

## **The socio-pragmatics of organisational knowledge: An inquiry of managing eldercare knowledge**

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### **1 Introduction**

Is a knowledge management (KM) perspective a viable way to develop public administration? Is it a way to promote e-government? These are crucial questions with no straightforward answers. Knowledge management as a perspective and a field involves many controversial issues. KM has been criticized by many scholars (e.g. Quintas et al, 1997; Hildreth & Kimble, 2002) for conceiving knowledge as an object or commodity. KM may be seen as management and scientific fad just as many preceding approaches (Gray & Meister, 2003). When researching public administration and e-government, the notion of organisational knowledge is of course of great significance. How people create, transfer and utilize knowledge in governmental settings are important issues, either we conceive them to be part of knowledge management or if we dissociate ourselves from this KM perspective.

Much criticism towards KM is made from a pragmatic standpoint (e.g. Cook & Brown 2002; Wyssusek et al, 2001; Goldkuhl & Braf, 2001; Hargadon & Fanelli, 2002). The close link between knowledge and action should be acknowledged. Organisational knowledge is closely related to organisational action. Regular organisations do not create and maintain knowledge as a purpose of its own. Knowledge is created and maintained if and when it possibly will *make a difference* in the activities of that organisation. This insight, emanating from pragmatic philosophy (e.g. Dewey, 1931), seems however to be ignored in many KM discussions. The pragmatic dimension of knowledge is well described by Berger & Luckmann (1966 p 56) who emphasise this pragmatic connection: "Since everyday life is dominated by the pragmatic motive, recipe knowledge, that is, knowledge limited to pragmatic competence in routine performances, occupies a prominent place in the social stock of knowledge".

Steps have been taken to connect organisational knowledge to organisational action in public administration KM (e.g. Friis, 2002; Lenk, 2002). There are needs for further steps to be taken. In doing this, the relation and interaction between conceptual reflection and empirical investigation should be acknowledged. I think that much KM suffers from philosophical ignorance, as well as superficial and methodologically weak empirical studies. Studying organisational knowledge in public administration must start with a reflective stage how to conceive knowledge. When contesting knowledge as an object that easily can be transported in the organisation, other

alternatives have been put forth; e.g. knowledge as a process and knowledge as a flow. Such metaphors may have some value, but I think that they direct our conception away from a proper and usable conception of knowledge. To me, knowledge is an *attributive phenomenon*. Knowledge is what is known by someone. In this sense it belongs to someone, a human actor who is knowledgeable. Knowledge can be shared. It can be made inter-subjective, mainly through the use of language (Berger & Luckmann, 1966). It is the use of language, which makes it possible to view knowledge as “object”. Knowledge is espoused in linguistic utterances. These utterances can be written or recorded in other ways and stored for future retrieval. Linguistic manifestations in this way may be treated as “objects”, but we must not forget that they are signs (of knowledge) and not knowledge per se. Knowledge is expressed and codified in linguistic utterances. The transfer of knowledge must pass stages of semiosis, i.e. transformations between knowledge and sign; i.e. from knowledge to sign and from sign back to knowledge (Stamper, 2001). We cannot take for granted that such processes of semiosis, (which in other more ordinary words are processes of communication between locutors and addressees) will lead to identical knowledge between those people involved. If we should talk about knowledge management at all we should be aware that this involves managing *what is known* by human actors and *what is communicated* through signs and language. It should also be added with emphasis that such management of the known and the communicated must not be separated from other *organisational actions* that utilise and may create knowledge and signs (Goldkuhl & Braf, 2002).

A way not to forget this indispensable link between knowledge and action is to characterise knowledge in a pragmatic way. I will in this paper make an inquiry into organisational knowledge. This inquiry will be made with the primary purpose to investigate the action character of organisational knowledge. This will be done in an abductive way (Alvesson & Sköldbberg, 1999; Goldkuhl & Cronholm, 2003). I will scrutinize data from a case study concerning management of organisational knowledge. I will use empirical data from this case (development of municipal eldercare) and do this in an inductive way. The pragmatic perspective will be used but no specific categories will be forced upon the data. The inductively generated categories will be related to concepts of actions and pragmatic knowledge.

This study will lead to empirically based categories concerning organisational knowledge and based on this an elaboration of a socio-pragmatic perspective on organisational knowledge. This way of doing it will take us through different theoretical layers when performing analytic generalisations (Yin, 1989). There is a first layer of theorizing concerning the substantive<sup>1</sup> area of eldercare management (with a special emphasis on its knowledge management). The next layer can be seen to be management of knowledge in public administration. The third layer goes beyond the substantive layers of eldercare and public administration. It is a general theory layer of organisational knowledge. This means that this study aims to contribute to

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<sup>1</sup> I build on the distinction between substantive and formal theories made by Glaser & Strauss (1967). A substantive theory is concerned with a substantive area (e.g. eldercare). It is possible to go beyond substantive areas and generalise to what they (ibid) call “formal” problems. I do not however find “formal” to be an adequate term. It is rather a matter of different degrees of generalisations and also addressing problems and issues that is more general and which transcends specific substantive areas. A more general theory is less substantive, in the meaning that it is less concerned with particular substantive areas. It is more focused on specific cross-substantive issues.

these different theoretical layers. I will not explicitly relate to these theoretical layers in my discussion. The point I want to make is that that my results can be seen to belong to these different layers.

