Knowledge Management and Institutional Development in a Recessed Economy: Focus of Selected Medical Centres in Edo State, Nigeria

Carlice Imolore[1], Moye Evaristus[1], Dr. Musah Ishaq[1], Dr. Obomeghie Idris[2]

[1]Department of Business Administration and Management, [2]Department of Marketing,
[1,2]School of Business Studies, Auchi Polytechnic, Auchi, Edo State, Nigeria

ABSTRACT

Poor management of knowledge by the management of government owned institutions and establishments has immensely contributed to the current recession in the Nigerian economy has necessitated the determination of the nature of relationship that exists between knowledge acquisition and the competitive advantage of selected medical centres in Edo State. Survey research design was adopted for the study, a total population of 355 was used for the study, Krejcie and Morgan (1970) sampling technique was used for the study, the data collection tool employed by the researchers was the questionnaire, while the analysis of the data was done using the pearson product moment correlation coefficient analysis. The findings revealed that there is a strong positive relationship between knowledge acquisition and the competitive advantage of selected medical centres in Edo State. The researcher therefore concluded that the acquisition of more knowledge by doctors and nurses from knowledge based economies like India where their medical facilities are more sophisticated than that of Nigeria could impact the competitive advantage of the hospital where they work. It was against this backdrop that the researchers recommended that medical doctors and nurses of the institutions of study should be frequently sent on training programmes, including the money for training programmes in the annual budget of these institutions and partnership of these institutions with other medical centres overseas where their medical facilities are more sophisticated than that of Nigeria.

INTRODUCTION

Poor management of knowledge by the management of government owned institutions and establishments has immensely contributed to the current recession in the Nigerian economy. This is because knowledge management was not taken seriously by the management of these institutions. Olukoya (2016) asserts that government owned institutions in Nigeria has failed to enact and implement strong policies that will create an enabling environment for the acquisition/export of knowledge from knowledge based economies like India to Nigeria. This by extension has contributed to the export of the naira (changed to foreign currencies) used for the treatment of patients overseas.

Teng and Song (2011) asserts that it is no longer a controversy that we live in a globalised world characterized by fast information transfer across large geographic areas. The consequence of this globalization is the emergence of knowledge-based economies where importance is placed on effective management of human capital to ensure that workers continue to create the right value for the economy. Nowadays, economies of different countries no longer compete solely on the basis of financial capital and strength, rather knowledge is the new competitive advantage. In fact, the Gross Domestic Product (GDP) growth rare is now determined, amongst other factors, by the quantum and quality of knowledge stock harnessed and applied in all sectors of the economy (Riege, 2007).

There is a popular saying that knowledge is power. Based on this assertion, it can be said that the

management of knowledge by government owned medical centres in Edo State, Nigerian is the key to power knowledge management as a discipline has been a focal point of discussion over the past decades. In recent years, the importance of knowledge management has been widely recognized as the foundations of industrialized economies which shifted from natural resources to intellectual assets. Since 1995 there has been an explosion in the literature surrounding the developing concept of knowledge management. The importance of knowledge management is no longer restricted to knowledge intensive firms in the high-tech industries but to all sectors of the economy (Teng & Song, 2011). Zack (2003) asserts that even companies in the traditional industries, such as cement and plastic manufacturing firms can benefit greatly from knowledge management. In essence, knowledge management is beneficial to all sectors, be it educational, banking, medical, telecommunications, production/manufacturing, and even the public sectors.

The management of knowledge has generated considerable interest in business and management circles due to its capability of delivering to organizations, strategic results relating to profitability, competitiveness and capacity enhancement (Chua, 2009; Jeon, Kim & Koh, 2011). The management of knowledge is promoted as an important and necessary factor for organizational survival and maintenance of competitive strength. Knowledge management is identified as a framework for designing and institution's strategy, structures, and processes so that the institution can use what it has learnt and stored to create economic and social value for its customers and community. Nigerian government owned institutions need a good capacity to retain, develop, organize, and utilize their employees' capabilities in order to remain at the forefront, have an edge over competitors and affect the lives of the citizens positively. Knowledge and the management of knowledge is regarded as an important feature for institutional survival; while the key to understanding the successes and the failures of knowledge management within institutions is the identification of resources that allow institutions to recognize, create, transform and distribute knowledge. Institutions that effectively manage knowledge are more innovative and perform better (Riege, 2007).

