



**KM  
2020**



# Knowledge Management Plan

## Bernadette de Lourdes School of Nursing Science

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## **BLNS Knowledge Management (KM) Plan**

### **Background**

The BLNS has set the knowledge management system (KMS) in place since academic year 2012. The knowledge management activities including sharing and learning from each other become our organization culture. The knowledge management activity has been improved and changed over the period of time. The BLNS's tacit and explicit knowledge management process has been implemented, reviewed and evaluated to improve in the yearly basis and sharing to external organization, professional communities, general public and society via BLNS website. However, the BLNS knowledge management system has still congruent with the AU knowledge management policy. In academic year 2016, the BLNS has aimed to manage knowledge and move on the area of how to increase research publication and the methods to promote active learning habit and ability of students. Regarding research publication increasing, the BLNS has a research policy to facilitate all instructors to have at least one research per year. Therefore, effective collaborative research has been considered as a good strategy to increase research publication. The experienced researcher has been invited to share her experience with BLNS faculty members to inspire them for this initiative. All faculty members agree to establish collaborative research team and seek for funding.

### **Knowledge Management system and mechanism**

The BLNS has its system and mechanism for KM and run by Faculty Development (FD) Committee and Administrative Committee to assist the Dean in this mission. The KM strategic activities and plan have been developed and monitored. FD committee with the advisement of Administrative Committee develop knowledge management strategic plan including activities and budget to obtain approval from the Dean. FD committee is responsible to implement the KM project according to the strategic plan and ASAP in the timely fashion. The evaluation and comment will be reviewed in each process and activities. The meeting is set up to brainstorm for further improvement of KM project according to the evaluation results. The modified KM activities and budget will be proposed to the Dean for suggestion and approval. The PDCA cycle is ensured every year. The KM process will be continued until the knowledge asset is effectively managed and shared to the public.

## **Learning culture of BLNS**

BLNS has its learning culture that facilitates all faculty members to develop life-long learning attainable and habit. There are three levels of learning including individual, departmental and organizational levels. For individual learning level, BLNS has a mentoring system for the new instructor. The Dean will appoint a mentor to coach the new instructor individually. Mentor will guide, teach, and train the new instructor both in academic and extra curriculum activities. The BLNS's mentoring system is an evidence of tacit knowledge sharing by mentor to mentee. For departmental learning level, the instructor who was attending academic seminar or special training will propose the intention to share the new knowledge gained to their colleagues. The journal club will organize for knowledge and experience sharing among faculty members from different discipline and area of expertise. Conference on specific topic of interest will facilitate the sharing of explicit and tacit knowledge of team member in particular field such as adult nursing, pediatric nursing, midwifery, psychiatric nursing, community nursing and so on. For organizational learning level, BLNS has organize the internal training for all faculty members in various occasion such as preceptorship training for new instructor and stakeholder, and QA tutorial class for all faculty members. This training will assist faculty members to clarify how to apply the tacit and explicit of knowledge to their daily work.

## **Knowledge Management Process**

BLNS has its KM journey since October 9, 2012 with AU-KMS training and continued organizing BLNS's KM café /workshop annually. The process of knowledge management in the year of 2019 consists of:

### **1. Knowledge Identification**

1.1. Identify knowledge issues and gap of knowledge: The BLNS has identified significant issues as "Establishing Professionalism in Nursing"

### **1.2. Acquire faculty members' consensus:**

Knowledge identification of BLNS has been accepted by all faculty members in KM workshop according KM stations as follow:

- Station 1 (Case study 1): using VDO presentation regarding the response of a registered nurse towards Colonavirus-19 by shaving her hair

- Station 2 (Case study 2): using VDO presentation regarding registered nurse who separates from her little daughter to live in the hospital for taking care patients with Covid-19, giving her daughter an air hug.
- Station 3 (Case study 3): Tearful nurse complaint about no PPE during taking care Covid-19 patients in the hospital and decided to quit job.

## 2. Knowledge Acquisition

- 2.1. Set up meeting to identify problem and direction of knowledge management
- 2.2. Assess faculty member's strategy to teach students for establishing professionalism in nursing
- 2.3. Set up KM workshop for tacit knowledge sharing about teaching and learning for establishing professionalism in nursing from case study various situations through VDO presentation.
- 2.4. Set up sharing session about teaching techniques to develop professionalism in nursing for students.