In my inquiry of organisational knowledge, I adopt an interest for details, for specific knowledge types. Perhaps, I can be accused for looking at trivial details in eldercare service. From my pragmatic stance I assert that details make a difference (Rescher, 2000; Goldkuhl, 2004). I think that much of the problems with a too abstract knowledge management is actually an ignorance of decisive details. I am not saying that all details matters, but I am saying that if something is considered important, it is so because it consists of details that make difference. I do not remain on a detail level; I want to dig into the essential. In what ways does this detail make a significant difference? What is the organisational role of this “detail”? I am trying *to see the large in the small*.

## **2 A socio-pragmatic perspective**

The perspective I adopt in this study is socio-pragmatic. This means that social actions are what is considered to be of prime importance. The socio-pragmatic perspective will be used in my analysis. It will help me to raise questions, however without forcing specific categories onto the empirical material. I will try to be both open-minded and theoretically informed when pursuing the empirical analysis, which is in accordance with the abductive way of performing data analysis as described above (sec 1).

The pragmatic stance is that knowledge is clearly related to action (Dewey, 1931). It is therefore significant to clarify human action and its social context. I start with a fundamental model of human action presented by Mead (1938). He makes a division into several phases of an act. There are four stages of an act (ibid): The stages of impulse, perception, manipulation and consummation. The first two stages are associated with trying to work out the possibilities of acting. What are the circumstances in the environments? In what ways is it possible to act? The third stage is the intervention in the environment. The fourth stage involves an evaluation of the outcome of the intervention. The first two stages can be integrated to a stage of *pre-assessment*. The actor perceives the environment and considers different action possibilities. After the *intervention*, the actor makes a *post-assessment*. Did he succeed with his intentions? Were there expected results and effects of the performed intervention? If the actor was not content, this post-assessment can shift to a new pre-assessment before the next intervention is made.

One crucial question concerning the action model is whether all the phases should be considered as one action or if there are three successive actions of pre-assessment, intervention and post-assessment? Giddens (1984) describes human action as a continuous flow, a *durée*. A human being is constantly in an active mode; sometimes more active and sometimes less. Viewing action in this way is consistent with regarding acting as a continual cycle of pre-assessment, intervention and post-assessment. I can agree to this, but I would also like to add that there are many situations in which actors themselves as well as fellow-actors and observers easily will delimit a piece of doing as a distinct action. Humans produce things and changes in the world. They make utterances and they change material objects. When there is a

distinct result of some doing (e.g. an utterance made, an object moved or changed in some other distinct way) it is appropriate to delimit this as a specific action. In these cases, we have the intervention in focus. Must an intervening action always involve pre- and post-assessment? This depends of course on how we want to conceive, discuss and analyse the doing; i.e. the kind of language game we are involved in (Wittgenstein, 1958). An action is what we for some reasons decide to view as an action. What we can learn from Mead's model is that human acting is cyclic and consists of perceiving and intervening stages. Sometimes it might be appropriate to include pre- and post-assessment in one specific action (for reasons of analysis) and in other situations it might be appropriate to distinguish them as three distinct acts (e.g. when pre-assessment and post-assessment consists of inquiries more than a instantaneous perception).

In his model of human action, Giddens (1984) also emphasises that the actor *continuously monitor* his own actions as well as the reactions from the environment. We do not cease to perceive when intervening. For example when driving a car it is essential to be constantly watchful when manoeuvring the car. There is an integral and simultaneous monitoring during intervening actions. I put these things together and present a cyclic model of action in figure 1. This means also that I presume perceiving and interpretation as acts. Intervening is aiming at change in the external world and interpreting (and also reflecting) aims at changing our inner world; our knowledge about something (Goldkuhl, 2003).

