

Sample essay on problem statement

[Business](#), [Management](#)



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FINAL REPORT

Introduction

Knowledge Management/Intellectual Capital are very imperative sectors when it comes to giving an existing enterprise a competitive advantage over and above the rest. It is indeed an expanding field of research and practice that has been received appreciatively by both academicians and professionals of management. According to Malafsky (2003), practitioners often or always work in environments characterized by rapid changes in their work environment and information overload. It is these changes that increase the need for more knowledge so that sense can be found in “ large quantities of disparate information and data.” In many instances, and in line with the changes that are taking place in relation to knowledge management

and intellectual capital, academicians tend to concentrate their research on ways to improve the Knowledge Management practices while also utilizing the Intellectual Capital in a particular organization. Those enterprises that seriously and effectively utilize their knowledge and intellectual capital have found themselves in possession of abundant knowledge than they actually thought. As a Danish company, Systematic, puts it in a recent intellectual capital report, ' If only Systematic knew what Systematic knows' (www.systematic.dk), this reflects the great benefits that do arise from being in a position good enough to identify, source and utilize knowledge in such a manner as to extract the maximum value from it.

However, with this come newer challenges for management. As management theorists put it, the challenges arise in committing to the management of both intellectual capital, which is also crucial in any enterprise, and the management of knowledge currently on the agenda. A major challenge arising when it comes to Knowledge Management is scarce or no data, especially on data linking either nationally or internationally. There is therefore no cross-border analysis that can be carried out at whichever level. Additionally, no terminology common to every enterprise at all levels exists; this makes it even harder to effectively deal with the whole concept. Questions are continually being raised as to the credibility and practical relevance of traditional methods of creating knowledge that often appears in peer-reviewed journals and similar publications (Andriessen, 2004). In some instances, there have been claims that such publications are obsolete and mostly narrow in their recommendations and strategies on

improving Knowledge Management. On other occasions, problems on the publications being too difficult to read have also been cited.

Knowledge management is a crucial driver for the hospital staff, especially because this is a sector where information and data must be handled to the best of the holders' interests. Any lack of management, therefore, in such a setting or organization is so detrimental that not even the subordinates can let it happen. The sector is laden with so much information and data that there need to be an effective and efficient way to manage it, otherwise it will end up not doing what it was meant to. The hospital setting is also an area where faulty knowledge management practices easily creep in due to a large workforce who tends to create management barriers between the policy makers and the subordinate, affecting the whole organizational structure. It is in line with these problems arising that this study sought to identify and analyze the Knowledge Management System in a particular hospital in urban Kenya. This was mainly done on the knowledge circulation process between the hospital management and various departmental units and the subordinates in a process deemed to clearly outline the benefits of Knowledge Management as well as possible remedies that could be carried out to improve on the management of knowledge in or within the institution.

Study Objective

The purpose of this study is to investigate the benefits of using Knowledge Management System (KMS) in a hospital setting where data and information overload is always observed. The exact framework for research is designed for the Knowledge Management Systems and their applications in a

knowledge circulation process operating between the policy makers or the various departments of the hospital and the subordinates working under them.

Methodology

This study employed a range of techniques to obtain the benefits of Knowledge Management System implementation from the hospital employees. The techniques used were literature review, various former case studies done globally as well as questionnaires and surveys. Various designs of case studies were utilized in performing a systematic analysis of KMS and the perceived advantages in hospitals. On the other hand, detailed literature reviews were studied in order to come up with an enhanced analytic framework, especially in the knowledge circulation process in hospitals. Lastly, a survey was conducted in the hospital environment based on the two previous foundations of literature reviews and previous case studies done. This questionnaire was carried out in consultation with information elites to reduce the redundancy as well as the study's accuracy deviation. The questionnaire sought to seek the opinions of the hospital staff regarding the benefits they had realized after the Knowledge Management System was implemented.

The hospital is a referral facility with an inpatient bed capacity of 1800 and a workforce of 6000 staff, 4500 of which are subordinate staff. It is currently the only referral hospital in the country serving a population of over 40 million people. The hospital houses several government agencies as well as a medical school for a public university. The outpatient number amounts to over 10 million every year, resulting to a strain in the knowledge

management process. However, after the KMS was implemented, improvement in the management of KMS applications has been observed. The facility serves as a research, clinical teaching and referral hospital. It usually conducts medical research nationally and acts as a centre of excellence, thus assisting the other medical institutions in the country in their ultimate growth, medical programs and in the training of country healthcare personnel.

It is in this light that the institution decided to have a Knowledge Management System to focus on their core objectives of enabling the Knowledge Management applications run in every hospital department. Thus in 2011, the hospital management panel adopted the KMS applications tool.

Survey

A detailed questionnaire was issued out to the hospital staff in order to extract the benefits they thought had arisen from implementing the KMS applications tool. Basing the questionnaire on the KM model, data collection was achieved in two ways. Stage one involved getting to identify and understand Knowledge Management System characteristics in hospital environments as analyzed by Lee et al. (2005). This included the personnel ideas and views about the usability and ease of the system. Stage two was mainly focused on extracting the benefits of the system in the hospital. Questions included in the study were as specific to the environment of research as to reduce the inaccuracy rate in the results.

Application: the knowledge management activities of creating, accumulating, sharing, utilizing, and internalizing of the knowledge were employed and described as the KMS applications as Lee et al. put it (2005). Under every of

these applications, a five-point scale resembling the Likert was designed ranging from 1 (Extremely disagree) to 5 (Absolutely agree).