## 3. Knowledge Development

- 3.1. Develop the BLNS's model of teaching and learning to promote professionalism in nursing development for the students.

## 4. Knowledge Warehouse

- 4.1. Design the channel for knowledge sharing in the area of teaching and learning
- 4.2. Monitor knowledge sharing throughout the interaction on web board
- 4.3. Evaluate and analyze all the comments for further KM improvement
- 4.4. Revise BLNS's model of teaching and learning to promote student development regarding the development of professionalism in nursing based on the synthesis of knowledge sharing information
- 4.5. Disseminate the revised BLNS's model of teaching and learning to students' development regarding professionalism in nursing through faculty meeting and BLNS's website

## 5. Knowledge Utilization

- 5.1. Integrate knowledge of KM system into teaching-learning activity
- 5.2. Evaluate the outcomes (impacts and satisfaction) of the knowledge utilization of stakeholders via online survey

5.3. In the academic year 2019, BLNS has realized that the tacit knowledge of teaching and learning to promote professionalism in nursing for the students that immersed in each instructor is considered as knowledge asset. Therefore, BLNS had been conducted the workshop for sharing teaching and learning activities to promote professionalism in nursing for the students. There were sharing tacit knowledge among BLNS new faculty members and experienced faculty members. After faculty members have sharing tacit knowledge through KM workshop, the BLNS model was drawn in diagram. In addition, AU KM's web board will be used as a channel of sharing tacit knowledge of BLNS faculty members to the public.

### **Summary report of KM workshop on the topic of “Establishing Professionalism in Nursing”**

In academic year 2019, the BLNS had proposed KM theme “Establishing Professionalism in Nursing”. The KM workshop was set up for discussing and sharing experiences. All participants were invited to join the group according to their working experiences (Mixed between junior and senior faculty members). There were three stations. After watching VDO presentation regarding case study 1,2 and 3, respectively, each group analyzed, discussed, shared experiences, and presented their methods used of teaching learning experiences for improving professionalism in nursing. There was tacit knowledge sharing during group working. The details were summarized as the following:

**Station 1 (Case study 1):** using VDO presentation regarding the response of a registered nurse towards Coronavirus-19 by shaving her hair

After watching the VDO, each group was analyzed, discussed, and reflected to the question “What do we learn from the VDO?”.

The attributes of professionalism are as follows:

- ❖ Devotion
- ❖ Compassionate
- ❖ Accountability/responsibility
- ❖ Positive attitude

- ❖ Good role model toward profession
- ❖ Teamwork
- ❖ Autonomy
- ❖ Patient empowerment
- ❖ Knowledge and standard of practice
- ❖ Leadership
- ❖ Innovative mind
- ❖ Balance between life and work

#### **How to teach students?**

- ❖ Show the VDO to students and encourage them to analyze and discuss regarding professional and ethical issues
- ❖ Give them to do self-reflection: give students to think about their experience during practicum sites
- ❖ Ask challenging questions about how they could develop professionalism
- ❖ Assign students to find VDO related to good role model toward nursing profession and present to the group
- ❖ Give positive reinforcement to inspire students to increase sense of mindfulness when providing care for patients in the practicum sites

**Station 2 (Case study 2):** using VDO presentation regarding registered nurse who separates from her little daughter to live in the hospital for taking care of patients with Covid-19, giving her daughter an air hug.

After watching the VDO, each group analyzed, discussed, and reflected to the question “What do we learn from the VDO?”.

The attributes of professionalism are as follows:

- ❖ Body of knowledge and standard of practice
- ❖ Self-governance
- ❖ Involvement in professional organization
- ❖ Professional Ethics
- ❖ Self-development
- ❖ Humble and gentle

- ❖ Value health equity in patient care

### **How to teach students?**

- ❖ Assign the homework: how to provide quality of nursing care for their patients in practicum sites and encourage them to share to the group during pre-post conferences
- ❖ Facilitate and support the students during clinical practice
- ❖ Encourage students to work as a team and respect team members
- ❖ Show the video or scenario, and encourage students to do self-reflection toward the situations
- ❖ Encourage the students to have sense of case responsibility and effectively make use of patient's information from the handover process of the charge nurse
- ❖ Encourage the students to use evidence based for case discussion and pre-post conferences
- ❖ Assign the students to work as a team in both theoretical and practical subjects and closely monitor to give guidance as necessary

**Station 3 (Case study 3):** Tearful nurse complaint no PPE during taking care Covid-19 patients in the hospitals and decided to quit job

After watching the VDO, each group analyzed, discussed, and reflected to the question “What do we learn from the VDO?”.

