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# KM for Health Care: What's all This, Then?

Knowledge Management Across the  
Healthcare Spectrum

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# Genesis of My Thinking

- ∞ SLA meeting (1995): First discussion of KM
- ∞ Saw opportunities in applying the corporate constructs of knowledge management to health care
- ∞ Immediate connection with patient safety and the culture of sharing needed to support it
- ∞ Recognition of the connections between knowledge management, organizational learning and systems thinking.
- ∞ Interest in identifying **NEW** roles for librarians/info pros in frontline care environments.





# Shared Knowledge: Fuel for High Velocity

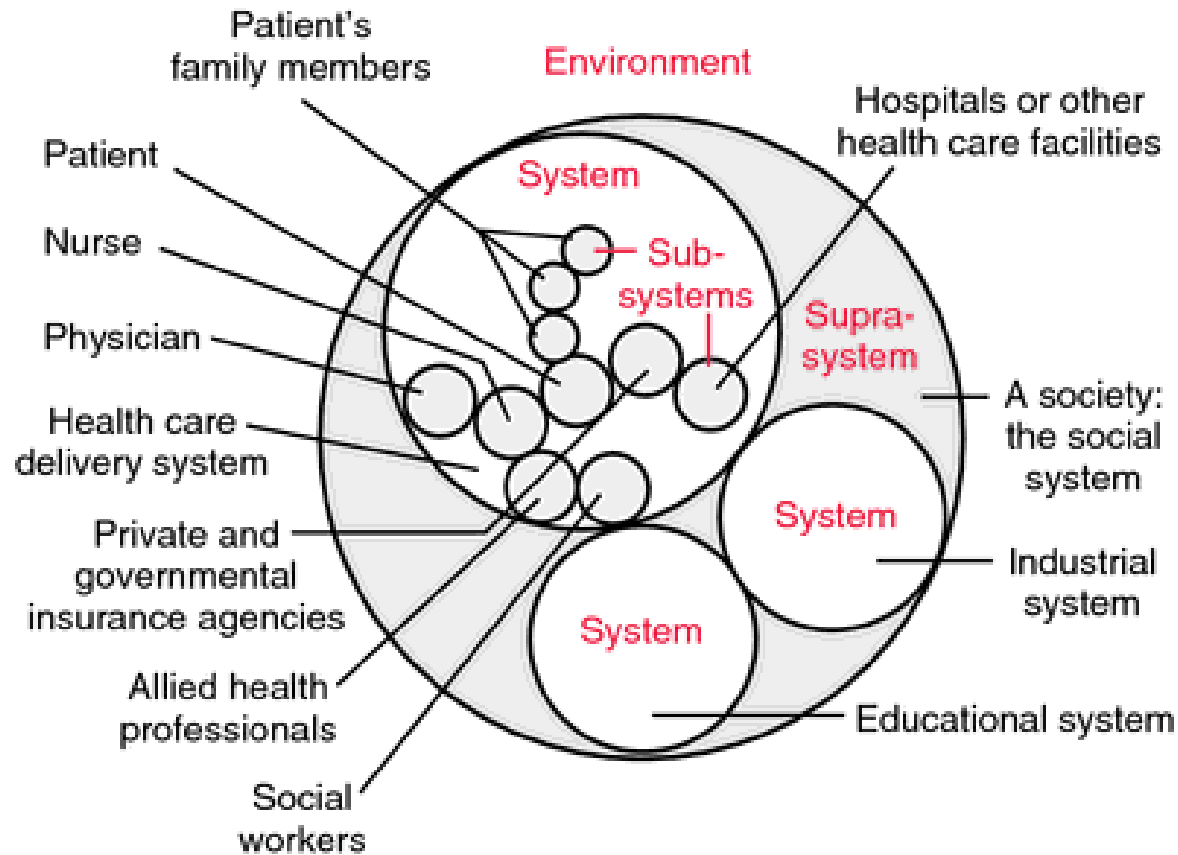
Organizations .... depend on their ability to accumulate useful knowledge more quickly than their competitors.

They need to see where:

- ⌘ Knowledge is needed
- ⌘ How to generate new knowledge
- ⌘ How to share that knowledge so the function of the individual is combined with the experience of others.



# Health Care System






Source: <http://medical-dictionary.thefreedictionary.com/health+care+system>



# KM and Health Care: Complex

- ☞ Hospitals/ ambulatory care present unique challenge
- ☞ Teams change constantly
- ☞ Very EI&K intense
- ☞ Primary goal is primal: save lives

SIMPLE	COMPLICATED	COMPLEX
<p><b><i>Following a Recipe</i></b></p> 	 <p><b><i>Sending a Rocket</i></b></p>	<p><b><i>Raising a Child</i></b></p> 
The recipe is essential	Rigid protocols or formulas are necessary	Protocols have a limited application
Recipes are tested to assure easy replication of success	Sending one rocket increases assurance of future success: key elements are identical	Raising one child provides experience but no assurance of future success
No particular expertise is required (cooking skills can improve the success rate)	High levels of expertise in a variety of fields are necessary for success	Expertise can contribute but is neither necessary nor sufficient to assure success
Recipes produce standardized, predictable results every time	Rockets are similar as there is a high degree of outcome predictability	Every child is a unique individual with unpredictable "outcomes"



Adapted from: Keith McCandless (2009) and Barbara Zimmerman (2006).  
 from: Zipperer. Knowledge Services. In: MLA Guide to Managing Health Sciences Libraries  
 2nd Ed. 2011.