For institutions to perform better, they must manage knowledge, develop plans so as to ensure the actualization of their set objective as knowledge management has been described as a key driver of organizational performance (Bousa & Venkitachalam, 2013), and one of the most important resources for the survival and prosperity of organisations (Teece, Pisano & Shuen, 1997; Kamhawi, 2012).

The attention and importance given to the acquisition of knowledge management in literature as well as practice in the past years is of necessity due to changes in the environment such as increasing globalization of competition, speed of information and knowledge aging, dynamics of both products, services, process innovations, and competition through buyer markets (Greiner, Hohmann & Krcmar, 2007). However, government owned medical centres in Edo State has failed to meet up with the demands of the ever changing environment as a result of their failure to apply various knowledge management techniques in their activities.

The institutions used for this study are the five government owned medical centres in Edo State:
1. University of Benin Teaching Hospital (UBTH), Benin-City, Edo State: A tertiary health facility that came into existence in 1973. It was established to compliment her sister institution, University of Benin to provide secondary and tertiary care to the then mid-western region (now Edo and Delta) and its environs.
2. Federal Neuro-Psychiatric Hospital, Benin-City, Edo State: Established in July 1963. It was established to provide friendly, specialized, qualitative psychiatry and rehabilitative care for the mentally ill.
3. Irrua Specialist Teaching Hospital, Irrua, Edo State (formally Otibhor-Okhae teaching hospital) was established in 1993. Located in Irrua, Edo Sate. It was established to provide secondary and tertiary health care to the people of Edo North and Edo Central.
4. Central Hospital/Specialist Hospital, Benin City, Edo State: A fully fledged hospital offering affordance treatment, rehabilitation and preventive health care programmes.
5. Stella Obasanjo Women and Children Hospital, Benin-City, Edo State: Established in March 2007. It was named by the Edo State government in honour of the former first lady of Nigeria Stella Obasanjo. It is located in country home road, Sapele Road, Benin-City, Edo State.

Statement of Problem
The non-prioritization of knowledge management by weak relevant government institutions has contributed to the current recession in the Nigerian economy. The government has failed to properly enact and

implement strong policies that will create an enabling environment for the export of knowledge from knowledge-based economies like India (Olukoya, 2016). This has negatively impacted the development of these institutions. A pilot study shows that the management of government owned medical centres in Edo State do not frequently send their employees outside the shores of Nigeria to acquire knowledge that can meet up with the ever changing demands of the environment. This attitude of not sending these medical personnel overseas for further studies impacts the competitive position of these institutions as they refer some of their patients overseas for treatment. The referring of patients overseas for treatment creates room for the export of the naira (changed to foreign currency) to countries overseas. The export of the naira overseas has contributed to the current recession that has plagued the Nigerian economy.

Objectives of the Study

The broad objective of the study is to determine the nature of relationship that exists between knowledge management and the institutional development of selected medical centres in Edo State, Nigeria. Specifically, this study seeks to ascertain the nature of relationship that exists between knowledge acquisition and the competitive advantage of selected medical centres in Edo State, Nigeria.

Research Question

What is the nature of relationship that exists between knowledge acquisition and the competitive advantage of selected medical centres in Edo State, Nigeria?

Research Hypothesis

Ha: There is a strong positive relationship between knowledge acquisition and the competitive advantage of selected medical centres in Edo State, Nigeria.

Review of Related Literature
Conceptual Review
Knowledge Management

Knowledge is described as an essential part of knowledge management. Baloh, Desouza, and Paquette (2011) assert that without having knowledge to manage, there would be no knowledge management, knowledge basically refers to a collection/or a body of information. This could mean that the information is embedded in the form of theories, processes, systems, or it could be voiced in form of opinions, theories, ideas and analysis. Knowledge is a complex concept that attracts many researchers of various disciplines, and practitioners. Different typologies have been developed but the only consensus is the notion that knowledge is more than just mere data and information. Wang and Noe (2010) defined knowledge as "information processed

by individuals including ideas, facts, expertise, and judgment relevant for individual, team, and organizational performance".