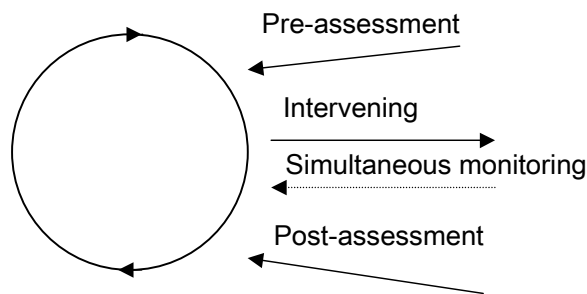
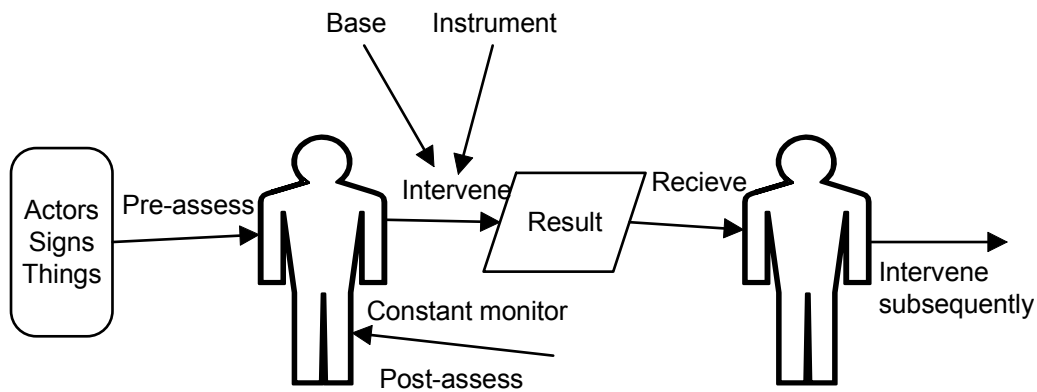


Figure 1 A cyclic model of action

There is no obvious social character of this model. This needs to be added. Weber (1978 p 4) made a classical definition of social action: "That action will be called 'social' which in its meaning as intended by the actor or actors, takes account of the behaviour of others and is thereby oriented in its course". My interpretation of this definition is that a social action (performed by an actor) has *social grounds* ("takes account of the behaviour of others") and *social purposes* ("thereby oriented in its course"). The social grounds relate to the pre-assessment. There is some social impetus for acting. There can for example be someone communicating to the actor. The social purposes relate to intervention and post-assessment. The actor tries to make socially relevant changes in the world (in intervention) and he evaluates if he has succeeded in doing this (post-assessment). A social action is thus directly or indirectly addressed to one or more other people. When communicating (speaking or writing) an actor is obviously directing his actions to other persons.

A social action model is elaborated in Goldkuhl & Röstlinger (2003). I build on this model here, but make some adaptations in accordance to the discussion on different

action stages made above. Figure 2 depicts a (modified and simplified) model of social action. The pre-assessment is done through perception of situations, which may consist of other actors, signs and things. This social situation functions as an *initiative* for the actor to *respond* (i.e. intervene) in some way (Linell, 1998; Goldkuhl & Röstlinger, 2003). The intervention is made by a possible use of some material or immaterial instrument and also possibly transforming some object (base) into an action result. This result can be either material or communicative (i.e. signs); confer Goldkuhl (2001) about a discussion on material vs communicative social actions. The result is, as said above, directed towards some other actor(s). This other actor receives the result and he may act based on this result in some way, in a subsequent intervention.



*Figure 2 A model of social action  
(modified and simplified from Goldkuhl & Röstlinger, 2003)*

The intervention is based on a *situational* pre-assessment, i.e. an observation of the situation in which the actor shall possibly intervene. We can however also talk about a *trans-situational* pre-assessment (Goldkuhl & Braf, 2001). The actor can bring knowledge and received initiatives from another situation (another time and place) into the actual acting situation.

Knowledge is used in all three stages of social action. Knowledge is used to assess the situation before intervention. Knowledge is used in action when intervening, and knowledge is of course also used when post-assessing the results and effects of the intervening action. Based on Mead's action model, Morris (1964) has made a semiotic characterisations of "stimuli" related to the different stages. These semiotic characterisations can be transformed to types of knowledge. Following Morris, the first stage (of pre-assessment) needs *designative* knowledge, i.e. knowledge about what kind objects there are in the environment. The intervening stage needs *prescriptive* knowledge, i.e. ways to perform actions. The post-assessment stage needs *appraisive* knowledge; i.e. knowledge concerning appraisal of the outcome of the action.

### **3 Aspects of organisational knowledge – learnings from a case study on eldercare**

#### ***Case study approach***

I will present an analysis of results from a case study on development of municipal eldercare. It was an action research based case study involving development of IT-system. The collaboration project had an explicit purpose and a particular focus on improvement of knowledge utilisation and knowledge transfer. One can consider the change project to be a workpractice development with special emphasis on knowledge and IT issues. Data generation in the case study has been pursued with different qualitative research methods: Interviewing directors and nursing assistants, observation of their work, collection and analysis of several documents, participation in development seminars. A closeness to the empirical phenomena was necessary in order to gain reliable data. A participatory approach has been taken, including active cooperation with the staff at the home care unit. Experiences from the case study have been reported in several papers earlier. Experiences from the IT development work has been reported in Cronholm & Goldkuhl (2002a,b). The inquiry concerning knowledge utilisation has been described earlier in Goldkuhl & Braf (2001) and Goldkuhl and Röstlinger (2002). I will build on these analyses here.

#### ***Introductory description of the eldercare setting***

The home care service consists of different kinds of support for the elders in their homes. The nursing assistants help the elders with dressing, daily hygiene, food, minor medical tasks, cleaning, laundry, shopping etc. Normally, an elder is visited by a nursing assistant several times each day.

