



KNOWLEDGE MANAGEMENT STRATEGY

IN THE WESTERN PACIFIC REGION

2008 - 2013



World Health
Organization

Western Pacific Region

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«The ever-growing challenges of global public health call for capable and innovative WHO staff. As a knowledge-based Organization, we should be at the leading edge.»

Dr Shigeru Omi, Regional Director

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1. BACKGROUND

1.1 Introduction

The broad directions for the work of WHO as the world's health agency are set out in the Eleventh General Programme of Work 2006-2015 (GPW), a global health agenda. Building on WHO's mandate and its comparative advantage, six core functions have been defined for the Organization in the GPW. The second of these core functions refers to «shaping the research agenda and stimulating the generation, translation and dissemination of valuable knowledge».

Knowledge management is the way organizations create, capture, enhance and reuse knowledge to achieve organizational objectives. What needs to be managed are the processes by which knowledge is created, acquired, stored, accessed, validated, disseminated and applied. WHO is a knowledge-based organization. The exchange and dissemination of information about health conditions and maintenance of health has been a central activity of the Organization since its founding.

1.2 World Health Organization Global Knowledge Management Strategy

A WHO Global Knowledge Management Team, comprised of Headquarters and Regional Office staff, was established in 2005. The team drafted a strategy and an operational plan for 2006-2007. The objectives of the Global Strategy lie in three main areas – strengthening country health systems through better knowledge management, establishing knowledge management in public health, and enabling WHO to become a better learning organization.

1.3 WHO Medium-term Strategic Plan 2008-2013

The more specific priorities of WHO are set out in the WHO Medium-term Strategic Plan 2008-2013 where they are defined as strategic objectives, and in the two-yearly Programme Budgets as expected results.

Aspects of knowledge management are covered in Strategic Objectives 10, 12 and 13 of the WHO Medium-term Strategic Plan.

Knowledge management in WPRO depends on the cross-cutting work of many units in the Regional Office and country offices, including: Health Information and Evidence for Policy, Human Resources Development, Health Services Development, Information Technology, Library, Publications, Public Information Office, and Translation. The Administration and Personnel in particular will play a key role since staff development and learning is an essential element of knowledge management.

2. VISION, OBJECTIVES AND STAKEHOLDERS

2.1 Vision and mission

The vision of Knowledge Management in WHO is to achieve global health equity through better knowledge management and sharing.

The mission is to make WHO, WPRO a better learning and knowledge-sharing organization in order to enhance productivity, effectiveness and innovation in pursuit of the Strategic Objectives of WHO.

2.2 Objectives

This Knowledge Management Strategy for WHO in the Western Pacific Region is aligned with the WHO Global Knowledge Management Strategy and covers the same timeframe as the WHO Medium-term Strategic Plan from 2008 to 2013. There are three main Strategic Objectives in the WHO Medium-term Strategic Plan that cover aspects of knowledge management, namely:

Strategic Objective 10: To improve health services through better governance, financing, staffing and management informed by reliable and accessible evidence and research.

Strategic Objective 12: Provide leadership, strengthen governance and foster partnership and collaboration in engagement with countries and areas, to fulfil the mandate of WHO in advancing the global health agenda as articulated in the 11th General Programme of Work.

Strategic Objective 13: Develop and sustain WHO as a flexible, learning Organization, enabling it to carry out its mandate more efficiently and effectively.

In addition, the delivery of knowledge products is required for the achievement of expected results of other Strategic Objectives. The following expected result is an example in *Strategic Objective 1 (To reduce the health, social and economic burden of communicable diseases)*: New knowledge, intervention tools and strategies that meet priority needs for the prevention and control of communicable diseases developed and validated, and scientists from developing countries and areas increasingly taking the lead in this research.

Knowledge management is a common theme across the Organization and there is a crosscutting relationship between knowledge management and the Medium-term Strategic Plan of WHO at all levels.

2.3 Stakeholders

This Strategy targets a broad range of stakeholders within and outside the Organization: WHO staff, national policy-makers and health professionals in training and practice, the academic and research community, nongovernmental organizations, the private sector, donors, the media, development institutions and the general public.

