

Building a One-stop Shop for Ideas

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by Nancy A. Thompson, PhD, FACHE

If you feel like you've ever reinvented the wheel when changing or improving processes, the Department of Veterans Affairs may have the answer. Read on to learn more about the Virtual Learning Center, an online knowledge base of healthcare solutions.

We all have our networks for getting the informal HIM knowledge we need to do our jobs. We call, e-mail, and catch our contacts in the hallway. Unfortunately, this method, as we know, can be as hit-or-miss as it is effective.

The Department of Veterans Affairs has developed a method for systematically collecting and disseminating informal knowledge. Further, this system is available—at no cost—to you and your organization. This article explains how the system works and how it may help HIM professionals.

A Way to Share Solutions

The seeds of change were planted in 1997, when Veterans Health Administration Deputy Under Secretary for Health Thomas L. Garthwaite, MD, issued a challenge to the Office of Special Projects that went something like this:

"Some years ago a VA Medical Center was cited for having too much loose filing in the file room. At that time they agreed that they would fix the problem. Now I am reading their reply to this year's site visit and again they say they will fix the problem. I know that a Midwest VA medical center has solved this problem, but the other medical center has no way to know this. **Here is your challenge: Create a systematic mechanism for sharing innovations, best practices, and lessons learned from errors anywhere, anytime throughout the 173 VA medical centers and more than 600 clinics, helping to move the VA toward becoming a learning organization.**"

The next month, the Office of Special Projects, under the direction of Dr. Victor S. Wahby, brought in a design team of 40 innovators and leaders. This team developed the goals and parameters of what would become the VA's Virtual Learning Center (VLC).

We awarded a contract within six weeks. Two months later, a bare-bones version of the VA's Virtual Learning Center went live.

What Is the VA's Virtual Learning Center?



The VLC is a Web site for systematically sharing innovations, best practices, and lessons learned from errors (www.va.gov/vlc). In June 1999, the VLC went live on the Internet, making it available to healthcare providers worldwide.

The illustration shows the home page of the VLC. The system offers a number of functionalities for users, as described by each of the components below.

Search/Browse

The Search feature allows users to search the VLC database, which contains more than 1,000 healthcare innovations, best practices, and lessons learned from errors. You can search:

- using more than 150 key words (including medical records, compliance/coding, insurance reimbursement, computerized patient record system, etc.)
- by author's name
- by facility (name of medical center or type of facility—long-term care, acute, etc.)
- since the last date you searched (some organizations print out new innovations each week and distribute them to the appropriate parts of the organization)
- award-winning categories (the VA's Scissors Award Winners or Patient Safety, etc.)

Your search will produce a list of Lessons. When you select one to view, a short version of the Lesson/Innovation appears first. If it is of interest to you, click on the "+" sign and the full Lesson is displayed. After reading it, you can ask questions or make comments by clicking on the "Comments" feature. In addition, if you are able to use any of the information in your organization, you can submit a note on your implementation to the database, providing feedback to others.

Submit Lessons

Anyone may share an innovation or best practice. The submission to the database should include author demographics, title of innovation/lesson, core message, rationale/need, actions taken, results, lessons learned, and contact person. The success of the VLC depends on people being willing to share their best practices (as well as using the ideas of others) and I invite you to share what has worked for you that may help someone else.

Personalize Your Information

The VLC's Personal Profile is its most popular feature. It lets you select key words of interest and then notifies you via e-mail when a new submission related to those key words appears. In effect, this feature brings the information to you—you don't have to search for it. You can also edit your profile at any time, adding or deleting key words as your information needs change.

Patient Safety

This component of the VLC is a subset of the database Lessons Learned from Errors. Anyone sharing patient safety lessons is encouraged to remove any reference to their organization and focus on the cause and corrective actions taken. The goal is to prevent such errors from recurring, not to place blame. Examples of relevant lessons for HIM professionals include errors in getting loose filing into the record in a timely fashion or solutions for confidentiality or access to electronic medical records.

A One-stop Shop for Ideas

The VLC may have something to offer you if you feel that you are reinventing the wheel and that someone else must have addressed this problem somewhere before. The site is a one-stop shopping place for practices that have worked for others. Adapting or adopting someone else's innovation makes sense if you are trying to improve service in many areas but don't have the time to reinvent processes in every area. VLC users can find easy fixes in the database, modify them to suit their needs, and spend their time on more complex problems or issues where no solution has yet been shared.

In addition, when you share your innovations or practices, you get personal recognition. Your photo can be posted with every innovation you share. And you have the chance to interact, via phone or e-mail, with those who comment on your innovation. You also learn how many others have implemented your idea. This data tells you that you are making a difference in moving the field forward.

The Virtual Learning Center is available at no charge. Because our goal is not to make money, but rather to enrich the scope of learning within the VA, we welcome your use of the VLC, both to use the ideas already shared and to encourage you to bring your expertise to others.

Knowledge Capital

Why would the VA go to these lengths? Because all the classes in the world cannot capture the informal knowledge contained in employees' minds. This "knowledge capital" is often unrecognized and undervalued, but it allows us to put our formal education and training into everyday practice. It helps us navigate team work successfully, improve the quality and quantity of services, and ultimately increase the value of services provided.