One main objective for the home care service is the individualisation of the home care. To perform home care is not a standardised service. Each client has individual needs and therefore the tasks that will be performed for the different clients varies. The needs for each client will also vary over time. The home care unit strives for maximum individualisation. The elders should be able to live their lives in their own desired ways. The nursing assistants should support the clients in their living. In order to do this there is a great need for knowledge. The nursing assistants must have a good understanding of every person, about their personal life history, their current social and medical situation and their habits and needs. This partially changing knowledge must be transferable to all members of the home care team since there is not one single assistant who takes care of a particular elder.

The core knowledge for the eldercare unit is thus the knowledgeability of the nursing assistants. They need to be knowledgeable in order to perform individualised service of high quality. The knowledge must thus be practical. The nursing assistants must adapt their actions not only to the elders but also to other nursing assistants, since there may be other assistants rendering elder-service in antecedent and subsequent visits. The home care work is not just one single individual helping another single individual. It is taking place in an institutional frame with contracts between the elder and the municipality and based on regulations on both municipal and state level. The nursing assistants must be knowledgeable about these different circumstances in order to act in competent ways in their service duties.

### ***The inquiry of organisational knowledge***

The analysis of knowledge in the case study was centred around two types of knowledge. There was knowledge about incidents i.e. something that had happened to an elder. Such knowledge was mediated formally through the care journal and informally by oral communication or handwritten notes. There was also knowledge about tasks to be performed. This was mediated through weekly and daily schedules and also in some cases through oral communication or handwritten notes. For each elder there was also an individual care plan, which expresses the general agreement for care of the elder. The individual care plan could be seen as an operationalization of the contract between the elder and the eldercare unit. The individual care plan consists of references to services (on a rather general level) to be performed for the elder. These care plans are used as bases for making up weekly and daily schedules.

The case study consisted of two stages. First there was a reconstructive analysis of the current workpractice. This was mainly performed by the researchers, but validated and agreed upon by the eldercare staff. Secondly, there was a development of IT-system and new procedures in the workpractice. This was performed through a collaborative action research project.

In both these stages, there was a focus on these knowledge types. In the initial reconstruction, it became obvious that these two types of knowledge were pivotal in the workpractice. This became evident both through interviews and the significant roles the different documents (mediating these types of knowledge) played in the workpractice. The main purpose of the new IT-system was to support the knowledge sharing between different members of the staff. Before we started the development process, there was a deliberate prioritizing of different knowledge types. The joint development team gave highest priority to incident knowledge (managing care journal) and task knowledge (managing schedules).

I will focus the analysis on these two knowledge types. They are pragmatically important in the eldercare practice, which can be shown through both the empirical analysis of the current workpractice (the reconstruction phase) and development decisions made in the design phase.

### ***Knowledge about service tasks to be performed***

The analysis will be made from the socio-pragmatic perspective articulated in section 2 above. This means that I will view these knowledge types in an explicit social action context. I start with task knowledge. The nursing assistants should give adequate and expected services to the elders. What they do in the residences of the elders depends on both situational and trans-situational knowledge. The services made to the elders are intervening actions and these are based on some pre-assessment. The nursing assistant will of course observe the actual care situation and listen to certain demands of the elder. The service interventions may be responses to such observations and requests of the elder. The home care service is, however, not to be reduced to mere situational responses. To a large degree it depends on trans-situational knowledge. Before the nursing assistant leaves the home care unit, she checks the daily schedule and other notes in order to be sure of what tasks to be performed. The knowledge she gets from reading these formal and informal notes directs her later actions when she is

attending to the elder. The schedules tell the nursing assistant what service actions to perform. The schedules and its mediated task knowledge are *future oriented*. They refer to actions to be performed.

The knowledge of a nursing assistant in a service situation, concerning appropriate actions to take, may be built from at least three sources: (1) Her own memorized experiences from earlier service encounters, (2) situational knowledge gained from current observations and oral requests, and (3) trans-situational knowledge mediated from spoken and written messages (e.g. the schedules). These different knowledge items are amalgamated in the knowledge-in-action of the nursing assistant. Her trans-situational knowledge about tasks to be performed will be used not only for her intervening acts, but also in order to pre-assess the home care situation (“is there an actual need to perform this prescribed task?”) and to post-assess the accomplished actions (“did I attain what was expected?”).