3. STRATEGIC DIRECTIONS, APPROACHES AND EXPECTED RESULTS

The three Strategic Directions of the WHO Knowledge Management Strategy in the Western Pacific Region are:

1. WHO as a Knowledge Broker
2. Translating knowledge into policy and action
3. Fostering a knowledge sharing culture for continuous improvement and innovation

For each strategic direction there are region-specific expected results to be achieved in the timeframe of the strategy; 2008-2013. The expected results will be achieved through the strategic approaches described below.

3.1 Strategic direction I: *WHO as a Knowledge Broker.*

Regional situation

Access to information and knowledge is inequitable, while information overload is widespread. Improving access to health information and knowledge is a core function of WHO, and is included in the WHO Constitution. Despite decades of progress and the exponential growth in knowledge in public health, too many people in the Region do not have access to the information and knowledge they need to improve their health and quality of life, or to make informed decisions concerning the health and well-being of individuals, communities, and entire populations. This inequity may be for reasons of affordability, infrastructure, capacity to find and manage information, or simply because the relevant knowledge is not available in appropriate languages or cultural contexts.

Approaches

WHO in the Region will respond to the needs of Member States by developing and providing high-quality, relevant, and timely information products and services according to needs.

WHO will engage the public health community as a strong advocate for more equitable access to the world's health-related knowledge.

The WPRO Public Information Office will use a wide range of advocacy approaches to disseminate health knowledge to Member States, regional and global health partners and, through the media and the general public.

WPRO will coordinate the implementation of the Global Health Library, will develop the Regional Index Medicus and distribute Blue Trunk Libraries to selected districts in developing countries in close coordination with country offices.

WPRO will continue to provide full text publications and documents to the global WHOLIS database.

With the support of country offices, access to HINARI will be further promoted and support to national users provided through workshops.

Expected result: Essential multilingual health knowledge and advocacy material made accessible to Member States, regional health partners and other stakeholders in the Region through effective exchange and sharing of knowledge.

Examples of products and activities to achieve expected result

Public Information

The Public Information Office (PIO) uses a wide range of advocacy approaches to promote WHO as the world's leading health organization.

It maintains a large and growing list of journalists, through which it issues press releases, media advisories, Question & Answer briefings, op-ed articles and fact sheets to continually update the public on WHO's public health activities. The PIO also organizes press conferences and briefings, and provides media support and advice to the Regional Director.

The Public Information Office (PIO) has built up a comprehensive library of videos and photos, which it makes available to the media and the public and to WHO technical units for their own advocacy purposes. Through its own graphic design studio, it produces publications, brochures, pamphlets, displays at meetings and events, calendars and much more, while customizing HQ material for regional needs.

The Global Health Library

The objective of the Global Health Library (GHL) is to contribute to radically increase access to information and scientific evidence on health, particularly in developing regions. The GHL is promoted and led by WHO as part of its strategy of knowledge management in global public health and the Region has started to take an active role in the development of the GHL at regional and country levels in connection with the Regional Index Medicus, which is one module of the GHL.

The GHL aims to strengthen, promote and develop worldwide networks on the collection, organization, dissemination and universal access to reliable health sciences information. The GHL is designed to create the global space that will promote and progressively connect local, national, regional and international flows of information on health.

The Western Pacific Regional Index Medicus (WPRIM)

The Western Pacific Regional Index Medicus (WPRIM) will soon include journals from China, Japan, Mongolia, the Republic of Korea and the Philippines. There is a strong interest from Australia in both the WPRIM and the GHL. The WPRIM will complement the internationally known bibliographical indexes, such as MEDLINE from the US National Library of Medicine. Although most of the significant medical periodicals published in developed countries are indexed in the MEDLINE database, there is still a considerable amount of important and valuable medical and health documentation from countries outside the major industrialized areas which is not included. This material therefore receives less global visibility in spite of its often higher relevance for other developing countries. The traditional one way flow of health information from North to South is thus becoming increasingly challenged as more health information providers and users are aware of the importance of a broader South-North and South-South sharing of information.

WHOLIS

WHOLIS is the World Health Organization library database available on the web. WHOLIS indexes all WHO publications from 1948 onwards and articles from WHO-produced journals and technical documents from 1985 to the present.

HINARI - Access to Research Initiative

The HINARI program, set up by WHO together with major publishers, enables developing countries to gain access to one of the world's largest collections of biomedical and health literature. Over 3680 journal titles are now available to health institutions in 113 countries, benefiting many thousands of health workers and researchers, and in turn, contributing to improved world health.