The attributes of professionalism are as follows:

- ❖ Responsibility
- ❖ Professional image
- ❖ Professional confidence
- ❖ Sense of mindfulness
- ❖ Autonomy



**How to teach students?**

- ❖ Use real situation the practicum field to discuss about the professionalism
- ❖ Assess student's attitude toward nursing profession during class lecture and practicum
- ❖ Encourage the students to respect team work by reporting the charge nurse in concerning issues associated with the patients
- ❖ Assign the students to find a case scenario and discuss about the issue of moral and professional integrity
- ❖ Assign the students to find a person that they impress on their sense of devotion to discuss and analyze the meaning of professionalism

## Summarization of the attributes of professionalism



### Station 1

- ♦ Devotion
- ♦ Compassionate
- ♦ Accountability and responsibility
- ♦ Positive attitude toward profession
- ♦ Good role model
- ♦ Autonomy
- ♦ Teamwork
- ♦ Patient empowerment
- ♦ Knowledge and standard of practice
- ♦ Leadership
- ♦ Innovative mind
- ♦ Balance between life and work

### Station 2

- ♦ Body of knowledge and standard of practice
- ♦ Self-governance
- ♦ Involvement in professional organization
- ♦ Professional ethics
- ♦ Self-development
- ♦ Humble and gentle
- ♦ Value health equity in patient care

### Station 3

- ♦ Responsibility
- ♦ Body image and professional image
- ♦ Professional confidence
- ♦ Autonomy
- ♦ Sense of mindfulness

## Summarization of the teaching strategies



## Teaching Exemplar

There is more information about how to teach students to process professionalism in nursing. The group members shared their experiences in teaching method as follows:

### 1. Teaching about responsibility

Absent ward without any permission is an example issue that an instructor A. presented. She said she always use the technique of *“Focus on cause and effects”*

An example she raised, she talked about a student who were assigned to take continuing care for a patient and she absented ward in another day of her duty. After she came back, the instructor discussed with her and pointed at the consequent effects of her manner. For example, if no one to give morning care and assist that patients for breakfast instead of her on her absent day. The patient might receive late of care or she need to wait for the other staffs to finish the other case before taking care of other. In the most severe case, the patient might pass away by this kind of irresponsibility manners.

Another instructor B, said she has ever used this the same strategies as instructor A. said but not really Work. Therefore, by her technique, she uses the technique of *“Mutual respect”* She shared an experience at ward that she assigned students to have lunch into 2 periods of time, one group was assigned to have lunch at 11.00 am. and another group assigned to have lunch at 12.00 am. Moreover, she also assigned buddy for each student between group in order to hand over the case before going to have lunch. Students were also recommended by instructor that they should hand over all information of their patients to their buddy in order to ensure the continuing care and prevent risks. However, there were some students always broke the rules. For example, she was in a group assigned to have lunch at 11.00 am. She need to come back before 12.00 am. and received the report about her patients and her buddy’s patient; however, she ignored and came back to ward very late for receiving hand over from her buddy. Her buddy also had to go for lunch quite late on that day and interpersonal conflict happened as a result. Therefore, in the post conference, this instructor raised this conflict issues for teaching students, especially who has mutual irresponsible manner. All students had chances to share their ideas to seek the causes and effects of this situation and refer to other situation relevant with mutual irresponsible manners. At the end, students learnt

together, and have agreement and commitment among them about serious keeping on mutual responsibilities and accountability to all their assignments and others.

Instructor C, shared that she used a technique of give a ***“challenging question and positive reinforcement”*** for teaching responsibility of students. She referred a situation in a clinical teaching at a ward. A senile patient with full dependent condition and was not belong to any students’ assignments. She needed to wait for her relative for feeding her lunch every day. This instructor gave a challenge question to a student how this patient to have lunch at the same time of other patients. As a results, that students spend time to feed that patient before going to having lunch. This technique was able to teach student to concern about the meaning of responsibility not only focusing on her job assignments but for all patients as well. At the end, the instructor encouraged this student to reflect his feeling on this situation and providing admiration on his good manner.

