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Review of Individual, Organizational, and Technological Factors Influencing Knowledge Management Implementatin in Healthcare: A 2019 – 2024 Analysis

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Comprehending the influencing factors for the implementation of knowledge management in healthcare services is crucial for effectively managing and making use of knowledge to support innovation, decision-making, and improvements in healthcare quality. The purpose of this study is to analyze the key factors influencing the implementation of knowledge management in healthcare services, with the purpose of enhancing service efficiency, accelerating knowledge-based decision-making, and ensuring the quality of patient care. This review followed the guidelines outlined in the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA). The search was limited to full-text articles published in English between 2019 and 2024 in Scopus and PubMed. A total of 131 articles were initially identified from the databases, including research articles examining factors related to the application of knowledge management. There were data extraction, quality assessment, and the analysis of the data that were conducted for all included studies. A manual content analysis was employed to classify and categorize the identified factors. There were 11 research articles in total that were used in the final review. Content analysis yielded three main groups of factors: (1) individual-related factors, (2) organizational-related factors, and (3) technology-related factors. Conclusion: Healthcare requires robust knowledge management (KM) to support medical team collaboration, best practice sharing, and innovation in patient care.

Keywords: Factor, Healthcare, Knowledge Management

INTRODUCTION

In the era of globalization and rapid advancements in information technology, the healthcare sector faces increasingly complex challenges, particularly in improving the efficiency, effectiveness, and quality of patient care. One critical approach to addressing these challenges is knowledge management (KM), which enables healthcare organizations to systematically capture, share, and utilize knowledge to support innovation and informed decision-making. Beyond managing explicit information, KM also involves leveraging tacit knowledge derived from the experience and expertise of healthcare professionals (Wu, 2019).

Despite its potential benefits, the implementation of KM in healthcare settings is often hindered by multiple barriers. These include limitations in technological infrastructure, unsupportive organizational culture, resistance to change, and insufficient human resource capacity to manage knowledge effectively (Alavi & Leidner, 2001). Such challenges highlight the need to better understand the factors that influence KM adoption in order to design effective implementation strategies.

Previous studies have explored various determinants of KM implementation in healthcare, though their findings remain fragmented. Some research emphasizes the importance of leadership and managerial support in fostering KM practices (Chughtai et al., 2023), while others identify information technology infrastructure as a key enabling factor (Davenport & Prusak, 1998). Additionally, organizational culture that promotes collaboration and knowledge sharing has been consistently recognized as a critical contributor to KM success (Wiig, 2015).

Although these factors have been widely discussed, a comprehensive synthesis that integrates individual, organizational, and technological dimensions is still limited. A systematic review is therefore necessary to consolidate existing evidence, identify patterns, and highlight research gaps (Wu, 2019). Accordingly, this study aims to provide a clearer and more integrated understanding of the factors influencing KM implementation in healthcare services, as well as to offer practical recommendations for policymakers and practitioners to optimize its application.

METHODS

Study Design

This study uses a systematic review that employed the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) 2020 statement as its guidelines (Page et al., 2021). A more detailed explanation of the study design can be seen in Figure 1.

Search Strategy

The search of the literature was conducted using the Scopus and PubMed databases. There was a limited search of articles that were published in English and focused on determinants of the knowledge management application in the healthcare facilities (Abelsson et al., 2021). Only articles published between 2019 and 2024 were considered, as this timeframe was selected to

ensure the inclusion of recent evidence. The keywords applied were "factor," "knowledge management," and "healthcare." Table S1 presents the search strategy details.

Inclusion and Exclusion Criteria

Eligible articles included predictive studies or correlational studies that explained the correlation between independent variables and the application of knowledge management in primary healthcare services, were published in English, and were accessible in full text. Articles were not included from the review that were not available in full text, duplicates, previously published research, or systematic reviews.