Blue Trunk Libraries

The Blue Trunk Library has been developed by the Library of the World Health Organization for installation in district health centres in developing countries as a means of compensating for the lack of up-to-date medical and health information. The collection, which is organized according to major subjects, contains more than one hundred books on medicine and public health.

In order to make it easier to transport and store, the collection has been packed into a blue metal trunk fitted with two shelves on which the cardboard boxes containing the books are arranged.

Among the work chosen, priority has been given to practical manuals (especially those published by WHO) offering easily accessible solutions to the medical, public health and management problems medical staff may have to face.

Blue Trunk Libraries have been distributed to Papua new Guinea, the Philippines, all Pacific island countries (POHLN resource centres) and Vanuatu.

3.2 Strategic direction II: *Translating knowledge into policy and action*

Regional situation

Health inequalities persist despite known, cost-effective interventions. Often, existing strategies do not solve local problems, in part because the necessary knowledge translation does not occur. The processes from knowledge generation to action are complex, and influenced by many factors, including stakeholder involvement, local context, perceived relevance, and the knowledge itself. Knowledge needs to be contextualized to be meaningful, which is why identifying and prioritizing needs of key audiences is essential. We need to better understand these processes, or «value chains», which have so far been dominated by supply-driven models which assume that knowledge, once disseminated, is adopted.

Information and communication technologies (ICT) offer great potential to improve health. In many countries, the health sector already benefits significantly from the use of these technologies in areas, such as the delivery of health care, the management of health services, and the education of health personnel. Expanding these benefits to all countries requires investment in ICT infrastructure, applications, content, and training, as well as partnership with United Nations agencies, governments, the private sector and civil society in the emerging knowledge society.

The strategic consideration and use of an e-Health component in WHO's technical cooperation can contribute to the improvement of access, learning, sharing and networking in support of the Organization's goals.

Approaches

Promoting translation of research findings into policy and practice, including establishment of more systemic ways of reviewing and using best evidence in regional guideline development. Using «Knowledge mapping» (assets, flows and gaps) in countries and organizations as a means to guide knowledge management work.

Strengthening of health systems and evidence for policy, working in partnership with public and private sector stakeholders, including development and use of e-Health norms and standards, information exchange and protocols, and methods for improving data and information quality and interoperability.

Promoting the integration of cost-effective ICT in education and training, including the use of e-learning in pre-service and in-service professional development and in health education for the public.

Expected result: Contribute to strengthened country health-information systems that provide and use high quality and timely information for health planning and for monitoring of country and major international goals.

Examples of products and activities to achieve expected result

EHR – Electronic Health Records

EHR contain a patient's information, such as the traditional health record including a patient's health profile, behavioural and environment information. EHR also include the dimension of time, which allows for the inclusion of information across episodes and providers which will ultimately evolve into a lifetime record. This longitudinal electronic health record will contain all personal health information belonging to an individual, it can be entered and accessed electronically by health care providers over the person's lifetime and extends beyond acute inpatient situations including all ambulatory care settings at which the patient receives care.

The Country Health Information Profiles (CHIPS)

The Country Health Information Profiles (CHIPS) is an annual publication of the WHO Regional Office for the Western Pacific comprising of country profiles and the health databanks for the countries and areas of the WHO Western Pacific Region based on information supplied by the health ministries/departments or compiled from national databases and reference libraries of the countries.

The country profiles provide a general description on the country's demographics, gender and poverty; political situation; economic situation; health trends; health systems; and national health plan and priorities.

The country health databank is annexed to each country profile and is more detailed in containing different sets of indicators. Individual country profiles and the CHIPS volume as a whole are accessible on the website of the WHO Regional Office for the Western Pacific.

Expected result: Contribute to better knowledge and evidence for health decision-making, by consolidation and publication of existing evidence, facilitation of knowledge generation in priority areas and leadership in health research policy and coordination, including ensuring ethical conduct.

Examples of products and activities to achieve expected result

Evidence-Informed Policy Network (EVIPNET)

EVIPNET is an innovative program to promote the use of health research in policy and decision-making and practice. It aims to create partnership between policy and decisionmakers and researchers to facilitate decision-making by making better use of scientific evidence available globally and locally. EVIPNET will also provide training opportunities that will develop the capacity of decision-makers to access and apply evidence in low and middle-income countries. In the process, we can work together to identify knowledge gaps, research agendas and promote use of systematic reviews and research synthesis.