Instructor D, shared her experience that one student from China did not show up in online class and did not participate in discussion. She received his email and mentioned that he wants to drop from the subject. So, she replied his email and gave him a chance to submit all assignments that he missed as well as convince him to participate in discussion for the next session. Since them, he attended extra class lecture that instructor A organized for him. Moreover, he submitted all assignments as requirement of this course. This indicates that we can help the students to improve their responsibility by encouraging and ***“giving them a chance”***.

## **2. Teaching about body image and professional image**

Instructor A uses a technique of ***“reflective thinking”***. She referred to a student who always had careless manners, for example, she wore underwear under white shirt of student’s uniform. Instructor gave her warning but she resisted the instructors and thought that all suggestions are from instructor’s bias. One day at ward, she blew a noses and sneeze at the bedside of a sick child and in front of parents. Then, the child’s parents refused her to take care her baby. The instructor discussed with her in this issues seriously. Let’s het to reflect her thinking of the effect of careless in professional look and manners. Then, she learnt and enlighten and changed her behavior.

In this issue, and the technique of reflective thinking also used by another instructor B.

She said some students were not aware in their image; always wear wrinkle uniforms without ironing, wore dirty shoes with unkempt hair, and poor hygiene. The instructor lets them to think about the personal look between a nurse who has good looking from head to toes and another nurse who is careless on her persona looks. If she stands in front of the patients. which nurse that they think the patient is more preferred.

### **3. Increasing the professional confidence of students**

Instructor A uses the technique of *“good role model”*.

She stated that some students were afraid and no confidence to approach and provide bedside nursing care for students. Instructor always uses a technique of demonstration in the real situation for students and let students to observe. Then, instructor will encourage students to do with close supervision of instructor. After that, the instructor will spend time to give her feedback for improvement.

Instructor B adds in this issue that she also uses this technique to teach students for initially approach to people in a community during practicum. She demonstrates students to observe her actions at the beginning of work and then encourages students to practice by instructor's close supervision.

Instructor C, shared her experience that during supervised nursing students in the hospital, one student came to her and said Ajarn, I didn't like pee nurse because she talked to patients with impolite words, very rude behavior. Then, she brought this issue to the group for discussion during the conference regarding professional image, ethics, compassionate of care, and communication/interaction with patients. After discussion, she summarized and advised them to learn from nurses those who presented good role model in nursing profession. Similar to instructor D, she mentioned that we should show student as a good role model. For example, during practicum, one student came to her and asked the permission to go for lunch. She said to student that you can go if you want but Ajarn and your friends will continue to provide procedure to complete nursing care for the patient. After that, this student changed her mind and waiting for Ajarn and friends to go for lunch together.

Other technique used to increase professional confidence is *“reviewing knowledge for improving practice”*.

Instructor E said that she always brings students to review and practices all procedures required to implement at ward in the nursing laboratory for gaining their confidence and ensuring the standard in practice of the students. Similar to another instructor, she referred to her experience to assist a student who is afraid to take care a HIV patient. She said she assigned students to review all knowledge relevant with HIV infection management and come to discuss with her until students enlighten. After that, instructor will initially demonstrate to her in the real practice for a HIV patient. Then, encourages students to practice by instructor's close supervision.

Another technique used is *“support with no pressure”*.

Instructor F, shared her experience that she would give agreement with students if the first attempt for doing procedure fail, she will be allowed to take the second attempts but not the third. The instructor will take in charge in the third attempts. Then, let's students focusing on thinking the steps of procedures, step by step, on her practice in order to reduce her anxious feeling.