The concept of knowledge management is well captured by Abell and Oxbrow (2006), who liken knowledge management to beauty- found in the eye of the beholder. In fact, while some scholarly brows have been raised concerning these emingly faddish characteristics of knowledge management, certain other scholars have de-bunked this concern (Cranfield & Taylor, 2008; Rowley, 2000). Knowledge management is now accepted as being a strategy which organisations must adopt to survive in this era of knowledge economy. Knowledge management is the process of identifying, growing and effectively applying an organisation's existing knowledge in order to achieve the organisation's goals, while creating an organizational culture that permits further knowledge creation (Sunassee & Sewry, 2002). Knowledge management, as defined by Dalkir (2009), is the "deliberate and systematic coordination of an organisation's people, technology, processes, and organisational structure to add value through reuse and innovation". Knowledge management is achieved through creating, sharing, and applying knowledge, as well as through feeding best practices and the valuable lessons learned into corporate memory. This is in order to foster continued organizational learning. According to Kidwell, Vader Linde, and Johnson (2000), knowledge management is the process of transforming information and intellectual assets into enduring value and of connecting people with the knowledge that they need to take action when they need it. While a plethora of definitions exist for what constitutes knowledge management, it is evident that most of this point out that knowledge management involves leveraging knowledge toward the attainment of organizational goals and objectives.

Key attributes of Knowledge Management

Ruggies and Holtshouse (1999) identify the following key attributes of knowledge management: generating new knowledge; accessing valuable knowledge from outside sources; using accessible knowledge in decision-making; embedding knowledge in processes, products, and/or servicecs; representing knowledge in documents, databases, and software; facilitating knowledge growth through culture and incentives; transferring existing knowledge to other parts of the organisation; and measuring the value of knowledge assets and/or impact of knowledge management.

Individual and Collective Knowledge

Schoenberg (2001) asserts that there exist two levels of knowledge- individual and collective.

Individual knowledge: individuals construct knowledge by the means of their own interpretations, experience and perspectives. The individual knowledge refers to personal skills and capabilities (know-how) or to theoretical knowledge (know what), which is acquired through experience.

Organisational knowledge: It does not simply combine employees' knowledge, but is is seen as collective knowledge, which represents the various routine within a company and requires sharing and collaboration.

Classification of Knowledge
Koenig (2012) however describes this characterization of knowledge into explicit, implicit, and tacit knowledge.

Explicit Knowledge: It means information or knowledge that is set out in tangible form. Explicit knowledge is formal and systematic; it can be codified, collected, stored, and disseminated. It is knowledge that is created by externalization (visualization, articulation, or codification) of tacit knowledge. Explicit knowledge is the part of tacit knowledge that can be expressed verbally and does not represent the entire body of knowledge.

Implicit Knowledge: It is information or knowledge that is not set out in tangible form but cold be made explicit.

Tacit Knowledge: It is information or knowledge that one would have extreme difficulty operationally setting out in tangible form. Tacit knowledge is embrained knowledge and is at the ontological dimension in which its explication requires the use of metaphors and an extensive process of socialization. Sharing of tacit knowledge is made possible through networking among those who possess it.

Knowledge Acquisition
The acquisition of knowledge is defined as the process of exploiting and extracting ideas, thoughts, and creation by individuals to help transform an organisation into a dynamic organisation (Von Krogh, Kase & Gonzalez, 2013; Zahra & George, 2002). Knowledge is available thorugh various sources that may be internal or external. Employees subsequently transform these sources into new knowledge that will be beneficial to the organisation (Simatupang & White, 2010; Yu, Dong, Khalifa & Hao, 2013). Rapid changes in the environment and the specialization required by technological advancements are pushing organisations to use primarily external knowledge (Zhu, Wittmann & Peng,, 2011). Previous studies has shown that an organisation that is able to effectively develop the acquisiong of knowledge and consider it