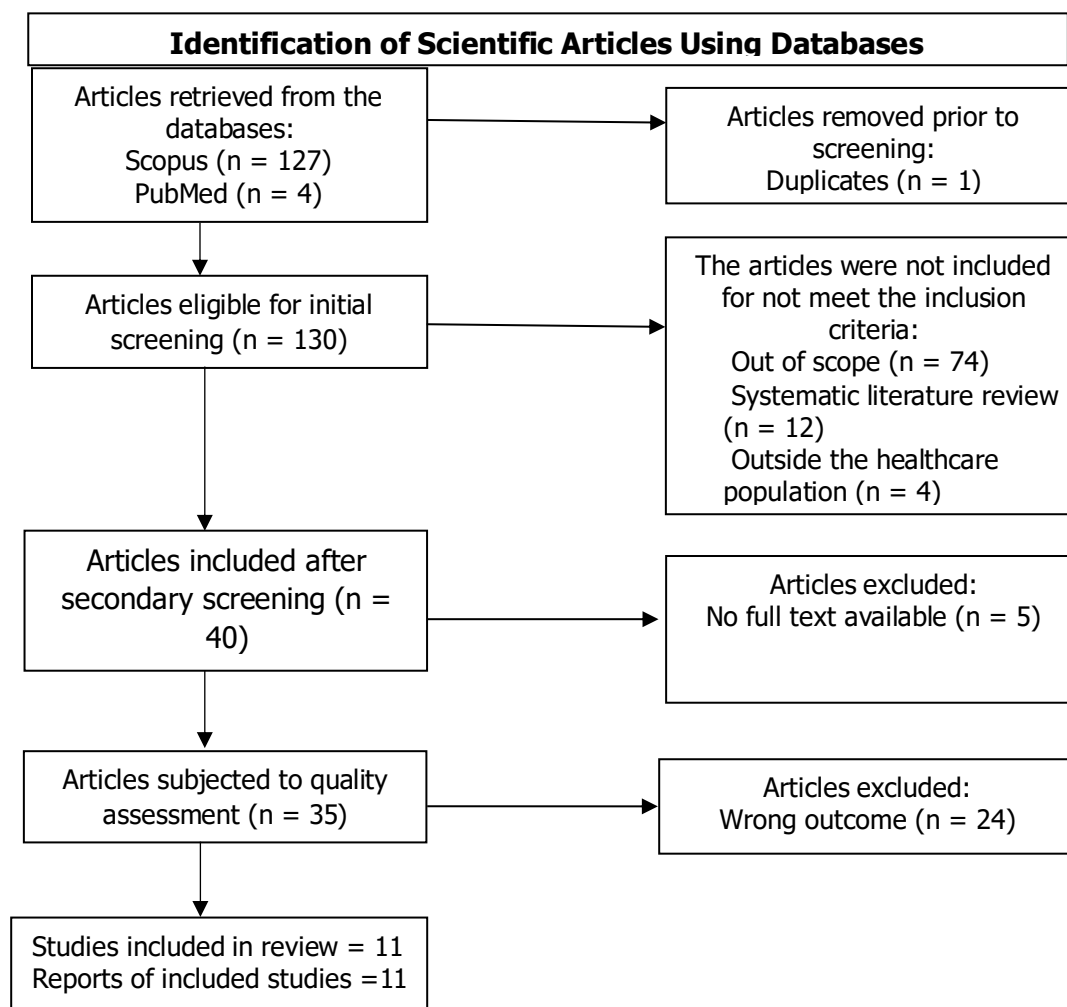


Figure 1. Flow chart of systematic review. Adopted from Page et al. PRISMA 2020 statement: an updated guideline for systematic review. *Int Surg J.* 2021; 88:105906. Creative Commons.

Data Screening

The researchers browsed and screened the titles and abstracts of downloaded articles across all databases. Subsequently, all available full-text articles were examined, and each included study was manually assessed to verify whether it met the inclusion criteria.

Studies were considered if they were related to healthcare professionals working in healthcare facilities.

Data Extraction

A table was used as a tool to facilitate the extraction of the data. On the table, it is included the author's name, publication year, article title, research objectives, country,

population, research design, research instruments, and findings. Details of data extraction are presented in Table S3.

The Assessment of Quality

The Joanna Briggs Institute (JBI) Critical Appraisal Checklist, which consists of eight indicators, was applied to each study to assess the assessment of quality and validity. The quality of a study was considered as high, moderate, and low if it achieved a score above 70%, between 50%–70%, and below 50% respectively.

