Knowledge Management Process-Oriented Strategy for Healthcare Organizations

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ABSTRACT

This article explores Knowledge Management (KM) practices among doctors and nurses in Malaysia. A total of 59 interviews were conducted with doctors and nurses from two hospitals. The data analysis employed in vivo coding and process coding techniques. The findings suggest a process-oriented strategy for managing knowledge among doctors and nurses in a clinical work environment. The development of this strategy can help the healthcare workers and management to evaluate and further improve their current KM practices. Additionally, this article adds another KM strategy to the literature that is tailored to supporting healthcare organization. Future studies may want to replicate the proposed strategy in different settings such as other clinical or non-clinical departments within the hospital, other public or teaching hospitals or private hospitals.

KEYWORDS

Healthcare Knowledge Management, Knowledge Management, Knowledge Management Process, Knowledge Management Strategy

INTRODUCTION

Knowledge plays an important role in today’s organizations. It facilitates decision-making capabilities and builds a learning organization (Garvin, 2003). The collection, creation, and application of knowledge have become critical factors in achieving organizational competitiveness and increasing organizational performance (Asrar-ul-Haq & Anwar, 2016; Supyuenyong, & Swierczek, 2013). Consequently, Knowledge Management (KM) is crucial for organizations that wish to promote best practices, increase their chances of success, and create new business knowledge (Adams & Lamont, 2003; Chapman & Magnusson, 2006). KM refers to the practice of selectively applying knowledge from previous experiences of decision making to current and future decision-making activities with the express purpose of improving organizational effectiveness (Jennex, 2005).

Healthcare has embraced KM. Healthcare aims to enhance the overall quality of lives, meeting the health needs of target populations. This aim is achieved through clinical activities such as assessment, diagnosis, treatment, monitoring, and prognosis. These activities involve knowledge seeking and exchange among clinicians which assist in clinical decision-making. Nevertheless, KM does not yet exist as a full-fledged solution in many healthcare organizations. Few studies have explored knowledge management in the context of healthcare, especially in terms of the contributions

DOI: 10.4018/IJKM.2017100104

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of healthcare practitioners in developing systematic KM process in this sector (Abidi, 2001; Agarwal et al., 2011; Beveren, 2003).

This study was motivated by certain weaknesses in previous studies on KM in the healthcare setting. They often focus on a single step of the process such as knowledge acquisition, retention, or dissemination. Few studies have considered the entire KM process from start to finish (Wills et al., 2010). Therefore, these studies were unable to identify how each step affects the next step of the KM process and how it is affected by the previous one. Additionally, many previous studies separated analysis of the processes, people, and technologies employed in the management of knowledge in a healthcare setting (Bhatt, 2000). As a result, these studies missed many nuances that can affect the successful implementation of KM strategy in healthcare. Thus, there is a need to study processes, people, and technologies in tandem.

This study investigates how and when KM occurs in healthcare organizations and the activities required for handling knowledge among doctors and nurses. The study aims to determine the activities needed for managing knowledge and the steps of the KM process, as well as develop a KM process model for healthcare organizations as part of a strategy for implementing systematic KM in this sector.

This study will benefit both healthcare researchers and practitioners. For healthcare researchers, this study contributes to understanding of how knowledge is managed in the healthcare setting. For healthcare practitioners, the findings from this study will lead them to the most appropriate strategies for managing knowledge in the healthcare setting. Hopefully, this knowledge will enhance the success rate of KM implementation in healthcare.

The rest of this paper is structured as follows. The following section presents a review of the relevant literatures followed by methodology, findings, and discussion. The final section discusses study contributions and future research agenda.

LITERATURE REVIEW

KM Strategy as Part of KM Success Model

A KM strategy is an important construct in many KM Success models. KM Success model is useful in predicting success of the design and implementation of a KM initiative (Jennex, 2017). A KM strategy specifically focuses on identifying knowledge users, knowledge for capture and reuse, and process planning, formatting, and context of the knowledge to be stored (Jennex, 2012).

In 1998, Jennex et al. (1998) proposed a KM success model after an ethnographic case study of KM in an engineering organization. They did this by adopting the DeLone and McLean IS Success model (1992). They customized the dimensions to reflect the System Quality and Use constructs relevant in an Organizational Memory System (OMS). The model was then modified by Jennex and Olfman (2002) after conducted a longitudinal study in an engineering organization. Their model was also based on the DeLone and McLean (2003) revised IS Success model, and expands on the OMS Success model by including the Information Quality construct.

Another KM Success model was developed by Holsapple and Joshi (2001). This model reflects KM success is based on understanding a process-oriented KM strategy. Subsequent to this study, Massey, Montoya-Weiss and O’Driscoll (2002) develop a process-based KM Success model from their Nortel case study. Their finding suggests that KM cannot be applied generically and that a process approach to KM will assist organization on KM application to improve its performance.

Subsequent to this model, Jennex and Olfman (2006) proposed a model incorporating their experience to design a Knowledge Management System (KMS). Additionally, they incorporated other KM/KMS success factor research from the literature. The model consists of three dimensions: System Quality, Knowledge Quality, and Service Quality. Each dimension consists of three constructs. The KM strategy/process is one of the constructs of Knowledge Quality.
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