that flipped learning improved students' skills¹⁵. This may be due to the fact that flipped learning was used both inside and outside of the classroom, and the researcher combined flipped learning with other teaching methods, including situation-based learning.

According to the findings of this research, flipped classroom interventions have a significant beneficial impact on the students' overall knowledge and skills. These findings were supported by a study carried out by Zainuddin's which emphasis on the interventions for improvement of the understanding of students regarding many nursing Furthermore, the study also indicated that the students had positive perceptions of their own levels of competence, autonomy, and relatedness; greater performance; and the ability to attain good achievement during the examinations. According to the findings of the study, the environment of the flip-class encouraged higher levels of motivation and involvement. In particular, students were encouraged to compete and win against other students while participating in the flipped activities by collecting as many points and badges as they could¹⁶.

Also, our findings are consistent with those of ^{17,18} who showed a significant improvement in the knowledge level of the flipped group related practical skills. They found that the flipped group had been exposed the students in a manner where they work on the students intellectual and practical skill and help in the smooth transfer of information. In contrast, different studies provided different findings in contrast with this study and found that students in the interactive lecture group had better knowledge than those in the game group. This finding was interpreted flipped interventions of teaching and skills, the students are exposed to a variety of distractions, whereas students in the lecture group were required to concentrate on the facts²⁰.

Following the flipped interventions, individuals in the experimental group showed a substantial increase in their knowledge and practices regarding the health assessment in comparison to those in the control group. This finding is consistent with the findings of Inangil et al²⁰, who found that the nursing students in the experimental group had considerably higher scores on the knowledge and practices test than those in the control group.

CONCLUSION

According to the findings of this study, nursing students who were taught using a flipped instructional model had improved knowledge, practices, and skills in the area of health assessment. In addition, flipped interventions boost students' confidence and drive, and they allow them to be better prepared for clinical classes than those who learn through traditional methods. The flipped elements in this study helped promote the students' understanding of health assessment techniques and fostered a good competitive environment. This was accomplished by flipping some of the study's elements. It is possible to see flipped learning as an effective teaching strategy for the purpose of presenting learning materials to nursing students in order to improve the students' knowledge and skills competence.

Author's Contribution:

Concept & Design of Study: Amna Rafique Drafting: Hajra Sarwer,

Afsar Ali

Data Analysis: Afsar Ali Revisiting Critically: Amna Rafique,

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Final Approval of version: Amna Rafique

Conflict of Interest: The study has no conflict of interest to declare by any author.

REFERENCES

1. Ganesh VN. A quantitative investigation of student performance in a peer assisted flipped classroom

- model. J Eng Educ Transform 2021;34:186-90.
- 2. Kato M, Nihei Green F, Hotta K, Tsukamoto T, Kurita Y, Kubo A, et al. The efficacy of stretching exercises on arterial stiffness in middle-aged and older adults: a meta-analysis of randomized and non-randomized controlled trials. Int J Environ Res Public Health 2020;17(16):5643.
- 3. Turan N, Özsaban A, Aydın GÖ, Türkoğlu M, Kaya H, Acaroğlu R. Reliability and validity of the Turkish version of the Barriers to Nurses' Use of Physical Assessment scale. Int J Nurs Pract 2022;28(1):e12935.
- 4. Lee H, Jang SJ. Effects of flipped-learning-based simulation for nursing students: a retrospective survey. Int J Ment Health Nurs 2021;30(5): 1263–73.
- 5. Youhasan P, Chen Y, Lyndon M, Henning MA. Exploring the pedagogical design features of the flipped classroom in undergraduate nursing education: a systematic review. BMC Nurs 2021; 20(1):1–13.
- 6. Al-Samarraie H, Shamsuddin A, Alzahrani AI. A flipped classroom model in higher education: a review of the evidence across disciplines. Educ Technol Res Dev 2020;68(3):1017–51.
- 7. Namaziandost E, Çakmak F. An account of EFL learners' self-efficacy and gender in the Flipped Classroom Model. Educ Inf Technol 2020;25(5): 4041–55.
- 8. Li BZ, Cao NW, Ren CX, Chu XJ, Zhou HY, Guo B. Flipped classroom improves nursing students' theoretical learning in China: a meta-analysis. PLoS One 2020;15(8):e0237926.
- Kim H, Kang HJ, Jee Y. The Effects of Flipped Learning on the Self-Directed Learning Ability and Class Participation of the Nursing Students. Nveo-Natural Volatiles Essent OILS J| NVEO 2021; 929–40.
- 10. Zhu L, Lian Z, Engström M. Use of a flipped classroom in ophthalmology courses for nursing, dental and medical students: A quasi-experimental study using a mixed-methods approach. Nurse Educ Today 2020;85:104262.
- 11. Fan JY, Tseng YJ, Chao LF, Chen SL, Jane SW.

- Learning outcomes of a flipped classroom teaching approach in an adult-health nursing course: a quasi-experimental study. BMC Med Educ 2020;20(1): 1–11.
- 12. Joseph MA, Roach EJ, Natarajan J, Karkada S, Cayaban ARR. Flipped classroom improves Omani nursing students performance and satisfaction in anatomy and physiology. BMC Nurs 2021; 20(1):1–10.
- 13. Sailer M, Sailer M. Gamification of in-class activities in flipped classroom lectures. Br J Educ Technol 2021;52(1):75–90.
- 14. Lai AKH, Noor Azhar AM bin, Bustam A binti, Tiong XT, Chan HC, Ahmad R bin, et al. A comparison between the effectiveness of a gamified approach with the conventional approach in point-of-care ultrasonographic training. BMC Med Educ 2020;20:1–11.
- 15. Kim H, Kim B. Effects of Situation-Based Flipped Learning and Gamification as Combined Methodologies in Psychiatric Nursing Education: A Quasi-Experimental Study. In: Healthcare. MDPI; 2022. p. 644.
- 16. Zainuddin Z. Students' learning performance and perceived motivation in gamified flipped-class instruction. Comput Educ [Internet]. 2018;126:75–88. Available from: https://www.sciencedirect.com/science/article/pii/S0360131518301787
- 17. Låg T, Sæle RG. Does the flipped classroom improve student learning and satisfaction? A systematic review and meta-analysis. AERA open 2020;5(3):2332858419870489.
- 18. Yildirim I. The effects of gamification-based teaching practices on student achievement and students' attitudes toward lessons. Internet High Educ 2022;33:86–92.
- 19. Selby G, Walker V, Diwakar V. A comparison of teaching methods: interactive lecture versus game playing. Med Teach 2021;29(9–10):972–4.
- 20. Inangil D, Dincer B, Kabuk A. Effectiveness of the Use of Animation and Gamification in Online Distance Education During Pandemic. Comput Informatics Nurs 2022;40(5):335.