

Introduction

In the year 2017, Bernadette de Lourdes School of Nursing Science (BLNS) has realized that the tacit knowledge of tobacco control integration that immersed in each instructor is considered as knowledge asset. Therefore, BLNS had been conduct KM café in the terms of tobacco control integration in clinical setting and tobacco control research initiative. There were sharing tacit knowledge among BLNS new faculty members and experienced instructors. After faculty member have sharing tacit knowledge through KM café, the BLNS model was drawn in diagram. In addition, AU KMS web broad will be used as a channel of sharing tacit knowledge of BLNS faculty members to public.

For sharing experience in practice, please contact Bernadette de Lourdes School of Nursing Science, Assumption University.



KM Cafe

Coffee shop 1: "บูรณาการ พร้อมพักตร์ ฟอ-แม่-ลูก"

Coffee shop 2: "บูรณาการใน การคูแลกระแสหลัก"

Coffee shop 3: "บูรฉาการใน โครงการร่วมสัมพันธ์ประชาชน"

 Coffee shop 4: "บูรณาการ

 เจาะลึกถึงถิ่น"

KM Asset

BLNS tacit knowledge of tobacco integration in the clinical setting

BLNS tacit knowledge of tobacco integration in research

BLNS tacit knowledge of tobacco integration in the clinical setting and research



AU Nursing Student Received Top Award for Venturing on "Smoke-Free Thai Society" Campaign

COFFEE SHOP 1:

"บูรณาการพร้อมพักตร์ พ่อ-แม่-ลูก"

The techniques or methods used to integrate tobacco control to the teaching and learning in the clinical setting which is focused on maternal and child nursing fields.

- 1. Explore the feeling
- 2. Using guilty feeling
- 3. Smoking cessation intention and attempt to stop smoking
- 4. Family aligns

COFFEE SHOP 2:

"บูรณาการในการดูแลกระแสหลัก"

The techniques or methods used to integrate tobacco control to the teaching and learning in the clinical setting which is focused on adult and psychiatric nursing fields.

- 1. Raise concern
 - Patient's condition
 - Health burdened
- 2. Motivational interview
 - Empowerment
 - Patient's goal
- 3. Indirect question
 - Contributing factors
 - Sharing experience ideas
- 4. Planed behavior-attitude
 - Intention
 - Belief
 - Self efficacy

COFFEE SHOP 3:

"บูรณาการในโครงการร่วมสัมพันธ์ ประชาชน"

The techniques or methods that assist nurse to integrating tobacco control to the project of community participation.

- 1. Explain the harmful effect of smoking
- 2. Use teaching aids such as VDO and media
- 3. Make people scare by showing the effects of smoke such as lung cancer and show statistics
- 4. Raise the concern and awareness to community level
- 5. Target to the leader of community and motivate leaders to be a good role model
- 6. Family concern and touch to people heart
- Share ideas or experiences from the one who can successfully stop smoking and provide smoking cessation group

COFFEE SHOP 4:

"บูรณาการเจาะลึกถึงถิ่น"

The techniques or methods that assist nurse to integrating tobacco control deep insight of Local community.

- 1. Key informant interview
 - Make relationship (assess and survey)
 - Frequently smoking
- 2. Ask client why does he use tobacco? (stress)
 - Use "5 A" technique to quit smoking
- 3. Knowledge to contribute to stop smoking
 - How long and health burden
- 4. Indicate the disease burden
- 5. Family alliance asking attitude family member to motivate smoker to quit
- 6. Positive reinforcement using empowerment and family goal

BLNS tacit knowledge of tobacco integration in the clinical setting

Technique/Method used 1. Explore the feeling 2. Using guilty feeling 3. Smoking cessation intention and attempt to stop smoking 4. Family aligns 5. Raise concern (Patient's condition & Health burdened) 6. Motivational interview (Empowerment & Patient's goal) 7. Indirect question (Contributing factors & Sharing experience 8. Planed behavior-attitude (Intention & Belief & Self efficacy) Key to success Obstacles Knowledge and skills Attitude of healthcare provider Power imbalance Less experience Strong intention to help people stop smoking Time managen No commitment Low self- confident The effective of communication Less support from local The update knowledge of tobacco control Lack of resources and materials Self-confidence Use interesting media and video Good relationships and trust

BLNS tacit knowledge of tobacco integration in research



BLNS-KM model of tobacco integration in clinical setting and research