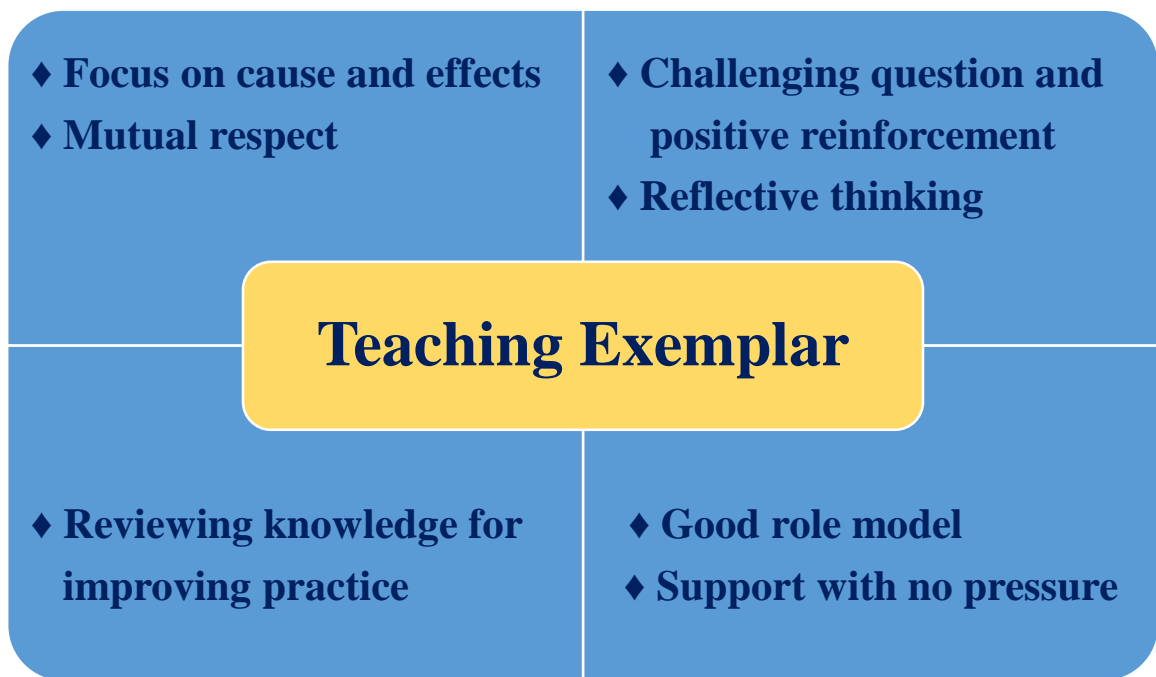
#### **4. Increase sense of mindfulness of others**

The common issues on the day of practicum is shared vans and transportation of students to practice in the hospital. At the end of practicum day, some students always blamed at students who arrived at vans lately due to the continuous and busy functions and delayed hand over period which were beyond their control. This bring about the conflict among them. Therefore, instructor A called for their meeting in order to solve this problem by providing the chance for students to share ideas and identify the functions and responsibilities of nurses and the nature of works at ward. Then, let them to think how benefits of all these functions and how possible to leave the function or leave the patients between the times and what the consequence effects if we leave the ward or the patients before complete working. Then, let's them learn to care about patients and care about others at the same time when they work.

