

Patient Involvement in Medical Education: Pilot Findings From Primary Care

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Medical education has witnessed the adoption of several teaching strategies over the years. There has been a shift from didactic teaching to more active methods. Currently, the flipped classroom is being implemented as a technology-enhanced teaching intervention. Here, learners are gifted with preparatory material prior to a class session through video or audio form, with class time spent problem-solving, allowing for peer-to-peer/instructor interaction and real-time feedback (1). Studies report the potential benefits and drawbacks of such an intervention, yet there is no current study focusing on patient perception of this platform. As educators, it is important to incorporate patient involvement in educational strategies in order to assess whether an intervention will translate into effective patient care.

In view of this, 11 patients in a primary care setting were invited to take part in a study focused on perception of the flipped classroom. They were first given a didactic lecture on the flipped classroom and then shown a video of the intervention. They were then asked to rate their perception of this approach on an array of statements via the strongly disagree (1) to strongly agree (5) Likert-type scale. Later, they were invited to take part in a focus group. Eight agreed to do so.

Quantitative analysis demonstrated above neutral scores (3.82-4.27) for the following areas: helping students better understand key concepts/issues, helping students feel more prepared, enhanced peer-to-peer/teacher interaction, active

problem-solving, enhanced motivation, inspiration, learning outcomes gain, greater effectiveness than traditional lectures, and a preference for future classes to be delivered in this way.

Qualitative analysis demonstrated positive aspects allied to enhanced problem-solving, increased motivation, and allowing the learner to revisit and work through the pre-session material at their own pace. Drawbacks included the possibility of learners choosing not to prepare before the session, the added work load, and ensuring the preparatory material is kept up-to-date by the instructor.

As far as I am aware, this is the first study assessing patient perception of the flipped classroom in a medical setting. Overall, patients drew positive conclusions about this approach, which should spark confidence in this methodology. As educators, we should ensure that patients are included in educational-based intervention, as the primary focus for medical training is providing safe and effective patient care.

Authors' Note

Ethical approval was sought and granted by Queen Mary University London, QMREC 1273.

Reference

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