as crucial task can achieve organizational benefits both in innovation and in operating results (Darroch, 2005; Nawaz, Hassan & Shaukat, 2014; Rahimi, Arbabisarjou, Allameh & Aghababael, 2011). The acquisition of knowledge has become a decisive factor for the improvement of employee training and leads to the strengthening of best practices in an organisation (Durst & Edvardson, 2012; Pal & Chang, 2013). The acquisition of knowledge has significant results that lead to competitive advantage, increased sales, new product development, adaptations and improvements in innovation processes (Kale & Karaman, 2012; Nawaz, Hassan & Shaukat, 2014; Sain and Wilde, 2014.

Institution Development
The international federation of surveyors (2008) sees institutional development as the enhancement of the capacity of an institution in order to perform their key functions effectively, efficiently and sustainably. Institutional development is aimed at an improved (and more durable/sustainable) embedding of development concerns the positioning of an organisation in its environment and defines objectives and activities to concentrate on. Institutional development is a process that cannot be accomplished successfully through single short term programmes. Institutional development is based on the concept that broad support is needed for successful development intervention (Norman, 1998).

Competitive Advantage
Firms that earn persistently higher levels of profit than competitors have a competitive advantage (Grant, 2008). A variety of theories within the strategy domain address competitive advantage as a way of explaining how management decisions or market factors lead to superior economic performance. According to Rayport and Jaworski (2004) to have a competitors for equivalent services or by providing unique services that a buyer is willing to pay for at a premium price. Using this definition, a given firm must devise a competitive strategy that is able to establish a profitable and sustainable position relative to competitors. Grant (2008) asserts that building unique and valued know-how and capabilities that rivals cannot easily imitate entails having a competitive advantage. Rayport and Jaworski (2004) assert that en organisation's interface with its customer is its sole aim of striving to gain a competitive advantage over its competitors. Walsh, Enz and Canina (2008) assert that when an organisation has a competitive advantage over ts competitors, it could positively affect the profitability of the organisation.

Theoretical Framework

This study is anchored on the knowledge management cycle model of Bukowitz and Williams (2000). This theory is built on the knowledge management cycle model of Meyer and Zack (1996).

Bukowitz and Williams (2000) describe a knowledge management cycle framework that outlines how organisations should generate, maintain and deploy a strategically correct stock of knowledge to create value.

In this framework, knowledge management process consists of having knowledge repositories, relationships, information technology, communication infrastructure, functional skill sets, process know-how, fundamental responsiveness, organizational intelligence and external sources. The knowledge management process is triggered by market driven opportunities or demands and they typically result in day-to-day use of knowledge to respond to these demands.

This study is anchored on the above theory because when and institution acquires a new knowledge required by its environment from an external source, such an institution will be able to have a competitive advantage over its competitors.

Empirical Review

Aliyu (2015) investigate the association between knowledge management and the performance of small and medium enterprises (SMEs). The study used a cross-sectional research design, questionnaire was employed to collect data from 278 owner/managers of manufacturing SMEs in Kano State, Nigeria. Partial least square (PLS) was employed, which reported a significant and positive relationship between the knowledge management and business performance of SMEs.

Agbim and Idris (2015) investigated the relationship between knowledge dissemination and competitive advantage (CA). the study adopted expost-facto research design and purposive sampling technique. Questionnaire was employee to collect data from employees of selected hotels in Makurdi, Benue State. Chi-square statistical method was employed to test the research hypothesis. It was found that knowledge dissemination is significantly related to competitive advantage. The researchers recommend increased knowledge dissemination via knowledge sharing and transfer among employees and between departments.

Nnabuife, Onwuka and Ojukwu (2015) examined the extent to which knowledge management improves the performance of selected commercial banks in Awka. The study employed descriptive research design; questionnaire was the data collection tool employed. Pearson product moment correlation was used to analyze the data. The findings reveal that there is a positive relationship between knowledge identification and organizational performance. It also reveals that knowledge acquisition has a positive effect on organizational performance.