The Analysis of Data

The content analysis was carried out on the selected articles. It involved the content and variables organization, which is divided into thematic categories. There were differences in the designs of the study, the variables of outcome, predictors, and the complexity of correlations among positive and negative, direct and indirect, as well as moderating and mediating variables. Therefore, the meta-analysis was not performed.

RESULT AND DISCUSSION

Search Results

Initially, there were 131 articles in the databases that were identified covering the years 2019 to 2024 through the search strategy. Once the duplicates were removed, 130 articles were screened by title according to the inclusion criteria, resulting in 40 retained articles. The further evaluation was conducted on these articles based on their abstracts, resulting in 11 articles being used for a comprehensive full-text review. Those with no full text not meeting the inclusion criteria were not included at this stage. Following a thorough review, 11 selected articles were put for inclusion. The search strategy details are shown in Figure 1.

Quality Assessment Results of the Article

Overall, the average quality score of the included articles was above 70%, indicating high quality across all studies. Details of the quality assessment results are presented in Table S2.

Analysis of Findings

Individual-Related Factors
Individual factors focus on the characteristics and behaviors of the workforce within organizations, including personality, self-efficacy, self-esteem, trust, awareness, positive attitudes, experience, and intrinsic motivation.

Table 1.
Individual-Related Factors

No	Factor	Findings	Source	Methods
1.	Personality	Healthcare professionals at both centers were found to have extroverted personalities, which made them more open to others and facilitated knowledge sharing.	(Almashmoum et al., 2024)	A mixed-methods study involving 56 and 29 respondents from Kuwait Cancer Control Care and The Christie, respectively.
2.	Self-efficacy and self-esteem	The findings indicated that most professionals possessed self-reliance and were receptive to new concepts when engaging in knowledge exchange. Self-efficacy and self-esteem were identified as the essential components of individual factors.	(Almashmoum et al., 2024)	A mixed-methods study involving 56 and 29 respondents from Kuwait Cancer Control Care and The Christie, respectively.
3.	Trust	In the medical imaging department, trust between senior managers and healthcare professionals, as well as among healthcare professionals themselves, was crucial for smooth knowledge exchange.	(Almashmoum et al., 2024)	A mixed-methods study involving 56 and 29 respondents from Kuwait Cancer Control Care and The Christie, respectively.
		Attitudes toward transfer were positively connected with the perceived benefits of MOOCs, which mediated the relationship between reputation and MOOC attitudes.	(Schettino et al., 2024)	A quantitative study involving a sample of 217 physicians in Italy
4.	Awareness	Knowledge-sharing behaviors in daily practice were enhanced by the	(Almashmoum et al., 2024)	A mixed-methods study involving 56 and 29 respondents from

No	Factor	Findings	Source	Methods
		recognition of the importance of knowledge sharing.		Kuwait Cancer Control Care and The Christie, respectively.
		The transfer intention was positively influenced by attitudes, as indicated in the findings, as well as perceived behavioral control.	(Schettino et al., 2024)	A quantitative study involving a sample of 217 physicians in Italy
5.	Positive attitude	It is believed among the healthcare professionals at cancer centers that a positive attitude helps strengthen knowledge-sharing behaviors.	(Almashmoum et al., 2024)	A mixed-methods study involving 56 and 29 respondents from Kuwait Cancer Control Care and The Christie, respectively.
6.	Experience	Healthcare professionals with substantial work experience were prone to engage in knowledge exchange.	(Almashmoum et al., 2024)	A mixed-methods study involving 56 and 29 respondents from Kuwait Cancer Control Care and The Christie, respectively.
7.	Intrinsic motivation	Most healthcare professionals demonstrated intrinsic motivation, which supported their desire to exchange knowledge.	(Almashmoum et al., 2024)	A mixed-methods study involving 56 and 29 respondents from Kuwait Cancer Control Care and The Christie, respectively.
8.	Knowledge	Data analysis showed that nurses' and physicians' knowledge of health information technology (HIT) shaped their perceptions of dissatisfaction. Those lacking HIT-related knowledge were more prone to comprehend the technology poorly.	(Alohali et al., 2020)	A qualitative study with a sample of both 15 physicians and nurses covering four different departments
9.	Perceived loss of professional autonomy	The subjective loss of professional autonomy in the study referred to concerns among nurses and physicians that the application of HIT would reduce their authority and decision-making freedom.	(Alohali et al., 2020)	A qualitative study with a sample of both 15 physicians and nurses covering four different departments
10.	Perceived dissatisfaction	Perceived dissatisfaction referred to feelings of irritation and frustration caused by HIT. Data analysis revealed that dissatisfaction among physicians and nurses had a direct impact on user rejection, where greater dissatisfaction was associated with a higher likelihood of rejection.	(Alohali et al., 2020)	A qualitative study with a sample of both 15 physicians and nurses covering four different departments
11.	Social influence	Social influence in the study referred to the enlarge to which both the attitudes and behaviors of the users were affected by the opinions of others HIT. Social influence was considered an interactive factor, as it was associated with both individual- and HIT-related factors. Social influence contributed to the dissatisfaction experienced by physicians and nurses, as it was found in case study findings.	(Alohali et al., 2020)	A qualitative study with a sample of both 15 physicians and nurses covering four different departments