### ***Relational knowledge***

If the trans-situational task knowledge is further scrutinized, are there more aspects to be disclosed? The knowledge mediated through schedules is not only a referential knowledge about future actions to be performed. Being a schedule, gives it a particular *organisational status*. Through the schedule certain tasks are *prescribed* – “these are the tasks to be performed if there are not situational reasons to omit”. The task knowledge is thus not anything that the nursing assistant finds out by herself. When something is written in the daily schedule, there follows a *conditional obligation* to perform such tasks. When she has, in a kind of pre-assessment act, studied the schedule she obtains not only *referential knowledge* about possible tasks to perform, but also *relational knowledge*<sup>1</sup>. This is an exhortation for her to perform the service tasks. What is written in the daily schedule is not just to be seen as a demand to nursing assistants to perform certain tasks. If one traces this knowledge back, it has an origin in the individual care plan (see above), which as a *contract* expresses the *commitments* made to the elder. What is transformed to and operationalised in the daily schedule should be seen as a part of the organisation’s commitment to its clients. The daily schedule does not only say what possibly to do (possible future acts). It also says “this is what we have to do and you should do it” (i.e. acts which the organisation are committed to perform and as a consequence of this a directive towards employees to perform these acts). The knowledge, which is mediated, by the very fact of being expressed in the schedule, is of *contractual* and *directive* nature. This insight follows clearly from what we can learn from language action theories (e.g. Searle, 1969; Habermas, 1984). In these theories, there is a differentiation made concerning an utterance between its propositional content (what is talked about) and its illocutionary force (what the locutor does in relation to the addressee). When talking about the knowledge gained by an organisational member through reading documents (with a specified organisational status) or communicated in other appropriate ways, I prefer to talk about referential knowledge (corresponds to propositional content) and relational knowledge (corresponds to illocutionary force).

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<sup>1</sup> The distinction between referential and relational knowledge was part of the conclusions in Goldkuhl & Röstlinger (2002), which consisted of a prior analysis of knowledge utilisation in this case study. I will bring this analysis further here.



If we generalise this insight emanating from the analysis of this specific knowledge type, a rather radical view emerges. Management of organisational knowledge is not only about managing referential knowledge, i.e. knowledge about “objects and processes”. Management of organisational knowledge should also involve management of relational knowledge. And these two knowledge aspects should not be separated. They are integrated parts of knowledge items. Relational knowledge can involve knowledge about agreements, assignments, commitments, requests, judgements, permissions, obligations, regulations and other norms.

### ***Knowledge about incidents – no relational knowledge?***

But are there not cases with pure referential knowledge? If we turn our interest towards the care journal reporting incidents, what can be learnt concerning this knowledge type? Is not the care journal just a description and consequently only referential knowledge is efficacious here and there is no existence of relational knowledge? Let us use this as a kind of hypothesis when investigating knowledge about incidents.

This is a knowledge type concerning the *past*; what did happen during some visit at a particular elder. A nursing assistant can remember different incidents concerning an elder from her earlier visits. If she keeps this by herself, this will be just intra-subjective knowledge. The interest here is on knowledge, which may be deployed in the organisation. Far from everything observed at the elders are shared and made inter-subjective in the organisation. Only that knowledge which is deemed to be valuable is transferred. Relevance is a key criterion for transfer of such historical knowledge. Not everything counts as an incident to be reported. There are judgements made by the nursing assistant what to report to her colleagues. Some trivial knowledge, but anyhow worth to report, may be narrated to her close colleagues. Other, more important matters are formally reported in the care journal. The nursing assistants are obliged, by the Welfare Law, to report important incidents in the care journal. One example of this can be an injury observed by the nursing assistant and measures taken by her. In the care journal, there are usually descriptions of observations made and measures taken. This means that there is a report of assessments and interventions, in terms of the action model described in section 2.

Before a nursing assistant enters a shift, she is obliged to read the journal concerning those elders, which she is going to visit. This is done in order to see if something important has happened since her last visits. This is to be seen as some kind of pre-assessment. She gets *orientation knowledge*. This kind of retrospective knowledge is however also prospectively useful. It assists her to *sharpen attention* during visits. If there was an earlier injury, what has happened to this? The knowledge of an earlier incident directs attention in a situational pre-assessment when visiting the elder. Certain measures (interventions) can be taken, which perhaps not would have been taken if she had been ignorant of the earlier incident. The journal note may implicitly convey: “Be attentive and be extra responsive to the situation!” The care journal does not inform the nursing assistant of certain actions to be performed, as the schedule does. However, it functions as a *direction indicator*. The attention of the nursing assistant should be directed towards certain areas. The journal is not as distinct concerning future tasks as the schedule, but the communication force of it is not just a historical notice. It has a prospective force concerning future attention.

This is to define parts of the journal's organisational role; how it, through documentary communication, relates earlier home care visits to future visits. The discussion so far has been concerned with referential knowledge (report of incidents and measures) and how it might influence future assessments and interventions. There is no definitive directive of future action; so can it be said to involve any relational knowledge? In the journal there must be a note on *who* reports the incident. This makes it possible to ask this person about more information. It makes also the journal note *organisationally valid*. Not anyone can write in the care journal. Only those who are explicitly permitted to do so may do so. A journal note is not only a "report of something happened", it is an "organisationally sanctioned report of something happened which also should be given further attention to". An incident reported in the care journal is part of the eldercare unit's legally-based commitment to strive for individualised home care. A journal note makes the nursing assistants more knowledgeable and attentive to the time-varying needs of the elders.