Valdez-Juarez, Garcia-Perez de-lema and Maldonado-Guzman (2016) examined the ability of knowledge management to achieve small and medium-sized enterprise (SME) innovation and business performance. Regression analysis was used to analyze the data based on responses from the owners of 903 companies in industry, construction, services and trade in the Region of Murcia (Spain) through a self-directed survey. The results show that KM has a significant influence on innovation but the influence on the level of performance of SMEs is significant.

Mohamad, Mehrdad, Salman and Noruzy (2013) investigated the influence of knowledge management practices on organizational performance in small and medium enterprises (SMEs) in Iran, using structural equation modeling (SEM). A number of 282 senior managers from these enterprise were chosen, using simple random sampling. The finding showed that knowledge acquisition, storage, creation and implementation have a significant factor loading on knowledge management; and also productivity, financial performance, staff performance, innovation, work relationships, and customer satisfaction have suggest that knowledge management practices directly influence the organizational performance of SMEs.

Gruber and Paneva (2014) examined the process of knowledge transfer in mergers and acquisition in Swedish manufacturing firm. Interview was the data collection tool employed, qualitative method was used to analyse the collected data. Based on the findings, the study concludes that managers should understand the evolving nature of the knowledge transfer process and strengthen their focus on the planning phase of knowledge transfer in order to minimize the issues during the post-acquisition phase.

None of the empirically reviewed work have examined knowledge management as it relates to the development of government owned medical centres in Edo State, Nigeria and none of the reviewed used Krejcie and Morgan (1970) sampling techniques. This is the gap in knowledge that this study intends to fill.

Methods

Research Design

The research design adopted for this study is the survey research design. It was used because of the

nature of the study. Survey research design enables the researcher to observe what happens to the sample subjects without manipulating them.

Population of Study
The medical staff in the institutions of study was used for this study.

Table 1: Population of Medical Staff in the Institutions of Study

S/N	Institutions	Population
1	University of Benin Teaching Hospital (UBTH), Benin-City, Edo State	1,432
2	Federal Neuro-Psychiatric Hospital, Benin-City, Edo State	775
3	Irrua Specialist Teaching Hospital, Irrua, Edo State	1,144
4	Central Hospital/Specialist Hospital, Benin-City, Edo State	746
5	Stella Obasanjo Women and Children Hospital, Benin-City, Edo State	614
	Total	**4,711**

Source: Field Survey, 2021

Sample Size and Sampling Technique
The Krejcie and Morgan (1970) sampling technique was used for this study. The formula is denoted below:

$$S = \frac{\chi^2 NP(1-P)}{d^2(N-1) + \chi^2 P(1-P)} \ldots$$

Where: S = Sample size

χ^2 = Table value of chi-square for 1 degree of freedom 0.05 confidence level (3.84)
N = Population size (4,711)
P = Population proportion (0.5)
d = Degree of accuracy (0.005)

S = 3.84(4,711) (0.5) (1-0.5)/0.05^2 (4,711-1) + 3.84 (0.5) (1-0.5)

S = (9,045.12) (0.5)/11.775 + 0.96

S = 4,522.56/12.735

S = 355.13 = 355

Based on the above, 355 copies of the questionnaire was randomly distributed to the respondents in the institutions of study.

Instrument of Data Collection
The data collection tool employed by the researcher was the questionnaire. It was designed on a five point likert scale. Strongly Agreed (SD), Agreed (A), Strongly Disagreed (SD), Disagreed (D) and Undecided (U). It was used because it enables the collection of data from a primary source.

The Bowley's (1926) allocation formula was used to determine the copies of the questionnaire to be distributed to each institution. The formula is denoted thus:

Nh = n(nh)/N

Where: Nh = Number of units to be distributed to each group
nh = Number of respondents in each group
n = Total sample size\
N = Total population size

University of Benin Teaching Hospital (UBTH), Benin City, Edo State:
Nh = 355 (1,432)/4,711 = 508, 360/4,711
= 107.91 = 108.

108 copies of the questionnaire was randomly distributed to the medical staff of University of Benin Teaching Hospital (UBTH), Benin City, Edo State.