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# Orientation Concepts

1. Knowledge management is an ill-defined yet important learning mechanism health care provider organizations should implement to support and inform their practice.
2. Knowledge management is more about culture than technology
3. Knowledge management is reliant on connections to enable effective sharing
4. Knowledge management is reliant on sustainable strategies, resources, collective accountability and leadership support to address barriers and succeed



- Data > Information > Knowledge > Understanding > Wisdom (Ackoff)
- Knowledge: “What the knower, knows.” (Davenport/Prusak)
- Knowledge morphs: it is both a thing and a flow (Snowden)
- Then the context for the terms also changes - creating confusion



# Orientation Concept #1/ term use varies

## Evidence/Information/Knowledge:

Evidence – data / studies / research / best practice

Information – communication, news media, television articles, reports, books, education, training

Knowledge: explicit, implicit, tacit

Wiki, blog, community of practice, community of interest, listserv; social media

Learning, training, teaching, education

Knowledge management, knowledge transfer, knowledge synthesis, knowledge translation, intellectual capital

Electronic medical record, electronic health record, health information technology, personal health record, computerized physician order entry, computerize practitioner order entry, decision support, medication administration record, protected health information

classification, taxonomy, ontology, vocabulary, (LinkedIn posting: Larry Bauder: April 13, 2012); key words, subject headings

From: Zipperer ed.  
Patient Safety:  
Perspectives on  
Evidence,  
Information and  
Knowledge  
Transfer  
(in development)  
[http://www.gowerpub  
lishing.com/isbn/978  
1409438571](http://www.gowerpub<br/>lishing.com/isbn/978<br/>1409438571)





## What is KM? Good question!

“Knowledge management (KM) is a process that enhances organizational performance by explicitly designing and implementing tools, processes, systems, structures and cultures to improve the creation, sharing and use of different kinds of knowledge (human, social and structural) that are critical to decision making.”

DeLong D,  
Fahey L.  
Diagnosing  
cultural  
barriers to  
knowledge  
management.  
Acad Manage  
Exec 2000;  
14:113-127.



# Orientation Concept #2/ culture & context

- ☞ Starting local to reflect how “things are done here” / “if you’ve seen one hospital, you’ve seen one hospital.” \*
- ☞ Trust & transparency
- ☞ Culture of sharing needs to be embedded in daily work

From: Zipperer ed.  
Frontline  
Interviewee for  
Knowledge  
Management in  
Medicine:  
(in development)  
<http://www.gowerpublishing.com/isbn/9781409438830>



# Orientation Concept #3/ its about connections

“**The future** is in connecting people and helping them find one another, rather than in capturing resources.” (Prusak)

- ⌘ Not about “stuff”
- ⌘ What we carry around in our heads
- ⌘ Building functionality around identifying and sharing what we, our colleagues and our organization “knows.”
- ⌘ Boundary spanning

Prusak. Info  
Outlook. Dec  
2009; pg 11



# Orientation Concept #3/ prisms for understanding

- ☞ Systems thinking
  - Peter Senge
- ☞ Learning organization
  - Willingness to learn from failure, share success
  - Value in everyone's contribution and knowledge

**Both concepts *central* to patient safety improvement – which serves as an interesting hook into this work from where ever you work in the larger health care space as it touches all of us!**



# Orientation Concept: #4

## sustainability is key // and hard!

- ☞ Strategies and resources need to be in it for the long haul // front line to C-suite
- ☞ Knowledge workers and leadership buy-in // belief in the power of the concept
- ☞ Contributions of all to empower all // accountability



# Orientation Concept #4:

## Barriers to KM

### ☞ Time

- Do you have the time to “halve” the time?  
(Collison Parcell, 2004)

### ☞ Hierarchy

- Can dissolve your resolve

### ☞ Lack of culture change orientation

### ☞ The romance of technology

- Dreaded “shared directory”// Let’s build a wiki!

### ☞ Org doesn’t nurture cross-discipline communication

### ☞ Doesn’t fit with “daily work”

### ☞ ROI difficult to calculate

### ☞ Lack of shared responsibility / personal commitment

from: Zipperer  
L. Knowledge  
Sharing in  
Hospitals.  
Chapter in:  
MLA Guide to  
Hospital Library  
Management  
2011.





# What is the Opportunity for Info Pros?

- ∞ Enables organizational engagement
- ∞ Facilitates Strategic impact
- ∞ Motivates innovation within and external to organizations
- ∞ Calls for cross/specialty collaboration: SLA mix of corporate, nonprofit, government, research and care environments
- ∞ Highlights experience from the field: Two practitioners:
  - **Carrie Papa:** will share an example from her organization
  - **Barbara Jones:** will share insights to help realize these opportunities





# What is the Opportunity for Health Care?

- ☞ Improves organizational learning
- ☞ Expands impact of staff knowledge
- ☞ Increases spread of better practice
- ☞ Recognizes proactively potential problems
- ☞ Supports continuous learning and improvement
- ☞ Captures knowledge of exiting experts







# What is the Opportunity for All?

- ☞ Better meds +
- ☞ Better insurance +
- ☞ Better efficiencies +
- ☞ Better research +
- ☞ Better work/life balance +
- ☞ Better practice +
- ☞ Better process ==
- ☞ Better health care



# Its Been a Honor ...

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