There is not as clear relational knowledge in the incident knowledge, mediated through the care journal, as the task knowledge mediated by the schedule. But anyhow, there is relational knowledge associated with this incident knowledge. It is said by a colleague, which means that it should be seen as an organisationally trustworthy message. Institutionally, it is an *attention-marker* made by one employee directed towards other employees. There is an (organisational) difference if a nursing assistant knows about an incident through a care journal note or if she hears it from someone else, e.g. someone outside the organisation. This would not mean that she ignored such a message and was not attentive, but she might treat it in different ways. Who conveys knowledge, and in what role and with what purposes, has consequences for people's knowledgeability. Knowledge, which is organisationally mediated through the care journal, is something that the nursing assistants ought to know and they are expected to consider this knowledge in future actions. Knowledge, even if it is a historical description (as it is in this case), has a relational aspect if it is mediated through organisationally institutionalised communication patterns. It is important for a knowledgeable organisational actor *to know how she knows what she knows*. The validity of a piece of knowledge is dependent on the ways she has obtained that knowledge. Has she obtained that knowledge through *communication that is organisationally institutionalised* or through some informal way? I am not saying that the informally mediated knowledge must be less accurate. It can be more close to truth, but it is for organisational actors important to distinguish between these modes of knowledge acquisition. What I know is dependent on how I got to know this, and thus my knowledge about how and from whom I got to know it.

There are other reasons for documenting the incidents in the care journal than those accounted for above. To have a documentation of incidents and measures taken based on these incidents are important in relation to the clients and to representatives for the clients, e.g. relatives. It is a way to make the organisation (i.e. the eldercare unit) more accountable in relation to its clients. If a client asks questions concerning performed measures or default measures, then answers can be given more easily when a good documentation is held. This aspect of the incident knowledge (upheld by the care journal) is obviously relational. It is part of the eldercare unit's accountability in relation to its client: "This is what we have seen and done when taking care of you".

### ***Situational task knowledge – only referential knowledge?***

Above I formulated a question (hypothesis) whether organisational knowledge could be solely referential and include no relational part. I took an example (consisting of descriptive knowledge of the past), which might be a counter-case. My conclusions from the investigation made above is that this kind of knowledge (incident knowledge) consists of relational parts. I could not refute the hypothesis by this example of trans-situational knowledge.

I will take other examples to test this hypothesis. I return to the other knowledge type, task knowledge. I will not further discuss the trans-situationally mediated knowledge (through schedules). My interest will instead be on situational task knowledge, i.e. knowledge obtained during situational pre-assessment (observing the elder and her residence or listening to requests or complaints of the elder). Can any relational knowledge be associated with such knowledge of possible tasks to be performed? Utterances made by the elder, certainly contain a relational aspect. A request of a task to be performed involves references to tasks (propositional content) and a request regulation between the elder and the nursing assistant (illocutionary force). But how about observational knowledge, obtained through perceiving the elder and her environment? Can this type of knowledge be seen to contain any relational aspect? There is nothing intentionally communicated to the nursing assistant, which means that there is no associated illocutionary force (relational mode). Can a mere observation really include any relational mode? Let us look closer to this kind of knowledge. Observed and identified needs, is based on the nursing assistant's intention to be attentive. This intended attention is not anything she has "invented" by herself. It has an origin in the eldercare unit's role assignment given to her; "To be a nursing assistant means that you should be attentive to needs of the clients". There are thus certain social expectations associated with her assessment of the elder, which includes both observations and conclusions made concerning possible measures to be taken based on the observations. She makes these assessments in her role as an organisational actor with certain social expectations associated with this role. The knowledge about the need situation and tasks to remedy is based on this role knowledge. "I know this, because I am expected, by the eldercare directors to know such things".

This means that it is possible to associate relational aspects even to observational knowledge. The examples I have investigated from this case study show all that relational aspects are associated with different organisational knowledge items. The conclusions from this case study would thus be that relational aspects seem to be inherent in organisational knowledge besides referential knowledge.

### ***The constituents of relational knowledge***

What should we mean by relational knowledge? What subcategories can be found in relational knowledge? From the analysis of the empirical data, I would like to state the following to be possible parts of the relational knowledge: (1) Knowledge about the *originator* of the knowledge or parts of it. This can be a locutor, communicating something or it can be the knower herself as an observer. A certain knowledge item can be an amalgamation of knowledge from different sources, which means that there may be different originators. (2) Knowledge about the intended or actual *addressee* of

the knowledge. When something is communicated, there is some intended addressee<sup>1</sup> of this message. The knower will probably have knowledge about if the acquired knowledge was intended for her or not. (3) Knowledge about *social expectations* associated with the knowledge item. Accompanying with some knowledge there are certain social expectations associated with it. There can be specific expectations concerning specific actions to be performed by the knower/actor. There can be more open expectations about the role of the knower or the organisation she is part of. There can for example be certain commitments made by some actor or the organisation or some framed norms. (4) Knowledge about the *acquisition mode*. This is knowledge about how the knowledge has been acquired. Is it result of an intentional communication? Is there an organisationally institutionalised form of communication, e.g. some known and established type of documents used as a communication instrument? Or has the knower herself observed something without any knowledge mediation from others? Knowledge about the acquisition mode is knowledge about the way knowledge has been acquired.