Federal Neuro-Psychiatric Hospital, Benin City, Edo State:
Nh = 355(775)/4,711 = 275, 125/4,711
= 58.40 = 58.

58 copies of the questionnaire was randomly distributed to the medical staff of Federal Neuro-Psychiatric Hospital, Benin City, Edo State.

Irrua Specialist Teaching Hospital, Irrua, Edo State:
Nh = 355(1,144)/4,711 = 406, 120/4,711
 = 86.21 = 86.

86 copies of the questionnaire was randomly distributed to the medical staff of Irrua Specialist Teaching Hospital, Irrua, Edo State.

Central Hospital/Specialist Hospital, Benin-City, Edo State:
Nh = 355(746)/4,711 = 264, 830/4,711
 = 56.21 = 56.

56 copies of the questionnaire was randomly distributed to the medical staff of Central Hospital/Specialist Hospital, Benin City, Edo State.

Stella Obasanjo Women and Children Hospital, Benin City, Edo State
Nh = 355(614)/4,711 = 217, 970/4,711
 = 46.3 = 47.

47 copies of the questionnaire was randomly distributed to the medical staff of Stella Obasanjo Women and Children Hospital, Benin City, Edo State.

Validity of the Instrument
Validity is the extent to which an instrument measures what it intends to measure. The content and face validity test was used by the researcher.

Reliability of the Instrument
This is a measure of the consistency of a particular instrument employed by a researcher. The Cronbach's Alpha reliability test was used for the study. Suwannoppharat and Kaewsa (2015) assert that a reliability coefficient of 0.696 and above is acceptable. Therefore, a threshold of 0.696 was used for the study.

Below is a summary of the reliability statistics for knowledge management and institutional development.

Table 2: Reliability statistics for knowledge management
Reliability Statistics

Cronbach's Alpha	No. of Items
.758	5

Source: Field Survey, 2021

Since the Cronbach's Alpha score of the reliability statistics for knowledge management 0.76 > 0.696, it shows that the instrument is reliable.

Table 3: Reliability statistics for institutional development
Reliability Statistics

Cronbach's Alpha	No. of Items
.731	5

Source: Field Survey, 2021

Since the Cronbach's Alpha score of the reliability statistics for institutional development 0.73 > 696, it shows that the instrument is reliable. The results of the reliability test were indications of the internal consistency of the instrument.

Method of Data Analysis
Pearson's product moment correlation coefficient was the inferential statistics used to analyze the data in order to ascertain the nature of relationship that exists between the dependent and independent variable. The level of significance was 5% while 95% confidence interval reliability was adopted.

Decision Rule:

Table 4: Correlation interpretation table

Value of Coefficient	Relationship between Variables
0.70-1.00	Very strong correlation
0.50-0.69	Substantial correlation
0.30.0.49	Moderate correlation
0.10-0.29	Low correlation
0.10-0.09	Negligible correlation

Source: Field Survey, 2021

Data Analysis and Test of Hypothesis

Table 5: Table of Returned and Unreturned Questionnaire

Items	Frequency	Percentage (%)
Returned Questionnaire (Valid)	314	88.45
Returned Questionnaire (invalid)	10	2.82
Unreturned Questionnaire	31	8.73
Total Questionnaire Administered	**355**	**100%**

Source: Field Survey, 2021

From the table above, it can be deduced that out of the 355 questionnaires, 314 (88.45%) valid questionnaires were returned. Thus, 314 copies of the questionnaires was used for the analysis.