Networks of WHO Collaborating Centres

In 2000, the Executive Board urged the Member States to make full use of WHO Collaborating Centres (WHO CC) as sources of information, services and expertise, and to strengthen their own national capacity for training, research and collaboration for health development. At the same time, it encouraged WHO Collaborating Centres to develop working relations with other centres and national institutions recognized by WHO, in particular by setting up or joining collaborative networks with WHO's support. This has actually been the case of the WHO CCs in many areas, where networks have been created.

Examples of active existing networks of WHO Collaborating Centres are the Global Network of WHO CCs for Nursing and Midwifery Development, Network of WHO CCs in Occupational Health, and network of WHO CCs for Traditional Medicine.

Expected result: Support provided to strengthen health workforce information, knowledge base and the capacity of countries and areas for policy development.

Examples of products and activities to achieve expected result

Innovative e-learning initiative – the Pacific Open Learning Health Net (POLHN)

The Pacific Open Learning Health Net (POLHN) initiative is aimed at meeting the continuing education needs and standards of practice of health professionals in Pacific island countries, reducing staff shortages by allowing health professionals to remain in their jobs while continuing their education and overcoming the high cost of overseas training. As of April 2007, 16 learning centres, equipped with computers and internet connections in 11 Pacific island countries, enable health personnel, such as nurses, doctors, allied health workers and, health managers to be trained in basic information technology and computer skills so as to access or search for electronic health information or undertake online or distance learning health courses.

Specific health courses designed to meet training needs of health personnel are developed and delivered through distance learning online modality via an interactive website: www.polhn.org or interactive CD-ROMS. Local trainers/mentors support course participants where needed. Self-directed learning content in print and on CD-ROMS are distributed for use in countries without learning centres or to those that cannot access the learning centres.

Since its establishment in 2002, more than 25 health courses on a variety of subjects, such as blood safety, HIV/AIDS, diabetes, radiology, health informatics, communications and counselling have been conducted through the learning centres, benefiting hundreds of health professionals. A plan to sustain and expand the network from 2007-2011 has been developed.

Knowledge Management for Public Health (KM4PH)

Knowledge Management for Public Health (KM4PH) is a global partnership of public health associations, schools and institutes worldwide. KM4PH key partners are WHO together with the World Federation of Public Health Associations (WFPHA) and the International Association of National Public Health Institutes (IANPHI) as well as their members. KM4PH is a global knowledge sharing network for public health supported by:

- a global database of public health expertise (the KM4PH Database);
- online communications platform (University of Iowa Global Public Health Campus);
- other knowledge resources, including Health InterNetwork Access to Research Initiative (HINARI), Global Health Library (GHL) and the eGranary Digital Library; and
- training in leadership of knowledge management for health.

KM4PH will also support the Global Health Workforce Alliance (GHWA), whose secretariat is at WHO, aiming at achieving a rapid increase in the number of qualified healthworkers in countries experiencing shortages through partnerships between industrialized and developing countries.

3.3 Strategic direction III: *Fostering a knowledge sharing culture for continuous improvement and innovation*

Regional situation

Knowledge management methods and tools offer new opportunities to improve WHO's work by improving effectiveness, efficiency and communication. Countries can benefit as well, particularly by exchanging experience and hard-won solutions with each other. However, there are significant barriers to knowledge sharing and reapplication: relevant knowledge may not exist; it may exist in formats where people are unaware of it or cannot find it; the knowledge may exist in people's heads but it cannot be tapped; or existing knowledge simply goes unused. Barriers to learning include lack of time, skills and incentives; isolation; insufficient or unavailable tools and methods. Decision-makers, health professionals, communities, and WHO staff need to be able to find, use, manage and share knowledge – and require the competencies and tools to do so.

Creating an environment for the effective use of knowledge is vital to achieving WHO's mission. Implementing technical services, managing the complexity of our global operations, achieving our goals in countries – all depend on the capacity for learning, sharing, and using knowledge, within the Organization as well as in Member States. The fact that WHO's work takes place in the context of diverse settings, languages and cultures makes the communication skills underpinning these capacities even more important. There is a broad range of skills required to communicate effectively with our different audiences. Within the Organization, knowledge sharing and innovation is recognized as critical to the attainment of the goals of knowledge management.

