GUEST EDITORIAL PREFACE Special Issue on Management of Intellectual Capital in Health Insurance Organizations

Oscar Tamburis, ITB-CNR, Federico II University of Naples, Rome, Italy

Giovanni Schiuma, University of Basilicata, Potenza, Italy, & Cranfield School of Management, Bedford, UK

Daniela Carlucci, University of Basilicata, Potenza, Italy

In this special issue on "Management of Intellectual Capital in Health Insurance Organizations" for the International Journal of Information Systems in the Service Sector (IJISSS), we present five high quality research articles on various subjects in the area of Knowledge Management in the healthcare milieu. Following the 2010 International Forum on Knowledge Asset Dynamics (IFKAD) held in Matera, Italy, authors of selected papers have been invited to submit significantly extended contributions to this special issue. Submitted articles covered several and interrelated topics, among which: Interaction among human, organizational and relational capital/Knowledge and Project Management/ Organizational value creation/Management of organizational climate, and match between technologies, processes, workers' skills and culture in HealthCare Facilities and Non-Profit Organizations.

All submitted articles were carefully peerreviewed. After a second round of reviewing for major revisions, the selected five papers are the following:

- Rocco Reina, Teresa Cetani, Assunta Lacroce, and Marzia Ventura (University of Catanzaro "Magna Græcia," Italy): "A Healthcare Project: Managing Knowledge Through Electronic Medical Record -Empirical Cases."
- Luisa Varriale, Paola Briganti, Rosaria La Peruta, and Maria Ferrara (University of Naples "Parthenope" and Cardarelli Hospital, Italy): "Organizational Conflict and Knowledge Creation: A Multiple Method Study in the Italian Health Care System."
- Daniela Carlucci and Giovanni Schiuma (University of Basilicata, Italy and Cranfield School of Management, UK): "Assessing and Managing Organizational Climate in Healthcare Organizations: An Intellectual Capital-based Perspective."

- Maurizio Rija and Giovanni Bronzetti (University of Calabria, Italy): "Innovative IC Framework in the Non-Profit Sector."
- Virpi Sillanpää and Harri Laihonen (Tampere University of Technology, Finland): "Managing Intellectual Capital in Non-profit Elderly Care Organizations."

The five papers can be in turn divided in two groups, related to their main topics.

The first group is comprised of the first three papers, that deal with peculiar although intertwined perspectives about the relationship existing between the Intellectual Capital (IC) domain-along with its main components – and the complex dynamics underlying the management policies in the HealthCare Organizations, with particular mention to some case studies from the South Italy.

In particular, Reina et al. set forth that the health care-related area plays a fundamental role within the Service sector, representing "a body of functions and care activities [...] aiming at safeguarding the health as an individual fundamental right and an interest for the whole community, respecting the freedom and human dignity" (Caccia, 2008). They aim at analyzing the re-engineering of the organizational processes inside a hospital facility, connected to the first stage of implementation of Electronic Medical Record (EMR) solutions, highlighting how this appears as the first step within the more extensive path of development of a proper Health Knowledge Management System (Borgonovi et al., 2004; Bali & Dwivedi, 2007).

Varriale et al. study the relation between organizational conflict and knowledge creation, especially focusing on the investigation of the interaction between conflict levels (intrapersonal, intragroup, and intergroup), management conflict styles (avoiding, obliging, dominant, compromising, integrative) and their effects on knowledge (personal, relational, professional). Conflicts are indeed a very real part of Information Systems in corporate life and a major obstacle to effective computerization; in particular, interpersonal conflict is an emerging topic as for Information System Development (ISD) (Barki & Hartwick, 2001). In line with this, authors' results reflect the most recent theories, showing in a Health Insurance Organization the strategic role of conflict, as neither positive nor negative, but always necessary to preserve and further the survival of the organizational framework.

In the end, Carlucci and Schiuma examine the relevance of IC as it provides a useful and fresh frame for analyzing intangible components of organisational climate and planning initiatives for their effective management. Their main focus is on the application of the Knoware Tree Model (Schiuma et al., 2005) as a tool to get to a comprehensive platform for disentangling the intangible domain of an organization, included organizational climate. In particular, among the categories into which the model can be divided, particular relevance assumes in a HealthCare Organization the Hardware perspective, since it deals with the technical infrastructures, especially ICTbased, as the structural features of workplace which influence the organisational climate. The study is proposed both as diagnosing tool for identifying resources which are hindering productivity, reducing effectiveness and quality of HealthCare services and as tool for supporting managers in designing management initiatives aimed to enhance organisational performances by leveraging organisational climate.

In the second group of papers, the concept of IC impact on Care Insurance facilities is extended to the Non-Profit Organizations (NPOs), being this stream of research still rather generic and conceptual. The existing literature on IC in the so-called "third sector" (or "tertiary sector") is actually scarce, but it seems that interest in the intangible aspects of health and social services in general has increased during the last few years. This is moreover supported by the fact that the implementation of different kinds of information technologies can make planning agencies and community organizations able to play an increasing significant role to the reaching of less powerful, resource poor citizens (e.g., Elwood, 2000; Ghose, 2001).

The paper presented by Rija and Bronzetti runs upon the fact that a communication (and information) system is important because the NPOs must have a deep understanding of the users' needs and, therefore, must create a relational and communication system that is able to perceive in real time the changes in demand (Bonacci & Tamburis, 2010); as a result, it will be able to create services and actions in order to build customers' loyalty and to satisfy their needs. To this end, the authors try to develop a theoretical framework to demonstrate how the three components of the IC (human, social and relational capital) can provide a potential way to achieve competitive advantages in terms of fundraising and expansion for organizations belonging to the third sector.

Sillanpää and Laihonen, in conclusion, describe different phases of the development processes carried out in three Finnish case organizations, in order to provide one possible solution which may help organizations to overcome obstacles on their way to initiate the management of IC, giving therefore answer to the two main objectives of the paper: (i) report which intangible resources are the most important for non-profit elderly care organizations from the viewpoint of their value creation processes; (ii) illustrate the significance of IC in non-profits –how can IC in these organizations be managed in practice?

In the overall, it can be said that today more than ever, Health Insurance Organizations must develop paths of change and improvement, in order to face the issues of harmonization between the care facilities and the territorial perspectives – surrounded in turn by the more general scenario where managerial logics, governance priorities and patient empowerment dynamics play intertwined roles.

The ongoing deployment of IS solutions to support the care provision, combined with proper healthcare policy makers strategies and an effective management of IC resources, represent crucial elements to carefully consider in order to manage successfully the process of change. The contributions to this special issue provide new theoretical and practical insights regarding some emergent organizational and managerial challenges of Health insurance organizations, putting a specific focus on the management of IC as a solid way to get to a more appropriate balance among human, relational and organisational resources.

ACKNOWLEDGMENT

The guest editors acknowledge the Editor-in-Chief of the journal, Professor John Wang, for the indispensable input provided during the various reviewing stages.

Oscar Tamburis Giovanni Schiuma Daniela Carlucci Guest Editors IJISSS

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