These four parts of relational knowledge are well integrated. They are usually held together as an integrated whole. For example, when a nursing assistant is reading a schedule, she acquires relational knowledge (of these four types), which is also associated with the referential knowledge of certain tasks to be performed. She may read that she is the intended addressee (and performer of service tasks). She reads the daily schedule (the acquisition mode) and by this she knows the certain expectations that are associated with this institutionalised type of document and she may also know who was the originator (in most cases the planner of the home care team).

Relational knowledge is socio-pragmatic in the sense that it originates from social actions performed in the organisational setting. There is an actor who has obtained some knowledge. This acquisition is often based on social actions of other actors (e.g. the making of a schedule). The obtained piece of knowledge retains also knowledge about this obtaining. Knowledge about a prescribed action (e.g. a service task to be performed) is considered as a valid organisational knowledge when this is communicated to the actor in a proper way. This relational aspect also makes the knowledge accountable. If a nursing assistant is asked why she has performed a specific service task, she may explain: "I did it because it was in the schedule". If this relational link is forgotten, the actor may be uncertain concerning the *legitimacy* of the knowledge. The relational aspect of knowledge is concerned with knowledge legitimacy. How do I know this? In what way have I got to know it? Who has said it?

As said many times above, relational knowledge is not separated from referential knowledge. It is an integral part of the piece of knowledge. Relational knowledge determines the validity of referential knowledge. Is this knowledge organisationally legitimate to apply? To make this kind of assessment of possible knowledge utilisation, it is necessary to have relational knowledge.

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<sup>1</sup> This does not mean that it is always a known particular addressee. There may be unspecific addressees, but in such cases, there is at least an idea about possible addressees and in what roles they will interpret the message. Notes in a care journal could be such an example, where the locutor does not exactly know who will read the note. It is written to anyone who may be concerned.

### ***The socio-pragmatics of referential knowledge***

The main focus has so far been on relational knowledge. Through this relational aspect of knowledge, its socio-pragmatic character becomes evident. In the examples given above, it is however obvious that the referential part of the knowledge is also socio-pragmatic. The task knowledge consists of knowledge about actions (what service tasks to perform), intervening actors (which nursing assistant should perform the task), receiving actors (which elder, who should receive the care) and also other pragmatic aspects (where and when to perform the tasks). The incident knowledge may also involve socio-pragmatic knowledge even if the primary is the report of some non-intentional event. Accompanying the report of the incident, there is a mentioning of what measures that were taken and by whom. In this case of eldercare, it is obvious that much referential knowledge is socio-pragmatic, i.e. it is knowledge about actions and actors and other action properties. There might of course be other types of organisational knowledge, where the socio-pragmatic character of referential knowledge is less obvious.

## **4 Concluding remarks**

What can we learn from this case study and the theorizing on organisational knowledge? How can we use the kind the knowledge that has emerged? The main contributions of this paper are

- The division of organisational knowledge into relational and referential knowledge
- The emphasis of the socio-pragmatic character of organisational knowledge
- The four constituents of relational knowledge
  - Originator
  - Addressee
  - Social expectations
  - Acquisition mode

These conclusions could remind both researchers and practitioners of the relational and socio-pragmatic character of organisational knowledge. Organisational knowledge is not to be considered as easily transportable objects. There are relational aspects inherent in organisational knowledge that need to be taken account of. An ambition to de-personalise organisational knowledge when expressing it and putting it into some “knowledge repository” seem to be hazardous. An objectifying and de-personalising way to treat knowledge could be the exclusion of knowledge about originators, potential addresses and relational mode (including intentions and expectations).

The case study of eldercare knowledge has been an important driving force for this theorizing, but also the socio-pragmatic perspective articulated in section 2. The results are obviously valid for eldercare knowledge; however, my aiming for analytic generalisations takes them beyond this kind of substantive area. The regulated character of public administration in general, makes it likely that my conclusions are valid in these contexts. I think it is reasonable to expand these conclusions to managing organisational knowledge in general. There is of course a need for future inquiries in different settings, public administrations as well as commercial settings to investigate the applicability of these categories and distinctions.