Questionnaire items on knowledge management and institutional development

Instruction: **Strong Agree = SA; Agree = A; Strongly Disagree = SD, Disagree = D, Undecided = UD.**
Please tick (✓) as it represents your view

S/N	Questionnaire item for independent variable- Knowledge Acquisition	SA (5)	A (4)	SD (3)	D (2)	UD (1)	MEAN
1	Frequently sending of doctors and nurses in hospital for further studies in countries where their medical facilities are more sophisticated than that of Nigeria will benefit your hospital.	11	192	4	3	1	4.32
2	Partnering with hospitals overseas in terms of knowledge exchange will benefit your hospital.	72	213	13	12	4	4.07
3	You would perform your job better when you acquire new knowledge from a training program overseas.	85	178	20	28	3	4.00
4	Cross fertilization of ideas with medical centres overseas is a welcomed development	145	84	36	44	5	4.02
5	Funds should be allocated for the development of doctors and nurses in your annual budget	94	114	47	53	6	3.75

S/N	Questionnaire item for Dependent variable- Competitive Advantage	SA (5)	A (4)	SD (3)	D (2)	UD (1)	MEAN
1	Your hospital will be a place where everybody will like to come for treatment when you have quality doctors and nurses.	103	138	42	30	1	3.99
2	Your organisation's monthly income will increase when patients chose your hospital instead of hospitals overseas.	82	117	62	48	2	3.70
3	The importation of more sophisticated medical equipments would foster the effectiveness of the medical personnel in your hospital.	63	193	23	35	0	3.90
4	You are dissatisfied with the medical equipments in your hospital	95	107	60	51	1	3.78
5	You would like your hospital to be number one in Nigeria.	77	165	37	32	3	3.89

Source: Field Survey, 2021

Test of Hypothesis

Ha: There is a strong positive relationship between knowledge acquisition and the competitive advantage of selected medical centres in Edo State, Nigeria.

Correlations

		Knowledge Acquisition	Competitive Advantage
Knowledge Acquisition	Pearson Correlation Sig. (2-tailed) N	1 314	.931[**] .000 314
Competitive Advantage	Pearson Correlation Sig. (2-tailed) N	.931[**] .000 314	1 314

**Correlation is significant at the 0.01 level (2-tailed)
Source: Field Survey, 2021

Discussion of Findings

Findings of the study have shown that there is a strong positive relationship between knowledge acquisition and the competitive advantage of selected medical centres in Edo State, Nigeria. This corroborates the work of Agbim and Idris (2015). They assert that knowledge dissemination impacts an institutions competitive advantage. In other words, knowledge disseminated to others by doctors and nurses on their return from overseas, could impact the competitive advantage of their organisation. The findings is also in line with the work of Valdez-Juarez, Garcia-Perez de-lema and Maidonado-Guzman (2016). They opine that innovation can impact the performance level of an organisation. When nurses and doctors acquire knowledge by going for further training overseas, they become innovative and this can enhance the competitive advantage of their organisation. Finding form the test of the formulated hypothesis is also in line with the work of Gruber and Paneva (2014). They assert that knowledge transferred from outside the organisation into the organisation could impact the competitive advantage of the organisation. The findings of the study also corroborate the work of Aliyu (2015) who asserts that knowledge management impacts an organisation's performance. This could be achieved when knowledge needed by the organisation is acquired from an external source and this could by extension impact the competitive advantage of the organisation.

Summary of the Findings

The result shows that P-value (0.000) < 0.01 (at a 2-tailed test). This means that the result is statistically significant at 5% confidence level. The r-value 0.931 (93%) shows that there is a strong positive relationship between knowledge acquisition and the competitive advantage of selected medical centres in Edo State, Nigeria.

Conclusion

Based on the findings, the researcher concludes that there exists a strong positive relationship between knowledge acquisition and the competitive advantage of selected medical centre in Edo State, Nigeria. This

implies that the acquisition of more knowledge by doctors and nurses from knowledge based economies like India where their medical facilities are more sophisticated than that of Nigeria could impact the competitive advantage of the hospitals where they work.

Recommendations

The researcher makes the following recommendations based on the findings of the study;

1. Frequently sending of doctors and nurses for training in knowledge based economies like India where their medical facilities are more sophisticated than that of Nigeria by the management of the government owned medical centres in Edo Sate, Nigeria.

2. Federal/States Government should include money required for the sending of doctors and nurses on training programmes in their annual budget.

3. Partnership with medical centres in knowledge based economies where their medical facilities are more sophisticate than that of Nigeria by government owned medical centres in Edo State, Nigeria.

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