No	Factor	Findings	Source	Methods
12.	Adaptation	At 70% of most managers reported that it was important for some adaptation when there was new evidence being introduced. They highlighted the prominence of continuously updating knowledge and remaining accessible to new information regarding the routines of work (96%).	(Abelsson et al., 2021)	A quantitative national online survey

Organization-Related Factors

Organizational factors are associated with the structure, culture, policies, and processes within

organizations that influence how knowledge is managed and shared across the system.

Table 2.

Organization-Related Factors

No	Factor	Findings	Source	Methods
1.	Extrinsic motivation	Extrinsic motivation was found to be essential in strengthening knowledge-sharing practices through recognition, rewards, incentives, and bonuses for healthcare professionals.	(Almashmoum et al., 2024)	A mixed-methods study involving 56 and 29 respondents from Kuwait Cancer Control Care and The Christie
2.	Leadership	Healthcare professionals at both cancer centers emphasized that the leadership takes an important part in providing encouragement, promoting knowledge-exchange activities, and reducing disputes or conflict.	(Almashmoum et al., 2024)	A mixed-methods study involving 56 and 29 respondents from Kuwait Cancer Control Care and The Christie
3.	Teamwork	Healthcare professionals at both cancer centers emphasized the prominence of teamwork in strengthening knowledge-exchange practices.	(Almashmoum et al., 2024)	A mixed-methods study involving 56 and 29 respondents from Kuwait Cancer Control Care and The Christie
4.	Communication culture	Both cancer centers have a communication culture to improve knowledge exchange.	(Almashmoum et al., 2024)	A mixed-methods study involving 56 and 29 respondents from Kuwait Cancer Control Care and The Christie
5.	Community of practice	In both centers, specialized meetings were organized, serving an important role in decision-making by reinforcing knowledge-exchange behaviors.	(Almashmoum et al., 2024)	A mixed-methods study involving 56 and 29 respondents from Kuwait Cancer Control Care and The Christie
6.	Learning and training	Training and learning activities, including lectures, workshops, and conferences, played a crucial role in improving knowledge-exchange practices.	(Almashmoum et al., 2024)	A mixed-methods study involving 56 and 29 respondents from Kuwait Cancer Control Care and The Christie

No	Factor	Findings	Source	Methods
		Peer-to-peer learning facilitated knowledge sharing, professional development, and catalyzed institutional- and system-level actions.	(Hashiguchi et al., 2024)	A qualitative study with a sample of 14 stakeholders from 10 countries
7.	Daily physician rounds	Healthcare professionals at KCCC underscored the prominence of physician visits in promoting knowledge sharing.	(Almashmoum et al., 2024)	A mixed-methods study involving 56 and 29 of respondents from Kuwait Cancer Control Care and The Christie
8.	The support of management	The managerial support in the study referred to the broad to that managers were eager to supply resources, authority, and power, which were considered critical for the successful implementation of HIT, including training and motivation	(Almashmoum et al., 2024)	A qualitative study with a sample of 15 nurses and 15 physicians covering four different departments
9.	High-performance human resource management (HPHRM)	HPHRM practices were observed to produce a social context in which managers and employees could share knowledge both face-to-face and through technology-mediated applications, enabling the provision of innovative healthcare services. The findings highlighted the prominence of job autonomy, the empowerment of employees, trust, social interaction bonds, and shared goals in promoting exchange and fostering innovative healthcare solutions.	(Malik et al., 2024)	A qualitative study
10.	Organizational culture	A positive organizational KM culture was found to expedite effective information exchange; however, refusal to exchange information persisted because of fears of losing competitive advantage.	(Salem et al., 2022)	A mixed-methods study
11.	Organizational strategy	There was a significant correlation found between ORGS and resistance to HIT adoption. Similarly, factors related to cost strategy (0.79), lack of standardized procedures (0.84), and insufficient coordination among health authorities (0.73) were also high. These findings suggested that miscommunication and errors constitute major obstacles to the adoption of HIT.	(Alrahbi et al., 2020)	A quantitative study in which the 148-stakeholder sample taken from across four main categories: patients, healthcare providers, United Arab Emirates (UAE) citizens and prospective experts.

