Chapter 2
Utilization and Perceived Benefit for Diverse Users of Communities of Practice in a Healthcare Organization

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ABSTRACT
Communities of practice have been heralded as a powerful knowledge management tool, especially for geographically disparate workgroups. Research into knowledge management (KM) in healthcare organizations is a needed research focus, given that differences exist in knowledge and knowledge management processes between healthcare and other organization types. The research presented in this paper examines the effectiveness of communities of practice as a knowledge sharing tool in a large and geographically disparate healthcare organization. Findings suggest that job role affects community members’ perceptions of the benefit and impact of communities of practice as well as their participation in such communities.

INTRODUCTION
Rising healthcare costs, increasing demand, an increase in the practice of evidence-based medicine (EBM), and the flood of healthcare information now available through the Internet to both consumers and service providers are affecting both the utilization of information technology and the implementation of knowledge management (KM) processes (Walczak, 2003; Ward et al., 2006). Improved quality of care in the medical domain is an overriding strategic goal of most healthcare organizations (Sandars & Heller, 2006). Addition-
ally, KM is seen as a process to facilitate knowledge acquisition and knowledge distribution to achieve this goal (Sandars & Heller, 2006).

The traditional focus of KM in an organizational setting is primarily one of knowledge capture and encoding (Foy, 1999). However, the utilization of knowledge assets in healthcare typically requires a focus on knowledge acquisition or sharing and innovation through knowledge creation.

One knowledge management tool that may help to facilitate knowledge acquisition and distribution is the community of practice (Choi & Lee, 2003). A community of practice is defined as an organic and self-organized group of individuals who are dispersed geographically or organizationally but communicate regularly to discuss issues of mutual interest (Becerra-Fernandez, 2004). The utilization of communities of practice (CoPs) has been particularly advocated for knowledge sharing across distributed facilities, (Choi, 2006). CoPs are seen as key components of both organizational learning (Plaskoff, 2003) and knowledge management (Wenger, 2004).

Implementation of IT-enabled CoPs in healthcare settings has been proposed as a means to generate dynamic learning communities (Conner, 2005) and foster more robust and higher quality learning in health care settings (Choi, 2006). This paper will examine virtual/electronic and hybrid CoPs across a large national healthcare provider network to gather empirical evidence regarding the efficacy of CoPs for knowledge sharing and utilization within geographically distributed healthcare organizations. Virtual CoPs are CoPs that are conducted electronically, typically using a synchronous web-based interface for participants to meet simultaneously even though not collocated. Asynchronous discussion groups may also be employed to facilitate CoP interactions when simultaneous meetings are not feasible.

Three questions will form the core of the exploratory research design:

1) If CoPs are intentionally created within healthcare organizations, will healthcare workers utilize them as a knowledge resource?
2) Are CoPs perceived by healthcare workers to be effective in fostering knowledge sharing?
3) Are there differences in how CoPs are utilized that are dependent on healthcare job function?

In other words, will hospital and healthcare workers utilize CoPs and if they do are the CoPs effective at producing knowledge sharing within a large distributed health care organization. The last question examines the diverse nature of job roles within healthcare and asks if CoPs may be beneficial to all healthcare workers regardless of job function or does some aspect of the job role within healthcare make CoPs more useful to specific types of workers. If qualitative differences are identified, then this may signal future KM-oriented research to account for variations in utilization due to job function within organizations.

**LITERATURE REVIEW ON COPS AND KM IN HEALTHCARE**

CoPs were first formally defined as a business process and knowledge management methodology in the early 1990’s (Lave & Wenger, 1991), which indicates that knowledge and utilization of CoPs is close to two decades old. The actual practice of CoPs most likely preceded their formal definition (Nunamaker & Chen, 1990). Since CoPs have been around for a while (Lee & Valderrama, 2003), is there in fact a need to examine CoP usage in healthcare settings?

**The Need for CoPs in Healthcare**

Recent research (Ghosh & Scott, 2005) has indicated that significant differences exist between healthcare organization and other types of or-