DISSERTATION PROPOSAL

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"Essays on Organizational Learning Processes and Outcomes in Healthcare"

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An organization's capability to learn and adapt is an important source of its competitive advantage. Accordingly, scholars as well as practitioners have paid significant attention to understanding the factors that promote or hinder organizational learning. However, uncovering how certain factors affect organizational learning is not a simple task because a factor might influence learning outcomes through several different mechanisms. Furthermore, in some cases, a factor that facilitates one learning process might hinder another learning process. Thus, it is important to focus on the underlying processes of organizational learning to understand the antecedents of organizational learning better. In this dissertation comprised of three chapters, I propose to examine empirically various micro-processes that affect organizational learning outcomes. I specifically focus on the healthcare industry, given that organizational learning in this setting directly affects important outcomes such as patient care.

In Chapter 1, using archival data and semi-structured interviews on cardiothoracic surgeons, I examine whether individuals learn equally from all others' failures in organizations with seniority hierarchies. I first present the main finding that individuals learn from senior colleagues' failures but not from junior colleagues' failures. Then, I explore underlying psychological and cognitive mechanisms that may contribute to this main finding, such as individuals' attention allocation patterns, abilities to articulate knowledge, and self-enhancement motives.

In Chapter 2, I propose to understand how organizations' rate of accumulating experience affects organizational learning. Research on organizational learning curves generally finds that organizational performance improves as cumulative task experience increases. We know little, however, about what happens when the rate of accumulating experience slows down. On the one hand, accumulating experience slowly might improve learning by allowing organizations to process experience deeply. On the other hand, slowing down the rate of experience might lead to knowledge depreciation and reduced organizational performance. I propose to identify conditions under which each effect prevails, using archival panel data on U.S. community hospitals in three states from 2010 to 2015.

In Chapter 3, I propose to examine the effect of employing freelancers on the pace of new practice adoption in organizations. On the one hand, freelancers can be a source of new knowledge, which can facilitate the adoption of practices. On the other hand, freelancers may lack firm-specific resources or knowledge to implement new practices and may hinder practice adoption. Integrating these two forces, I hypothesize that organizations that rely on freelancers to a moderate degree will adopt new practices more quickly than organizations that rely heavily or lightly on freelancers. Exploiting a guideline release that recommended discontinuing a particular medical procedure, I plan to examine this hypothesis using archival data on New York state hospitals in which physicians work as freelancers across multiple hospitals.