Technology-Related Factors
 Technology-related factors encompass the information technology infrastructure and systems used to

expedite the collection, x distribution of knowledge, and storage.

Table 3.
Technology-Related Factors

No	Factor	Findings	Source	Methods
1.	The information and communication technology	The information and communication technology (ICT) was critical in supporting information dissemination. Intranets, extranets, PACS, and social media were identified as common types of ICT.	(Almashmoum et al., 2024)	A mixed-methods study involving 56 and 29 respondents from Kuwait Cancer Control Care and The Christie
		These applications transform knowledge as a resource, signaling high-quality healthcare and contributing to an encouraging reputation for public health services. Technology acceptance by community health workers facilitated both the creation and capture of knowledge.	(Fletcher-brown et al., 2020)	A qualitative study
2.	Network	High-speed networks played a pivotal role in improving the practices of knowledge-sharing.	(Almashmoum et al., 2024)	A mixed-methods study involving 56 and 29 of respondents from Kuwait Cancer Control Care and The Christie
3.	Digital library	Healthcare professionals in both cancer centers highlighted the prominence of the digital libraries in promoting knowledge exchange.	(Almashmoum et al., 2024)	A mixed-methods study involving 56 and 29 of respondents from Kuwait Cancer Control Care and The Christie
4.	Artificial intelligence (AI)	The study provided in-depth evaluations and recommendations to healthcare stakeholders in India regarding the usage of AI in improving clinical outcomes and knowledge management.	(Kumar, 2024)	A mixed-methods study with respondents comprising medical professionals of diverse levels of expertise from different units of medical
5.	The performance system	The performance system in the study referred to the competence of HIT to complete compulsory tasks accurately, efficiently, quickly. Data analysis revealed that the performance system was greatly associated with perceived dissatisfaction, where failed system performance increased the likelihood of dissatisfaction among nurses and physicians toward HIT.	(Alohali et al., 2020)	15 physicians and 15 nurses used in a qualitative study as a sample where it was taken across four different departments
6.	Privacy	The study found that privacy was a significant factor influencing Indian participants' willingness to share information with knowledge management repositories.	(Churi et al., 2021)	A quantitative study with a sample of 337 respondents, including healthcare researchers, physicians, practitioners, and patients.
7.	Technical barrier	The correlation between TEBA and resistance was strongly significant (0.89), with strong associations observed for technology availability (0.77), technology lifespan (0.83), similarity between new	(Alrahbi et al., 2020)	A quantitative study with a sample of 148 stakeholders across four main categories, which are healthcare providers, patients, United

No	Factor	Findings	Source	Methods
		and old systems (0.82), and the maintenance of (0.84). These findings indicated that perceived difficulties present a critical barrier. When stakeholders perceive technology as difficult to learn, use, or maintain, they are less likely to adopt it.		Arab Emirates (UAE) citizens, and prospective experts.

Individual-Related Factors
Personality

Individual personality acts as an important part in knowledge management (KM) practices. Certain personality traits influence the broaden to which individuals engage in processes of sharing, acquiring, and applying knowledge within organizations. This is consistent with the study by Laily et al. (2021), which indicated that the personality trait of agreeableness, encompassing tendencies toward cooperation and a people-oriented focus, can strengthen the relationship between knowledge self-efficacy and knowledge management. Individuals with higher levels of agreeableness tend to be more effective in sharing and managing knowledge (Laily et al., 2021).