#### **5. Teaching about devotion/ empowerment patients**

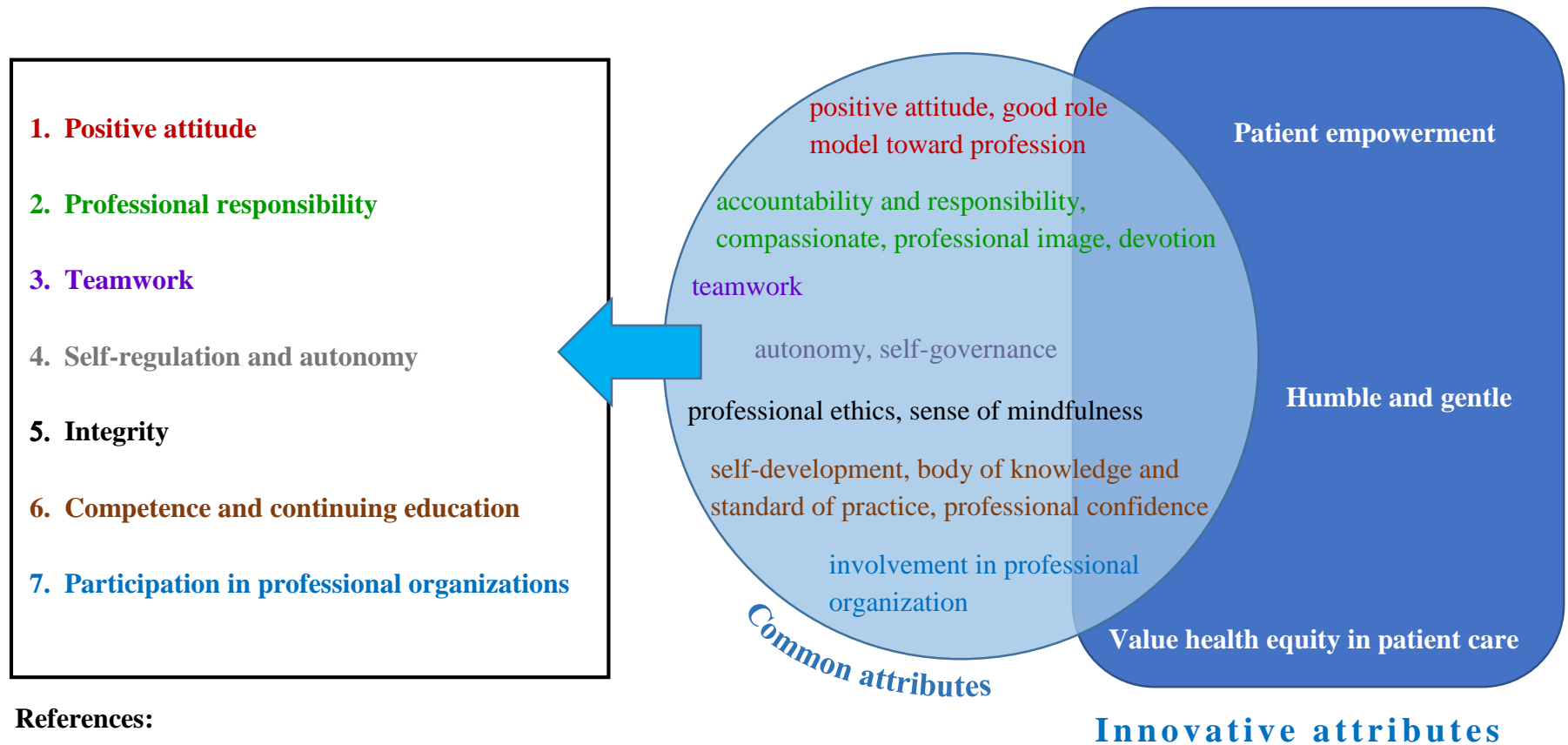
Instructor A, shared her experience that she supervised fourth year nursing students to perform nursing procedures for comprehensive subject. Students told that they lacked self-confident to do nursing procedures. Then, she shared to her students that in her country lack of

registered nurse. One neighbor had labor pain and going to give birth at home but no one knows how to do. At that time, she was a second year nursing student and went back to her home town for visiting her family during school break. So, one neighbor came to her house and asked her to go for conducting delivery. Therefore, she went to assist for delivery even though she had never been to do this procedure before. After she shared her experience, the students seem to have more active to practice the procedures. Since then until the end of the semester, all students seemed to increase self-confident to do all nursing procedures.





## BLNS tacit knowledge for Establishing Professionalism in Nursing



### References:

1. [https://rnao.ca/sites/rnaoca/files/Professionalism\\_in\\_Nursing.pdf](https://rnao.ca/sites/rnaoca/files/Professionalism_in_Nursing.pdf)
2. <https://www.nursco.com/professionalism-nursing-5-tips-nurses/>

## **Conclusion:**

After discussion for teaching-learning methods from each group, the results show that the attributes for improving students' professionalism in nursing can be classified into two attributes namely common attribute and innovative attribute. The components of common attribute similar to the previous literature review are positive attitude, good role model toward profession, accountability and responsibility, compassionate, professional image, devotion, teamwork, autonomy, self-governance, professional ethics, sense of mindfulness, self-development, body of knowledge and standard of practice, professional confidence, and involvement in professional organization. For the innovative attribute, there are three attributes that are different from previous study namely patient empowerment, humble and gentle, and value health equity in patient care. This implies that the faculty members of the BLNS have tacit knowledge regarding professionalism in nursing and teaching strategies to establish and improve professionalism among students. This tacit knowledge will be shared to public via knowledge management system of Assumption University. Hopefully, the KM will be beneficial to other institution to apply for their teaching and learning aim to improve professionalism of their students.