Accumulation of knowledge: under this application, the items employed were “ KMS is necessary in preserving expertise and knowledge for the tasks done”, “ The hospital utilizes KMS to provide summaries to all results and later stores them up for future reference of the staff” and “ The hospital is now in a position to administer knowledge systematically for every task and store them for future use”. Here, the staff was asked to provide a measurement for the benefits when they were using the Knowledge Management System in the hospital.

Sharing: One item was employed in this phase to bring out the benefit(s) of KMS in sharing of knowledge. This item was “ We as the staffs do share information that is necessary for the work we are committed to”.

Utilization phase: this was included in order to measure the advantages of KMS in the utilization of knowledge. Here, two items were again used. These were “ The hospital culture encourages us to share the knowledge we have” and “ Information and knowledge arising from the organization helps bring about teamwork”.

Internalization phase: According to the best average taken, two was a good number. So, the phase utilized two items namely; “ The hospital staff is given opportunities to access higher education in order to continually improve new tasks” and “ I often refer to the recommended best practices to apply them to my work”.

Creation of knowledge: the phase objective was to make inferences on the benefits of KMS in the creation of knowledge in the hospital. This item was, “

The knowledge created in KMS can be used in the performance of tasks without redundancy”.

Data collection: the questionnaire was administered in several major departmental units of the hospital in a randomized stratified manner. A sensitization campaign had been done by the management personnel and information consultants prior to the real survey. This was to make the respondents aware of such a survey and adequately prepare for it in matters regarding the KMS project in the hospital. 528 staff members agreed to undertake the survey from across all the major departments selected, namely: technology, administration, research and development and clinical department. Out of the 528 questionnaires administered, an impressive record of 520 questionnaires was successfully returned having been filled accordingly. It took 30 minutes on average to fill the forms for every respondent.

Results and Discussion

Demographics: from the valid responses obtained (520), 55. 76% (290) of them were female while 44. 23% (230) were male. The range of their ages is 53. 65% for the 35-44 years old, 22. 11% for the 45-54 years old, and 24. 23% for the 25-34 years old. 20. 57% work in the technology department, 39. 42% work in the research and development, 21. 15% of them works in the administration department and 18. 84% work in the clinical department. 49. 42% use the KMS more than 4 days in a typical week, 24. 42% use it three days in a week while 26. 15% use it less than three days a week. The results are as shown below:

Table1: Demographics of the hospital staff

Data Analysis

Basing findings on the five activities of Knowledge Management System (KMS), it can indeed aid in the improvement of the accumulation, sharing, utilization, internalization, and ultimate creation of knowledge. This can be done not only in the hospital environments, but also in cross-linking hospitals and different hospital environments. These are the actual results of KMS benefits as perceived by the staff respondents under the five major activities of the KMS application tool. Under the accumulation phase, 97. 20% of the staff respondents agree (including agree, moderately agree and extremely agree) that “ KMS is necessary in preserving expertise and knowledge for the tasks done”, 98. 8% agree (including agree, moderately agree and extremely agree) that “ The hospital utilizes KMS to provide summaries to all results and later stores them up for future reference of the staff” while 97. 9% of the respondents agree (including agree, moderately agree and extremely agree) that “ The hospital is now in a position to administer knowledge systematically for every task and store them for future use”.

In the sharing phase, 78. 35% of the respondents agree that “ We as the staffs do share information that is necessary for the work we are committed to”. In the utilization phase, 87. 9% of the respondents agree that “ The hospital culture encourages us to share the knowledge we have” and 85. 3% agree that “ Information and knowledge arising from the organization helps bring about teamwork”. In the internalization phase, 90. 55% of the respondents agree that “ The hospital staff is given opportunities to access higher education in order to continually improve new tasks” while 83. 7%

agree that “ I often refer to the recommended best practices to apply them to my work”. In the last phase of the study, the creation phase, 99. 3% agreed that “ The knowledge created in KMS can be used in the performance of tasks without redundancy.” No respondent completely disagreed in the study.

Discussion

These findings on the perceived benefits of the KMS applications indicate a 91% acceptance rate among the respondents, indicating that there was sustained positive attitude towards the system in the hospital. Of particular importance is the percentage of the respondents, 99. 3%, who said that “ The knowledge created in KMS can be used in the performance of tasks without redundancy”, 98. 8% saying that “ The hospital utilizes KMS to provide summaries to all results and later stores them up for future reference of the staff” and indeed the 97. 90% that said “ The hospital is now in a position to administer knowledge systematically for every task and store them for future use”. This shows the impact of the hospital management on the KMS within the hospital environment. The users have the confidence that by using the Knowledge Management System, they stood a better chance of doing their normal and routine tasks without worrying about redundancy rate. The study thus is in tandem with the findings when it states that the hospital has successfully implemented the Knowledge Management System, especially considering the fact that it serves the whole country in its quest for improved healthcare provision. The KMS has been used as a core ingredient in the creation of knowledge and its ultimate circulation in the hospital.

Conclusion

The findings in this report fully support the aim of creating and using KMS in hospital settings as found out earlier in the literature reviews and previously done case studies (Chen & Hwang, 2011). The applications can therefore be employed in similar environments and reproduce the same quality of service to the users in understanding the benefits of knowledge management strategies.

Knowledge Management Strategies

References

- Chen, Y., Liu, C. & Hwang, H. (2011). Key factors affecting healthcare professionals to adopt knowledge management: The case of infection control departments of Malaysiaese hospitals. *Expert Systems with Applications*, 38, 450-457.
- Lee, K. C., Lee, S. & Kang I. W. (2005). KMPI: measuring knowledge management performance. *Information & Management*, 42: 469-482.
- Von Krogh, G., Ichijo, K & Nonaka, I. (2000). *Enabling Knowledge Creation – How to Unlock the Mystery of Tacit Knowledge and Release the Power of Innovation*: Oxford University Press.