From a practical perspective, understanding the role of personality in KM implementation has several implications. For hospitals, incorporating personality considerations into human resource management—such as recruitment, team composition, and training—can help foster a more collaborative knowledge-sharing environment. For example, team-based care models can be strengthened by balancing different personality traits to enhance communication and knowledge flow.

For policymakers, there is a need to support capacity-building programs that not only improve technical competencies but also promote soft skills such as collaboration, openness, and communication, which are closely linked to personality traits influencing KM. Policies that encourage continuous professional development and interprofessional collaboration can further strengthen KM practices.

For system developers, KM platforms should be designed to accommodate different user characteristics, including varying personality traits. Features such as user-friendly interfaces, personalization options, and both collaborative (e.g., discussion forums) and individual (e.g., knowledge repositories) functionalities can help ensure broader engagement across diverse users. Designing systems that reduce psychological barriers to participation—such as fear of criticism—can also encourage more active knowledge sharing.

Self-Efficacy

Self-efficacy, or an individual’s belief in their ability to do specific tasks, also plays a significant role in KM practices. High self-efficacy levels encourage individuals to be more active in sharing and managing knowledge within organizations. Research shows that self-efficacy in

knowledge exchange has a great impact on the knowledge exchange. Individuals with high self-efficacy tend to be more confident in sharing the information they possess, thereby enhancing the quality and effectiveness of KM within the organization (Sutanto, 2019).

Several individual factors, including self-esteem, trust, awareness, positive attitudes, and experience, also play crucial roles in the effectiveness of KM in organizations. The connection between each factor and KM can be described as follows:

- a. High self-esteem fosters greater confidence in knowledge sharing and management. Research shows that librarians with high self-esteem demonstrate positive attitudes toward KM and tend to be more collaborative within organizations.
- b. Both vertical trust (between employees and management) and horizontal trust (among colleagues) are essential for encouraging knowledge sharing. Higher levels of trust increase the likelihood of individuals sharing information, thereby strengthening KM practices in organizations.
- c. Individual awareness of the importance of KM influences their participation in related processes. Individuals who recognize the benefits of KM tend to be more proactive in sharing and utilizing available knowledge. Increasing awareness through education and training can reinforce KM practices.
- d. Positive attitudes toward KM encourage active engagement in knowledge-sharing and application processes. Such attitudes can be cultivated through fostering a positive mindset, which enhances adaptability and optimism when facing challenges.
- e. Extensive work experience provides individuals with valuable tacit knowledge. Experienced individuals tend to be more effective in sharing practical knowledge and solutions based on their experience, enriching the organizational knowledge base. In addition, experience can strengthen confidence and positive attitudes toward KM.

Organization-Related Factors

Various organizational factors, such as leadership, teamwork, communication culture, community of practice, learning and training, management support, high-performance human resource management, organizational culture, and organizational strategy, play critical roles in the effectiveness of KM. The relationship between each factor and KM can be described as follows:

- a. Effective leadership fosters a culture of knowledge sharing within organizations. Adaptive leadership styles enhance organizational capacity for learning and innovation (Churi et al., 2021).
- b. Solid teamwork reinforces knowledge sharing among members and improves overall team performance. An organizational culture that supports teamwork contributes to more effective KM practices.
- c. An open and transparent communication culture facilitates the flow of knowledge across the organization, enabling members to share information more effectively (Eva et al., 2024).
- d. Community of practice enables individuals with shared interests or expertise to exchange knowledge and experiences, thereby enriching the organizational knowledge base.
- e. Structured learning and training programs enhance employee competencies, enabling them to contribute more effectively to KM initiatives (Churi et al., 2021).
- f. Support from top management is vital for the success of KM initiatives, including the provision of resources and the establishment of strategic priorities (Eva et al., 2024).
- g. Human resource management practices that emphasize high performance, such as continuous training and reward systems, can increase employee motivation to share and apply knowledge.
- h. An organizational culture that values innovation and continuous learning fosters effective KM practices.
- i. Organizational strategies that are aligned with KM objectives ensure that knowledge initiatives expedite the achievement of broader goals of business.