# Appendix

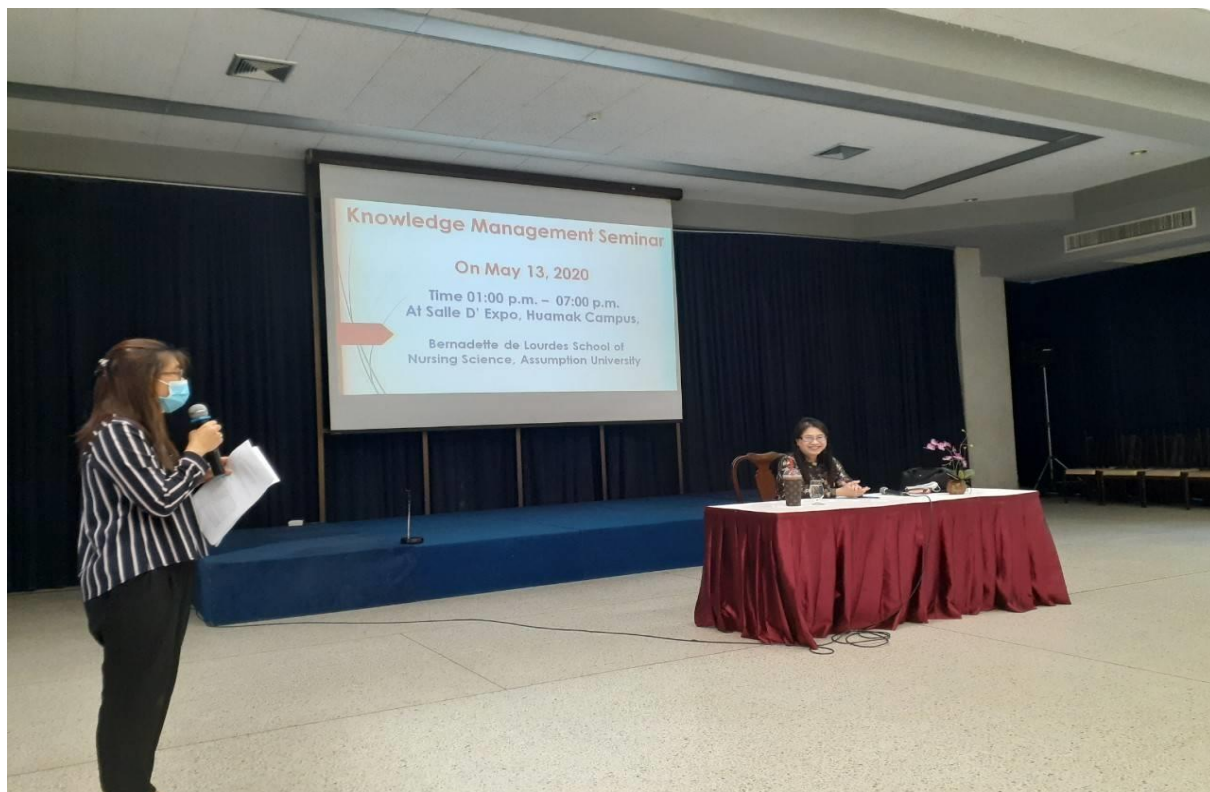
# Activities











**Bernadette de Lourdes School of Nursing Science, Assumption University**

**Knowledge Management Workshop Evaluation**

**May 13, 2020 At Salle D' Expo**

<b>Items for KM Workshop Satisfaction</b>	<b>Very high %</b>	<b>High %</b>	<b>Moderate %</b>	<b>Low %</b>	<b>Very low %</b>	<b>Mean</b>
1. KM Workshop is met your expectation.	88.23	11.76	0.00	0.00	0.00	4.88
2. Content knowledge of this seminar is interesting.	94.11	5.88	0.00	0.00	0.00	4.94
3. Workshop is well inspiration.	88.23	11.76	0.00	0.00	0.00	4.88
4. The knowledge sharing is useful.	88.23	11.76	0.00	0.00	0.00	4.88
5. Time period is suitable.	82.35	17.64	0.00	0.00	0.00	4.76
6. Venue arrangement is suitable.	94.11	5.88	0.00	0.00	0.00	4.94
7. Overall satisfaction throughout the workshop	82.35	17.64	0.00	0.00	0.00	4.82

Total 17 persons

**Suggestions/ Recommendations**

- Excellence / Good
- Good knowledge
- Increase the professionalism knowledge