Organizations across all industries are building similar knowledge bases. As we developed the site, we learned a few lessons about building our knowledge base. Among these lessons:

Do your homework. In developing our knowledge management system, the VA did some benchmarking, turning to the Web to study the knowledge sites of the US Navy Acquisition Reform Office, the Internal Revenue Service, the Army's Center for Lessons Learned, and the Army Medical Directorate.

Make it easy to maintain. We worked—and continue to work—to make the site as "user maintainable" as possible. For example, a number of components of our site change regularly. Our nontechnical staff can make changes and updates at any time. This has saved contractor costs in the long run and given us the flexibility to modify databases as needed.

Decide review parameters. How much review will be required before an item is part of the knowledge base? This is a question that knowledge bases need to resolve early on. The users who developed our site parameters recommended minimal review. Their logic was that because the database replaces or supplements informal hallway and telephone exchanges that are not currently reviewed, submissions to the site should also undergo very minimal review.

Currently, we review only for inappropriate material, which is very rare. Virtually all lessons are posted just as they are received.

Make it easy to participate. Another aspect of designing the site was creating a mechanism for posting. Some sites choose to ask for submissions in hard copy, which are uploaded by staff. Our office, however, did not have sufficient staff to load lessons.

As a result, the VLC is designed so that anyone may post an innovation or lesson from anywhere in the world. Participants use a simple "copy/paste" process between a word processing document and the Web site. We have electronic instructions available online. Most people have found this to be an easy process.

Where Do We Go from Here?

Hollywood tells us, "If you build it, they will come." Or will they? Nancy Dixon, an expert in the field of organizational learning, notes that just building a warehouse data repository is not sufficient.¹ Face-to-face dynamics make a repository a more powerful tool. We have found that our system's personalized features (comments on lessons, implementation feedback, and the Personal Profile) are most attractive to users. As a result, we plan to expand the personalization opportunities. For us they partially simulate some of the rewards of face-to-face interactions: the smile, the appreciation, the enthusiasm, and the human connection.

In addition, we have taken advantage of face-to-face meetings and exhibits to share the VLC concept. Within the VA, we continue to identify opportunities to provide hands-on interactive exhibits, which result in high levels of excitement and encourage new users to share and use the information in the VLC.

Now that we have more than 1,000 innovations in the database, we plan to develop criteria for rating the quality of the innovations. Following the example of the Army Medical Directorate Knowledge Management site, we will be adding gold, silver, and bronze seals to outstanding, excellent, and good innovations. A team from the field is developing the criteria this summer. Innovations that do not receive seals will still remain in the database as "registered." Old data or data that is no longer relevant will be archived.

Finally, we will be working to teach users to "make a habit" of using the VLC routinely. We want users to see the site as a source of good ideas whenever they are trying to solve a problem or improve a process. To do this, we will build our understanding of how informal knowledge moves between organizations and what kinds of people skills are needed to transfer, sell, and implement these ideas. Then we will work to explore how the VLC can ensure that key people have access to the innovations they need, when and where they need them, and that they can connect with the people who created the original innovation.

HIM professionals understand the need to share information—the need to build upon the innovations and ideas of others to make their practice even better. We invite your comments and input on the VLC. The Web site features a "feedback" button at the bottom of each page. Use it to share your thoughts and suggestions. And, if you are developing your own site for sharing informal knowledge, we are happy to share our experience with you. We look forward to new lessons in the HIM field from AHIMA members.

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Note

1. Dixon, Nancy. *Common Knowledge: How Companies Thrive by Sharing What They Know*. Boston, MA: Harvard Business School Press, 2000.

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Parameters for Success (or, How to Avoid Failure)

The most important parameter for success is "Don't fail." When the Office of Special Projects set out to design the Virtual Learning Center, we took some tips from a design team of innovators and leaders. Possibly the most important information the team gave us was what would make the site fail. In designing any Web site, the "don'ts" are as important as the "dos." Here are some things not to do when designing a knowledge base Web site:

- Don't make people go through the chain of command to share their innovations. This will kill any sense of pride, timeliness, and ownership. We were reminded that we were systematizing a sharing mechanism that had previously existed via phone, hallway contacts, and e-mail—none of which were reviewed by the chain of command
- Don't make the template complicated and "research-like." We were told to keep it simple. If someone found the innovation to be of interest, they could follow up with the contact person. Don't try to publish the entire process—just let people know where to find the information. Allow submissions that are not perfect or totally innovative. The reward of seeing innovations on the Web will encourage more submissions. Develop a system for identifying the best innovations, but let all be posted
- Don't use tiny print and poor background contrast. Our design team showed us numerous examples of poorly visually designed Web sites. Keep the print readable, organize the information, and make it visually appealing while keeping the time to load a page to a minimum. Don't make people drill down through pages to get to the information; keep it to one click whenever possible
- Don't make navigation complicated. The team reminded us that not all users of this site would be computer savvy. They advised us to make navigation clear on every page and make it possible to get to every part of the site from any page in the site without having to use the "back" arrow
- Don't make it dry and boring. Though there was mixed opinion about how "cutesy" the site should be, the general consensus was to make it pleasant to use. The team told us that they didn't want it to look like a "government Web site"
- Don't make it static. The advice was unanimous—make the site interactive. Give people the opportunity to comment on the innovations; let people share their experience in implementing innovations from the VLC. Customize the information whenever possible

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