By understanding and managing these factors, organizations can enhance the effectiveness of KM, ultimately contributing to improved performance and organizational competitiveness.

Technology-Related Factors

Various technological factors, such as information and communications technology (ICT), networks, digital libraries, artificial intelligence (AI), system performance, privacy, and technical barriers, play pivotal roles in the effectiveness of KM. The relationship between each factor and KM can be described as follows:

- a. ICT facilitates knowledge exchange by reducing spatial and temporal barriers among knowledge workers. Effective use of ICT can enhance individual motivation to share knowledge within the organization.
- b. Strong communication networks within organizations enable efficient information flow, thereby supporting KM processes by ensuring that knowledge is easily accessible and shareable among members. The integration of AI into communication networks can improve the efficiency and effectiveness of information flows.
- c. Digital libraries serve as knowledge repositories that can be used by members of the organization at any time. The integration of AI and data analytics within

- digital libraries can provide intelligent recommendations and refine search systems, thereby enhancing knowledge accessibility and utilization.
- d. AI can enhance KM processes by offering intelligent recommendation systems, in-depth data analytics, and automation of routine tasks, which allow individuals to focus on more strategic activities. The adoption of digital technologies and AI, mediated through knowledge sharing, can significantly improve organizational performance.
- e. Reliable system performance ensures that KM tools and platforms function effectively, enabling users to access and share knowledge without technical obstacles. Well-designed KM systems can draw from diverse knowledge sources to improve service performance, such as in help desk contexts.
- f. Protecting privacy in KM is essential for building trust among members of the organization. Concerns about security and privacy may affect the digital technologies and AI adoption within organizations.
- g. Technical barriers can hinder the adoption and effectiveness of KM initiatives. Overcoming such barriers, including inadequate technological infrastructure, is critical to ensuring that modern technologies can be effectively employed for knowledge sharing.

By understanding and managing these technological factors, organizations can strengthen the effectiveness of KM, ultimately contributing to enhanced performance and organizational competitiveness.

CONCLUSIONS

The successful implementation of knowledge management (KM) in healthcare organizations is influenced by a combination of individual, organizational, and technological factors. Individual factors such as self-esteem, trust, awareness, positive attitudes, and experience are key to promoting a culture of knowledge exchange. Holste and Fields (2010) demonstrated that high levels of trust among organizational members encourage tacit knowledge sharing. In addition, individual experience and positive attitudes enhance contributions to KM, particularly in healthcare contexts that require cross-disciplinary collaboration. Trust between organizational members is consistently identified as a key individual factor across various studies in implementing knowledge management in healthcare organizations.

Organizational factors, including leadership, teamwork, organizational culture, management support, and organizational strategy, establish the institutional framework that supports KM implementation. Effective leadership, as noted by Schein (2010), promotes a culture of innovation and continuous learning. Management support is also critical for ensuring the provision of resources and the establishment of strategic priorities in the application of knowledge management. In healthcare organizations, coordinated teamwork is particularly important for the sharing of both clinical and operational knowledge (Schein, 2010). Based on the analysis of the

synthesized studies, effective leadership is frequently highlighted in the literature as a key factor influencing the implementation of knowledge management in healthcare organizations.

Technologies such as ICT, digital libraries, AI, and network-based systems facilitate the management and distribution of knowledge. Alavi and Leidner (2001) emphasized that information technology enables efficient storage and retrieval of knowledge. However, aspects such as system performance, privacy, and technical barriers must be carefully considered to ensure that technology remains accessible, secure, and does not hinder knowledge-sharing processes (Alavi, Maryam Leidner, 2001). The availability of reliable information technology in healthcare organizations is an important factor that supports the implementation of knowledge management.

Implementing knowledge management in healthcare is not simply a technological challenge. The most consistent evidence points to the importance of organizational leadership in creating a culture of trust and the crucial role of individual attitudes shaped by perceived benefits and self-efficacy.

In the organizations of healthcare, the integration of these three factors is essential to improving service efficiency, accelerating knowledge-based decision-making, and ensuring the quality of patient care. Robust KM practices are necessary to support medical team collaboration, promote the sharing of best practices, and foster innovation in patient care.

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