## References

- Alvesson M, Sköldbberg K (1999) *Reflexive Methodology: New Vistas for Qualitative Research*, Sage, London
- Berger P L, Luckmann T (1966) *The social construction of reality*, Doubleday & Co, Garden City
- Cook N, Brown JS (2002) Bridging epistemologies: The generative dance between organizational knowledge and organizational knowing, in Little S, Quintas P, Ray T (Eds, 2002) *Managing knowledge. An essential reader*, Sage, London
- Cronholm S, Goldkuhl G (2002a) Document-driven systems development - an approach involving novice users, accepted to *UKAIS 2002*, Leeds
- Cronholm S, Goldkuhl G (2002b) Actable Information Systems - Quality Ideals Put Into Practice, in *Proc of the 11<sup>th</sup> International Conference on Information Systems Development*, Riga
- Dewey J (1931) *Philosophy and civilization*, Minton, Balch & Co, New York
- Friis C (2002) Knowledge in Public Administration, in *Proc of 3<sup>rd</sup> Workshop on Knowledge Management in Electronic Government (KMGov2002)*, Copenhagen; <http://falcon.ifs.uni-linz.ac.at/KMGov2002/>
- Giddens A (1984) *The constitution of society. Outline of the theory of structuration*, Polity Press, Cambridge
- Glaser B, Strauss A (1967) *The discovery of grounded theory*, Aldine, New York
- Goldkuhl G (2001) Communicative vs material actions: Instrumentality, sociality and comprehensibility, in Schoop M, Taylor J (Eds, 2001) *Proceedings of the 6<sup>th</sup> Int Workshop on the Language Action Perspective (LAP2001)*, RWTH, Aachen
- Goldkuhl G (2003) Patterns of change and action: a socio-pragmatic perspective on organisational change, In Sundgren B, Mårtensson P, Mähring M, Nilsson K (Eds, 2003) *Exploring Patterns in Information Management: Concepts and Perspectives for Understanding IT-Related Change*, Stockholm School of Economics, Stockholm
- Goldkuhl G (2004) Meanings of pragmatism: Ways to conduct information systems research, accepted to *the 2<sup>nd</sup> Int Conf on Action in Language, Organisations and Information Systems (ALOIS-2004)*, Linköping University
- Goldkuhl G, Braf E (2001) Contextual knowledge analysis - understanding knowledge and its relations to action and communication, in *Proceedings of the 2<sup>nd</sup> European Conference on Knowledge Management*, IEDC-Bled School of Management, Slovenia
- Goldkuhl G, Cronholm S (2003) Multi-grounded theory – Adding theoretical grounding to grounded theory, in *Proc of the 2<sup>nd</sup> European Conference on Research Methods in Business and Management (ECRM 2003)*, Reading
- Goldkuhl G, Röstlinger A (2002) The practices of knowledge – investigating functions and sources, in *Proc of the 3<sup>rd</sup> European Conference on Knowledge Management (3ECKM)*, Dublin
- Goldkuhl G, Röstlinger A (2003) Towards an integral understanding of organisations and information systems: Convergence of three theories, in Gazendam H WM, Jorna R J, Cijssouw R S (Eds, 2003) *Dynamics and Change in Organizations. Studies in Organizational Semiotics*, Kluwer, Boston
- Gray PH, Meister DB (2003) Introduction: Fragmentation and integration in knowledge management research, *Information Technology & People*, Vol 16, No 3, pp 259-265

- Habermas J (1984) *The theory of communicative action 1. Reason and the rationalization of society*, Polity Press, Cambridge
- Hargadon A, Fanelli A (2002) Action and possibility: Reconciling dual perspectives of knowledge in organizations, *Organization Science*, Vol 13, No 3, pp 290-302
- Hildreth PJ, & Kimble C (2002) The duality of knowledge, *Information Research*, Vol 8, No 1, Available at <http://InformationR.net/ir/8-1/paper142.html>
- Lenk K (2002) Relating Knowledge Management in the Public Sector to Decision-Making and Administrative Action, in *Proc of 3<sup>rd</sup> Workshop on Knowledge Management in Electronic Government (KMGov2002)*, Copenhagen; <http://falcon.ifs.uni-linz.ac.at/KMGov2002/>
- Linell P (1998) *Approaching dialogue. Talk, interaction and contexts in dialogical perspectives*, John Benjamins Publ, Amsterdam
- Mead G H (1938) *Philosophy of the act*, The university of Chicago Press
- Quintas P, Lefrere P, Jones G (1997) Knowledge management: A strategic agenda, *Long Range Planning*, Vol 30, Iss 3, June, pp 385-391
- Morris C (1964) *Signification and significance*, MIT Press, Cambridge, Mass.
- Rescher N (2000) *Realistic pragmatism. An introduction to pragmatic philosophy*, SUNY Press, Albany
- Searle J R (1969) *Speech acts. An essay in the philosophy of language*, Cambridge University Press, London
- Stamper RK (2001) Organisational semiotics. Informatics without the computer, in Liu K, Clarke RJ, Andersen PB, Stamper RK (eds., 2001) *Information, organisation and technology. Studies in organisational semiotics*, Kluwer Academic Press, Boston
- Weber M (1978) *Economy and society*, University of California Press, Berkeley
- Wittgenstein L (1958) *Philosophical investigations*, Basil Blackwell, London
- Wyssusek B, Schwartz M, Kremberg B (2001) Knowledge management – a sociopragmatic approach, in *Proceedings of the 2<sup>nd</sup> European Conference on Knowledge Management*, Bled
- Yin R K (1989) *Case study research. Design and methods*, Sage, Newbury Park