Action is required along several lines – culture change, capacity building, research and evaluation – towards creating an enabling environment for knowledge management and support the strategic directions outlined above.

Approaches

WHO/WPRO will aim to improve the exchange and reapplication of knowledge both in the Organization and in countries by identifying good practices and acting as a change agent for adoption of these practices.

WHO will identify and strengthen knowledge management core competencies within the Region, and foster an environment that supports continuous improvement through learning and development, sharing and applying knowledge. This requires building organizational capacity, strengthening knowledge networks, and adopting knowledge management practices and information technology relevant to WHO's mission and goals.

Within the Organization, cultural change will be fostered through training programmes and creating incentives for knowledge sharing.

WHO will establish the capacity to guide technical programmes, countries and others in the use of KM methods.

Expected result: Promotion of staff development and learning

Examples of products and activities to achieve expected result

The Staff Development and Learning (SDL) strategy is developed at the Organization-wide level. To promote SDL in the Region, the following measures are being put in place or considered:

- (1) A Regional Learning Committee (RLC) is being established.
- (2) The authority to use staff development funds has been delegated to WRs/CLOs and funds have been allocated to country offices accordingly. Country offices are responsible for recording and evaluating SDL activities conducted and submitting reports on SDL activities to WPRO/Personnel.
- (3) In 2006-2007, WPRO staff participated in a number of globally-organized courses (GLP, Writing Effectively for WHO, ASITF, Health Outcomes for the Poor, Etc.). Several large group activities have been organized in WPRO (English and French language training, Classification and e-POD training, UN Field Security Training, IT courses, etc.), as well as a number of group and individual courses offered by external training providers were supported both for Regional Office and Country Offices' staff.
- (4) Personnel plans to organize the following training activities in 2007: gender mainstreaming workshop, administrative and managerial course, GSM training, competency-based interviewing techniques, and teambuilding. Other courses, including one on knowledge management, are being considered.

Expected result: Ongoing support to country, regional and global information systems and their users. Development of secure and cost-effective solutions that meet the changing needs of the Organization.

Example of activities and products to achieve expected result

Communities of practice will be developed and promoted. Communities operate through mutual benefit, across the normal organizational structures. They are held together by a common interest in a body of knowledge and are driven by a desire and need to share problems, experiences, insights, tools, and best practices. Communities of practice may be enabling networks, particularly for staff members or they may be delivery networks, that is their purpose is to deliver results.

The **Global Management System** project will encompass WHO's administrative processes and the related information systems in a range of functional areas, including programme management, finance, payroll, human resources, and procurement. Roll-out of the System will occur Region-wide in early 2008.

The new integrated system will provide the Organization with a real-time and uniform management tool to enable:

- greater decentralization
- increased individual & collective accountability

Moreover, it will be designed to facilitate administration of programmes.

WHO is using **Microsoft SharePoint Portal Server (SPS)** as a tool for a range of applications in developing a powerful knowledge management capability including collaboration, portals, institutional knowledge search and content management». It will support the development of an intelligent intranet portal that seamlessly connects users and teams, so that people can utilise relevant information and knowledge concerning their work, regardless of the information's location. The utility of SharePoint and shared workspaces has already been demonstrated in areas such as development of the programme budget and preparation of country cooperation strategies and use of this tool will be expanded to other technical areas.

The regional Internet **Content Management System (CMS)** also organizes information and facilitates collaborative content creation on web sites. CMS allows non-technical authors and editors to create, edit and publish web content on an ongoing basis. The plan is to consolidate all websites into a central CMS system to provide a common design and consistent information architecture between all the pages. This would also help visitors easily find the information they are looking, among content created in decentralized locations.

The way forward

Operational plans will be developed for all Strategic Directions of the Western Pacific Region Knowledge Management Strategy. For Strategic Direction 3, the plan will focus on developing a knowledge sharing culture in WPRO and country offices. Staff will learn how knowledge management tools and techniques can be used in their work to achieve better results and increase efficiency.

A regional knowledge management facilitating team and network will be established, which should be representative of all staff, at regional and country levels.

Knowledge management is a Region-wide activity that requires commitment at every level and ownership by all divisions, units and country offices, and active participation by all staff. Implementing knowledge management will make staff more efficient and focused through better systems and processes.