

# Communities of Practice

BY MARY KATHRYN GRANT, PhD

**S**ynchronicity is the belief that some disparate and seemingly random events are connected by a common thread of meaning or relatedness. Recently a few divergent ideas converged as they sometimes do, synchronously. These random events and ideas coalesced into an innovative notion of workplaces, one in which "communities of practice" are created and nurtured.\* At first the ideas do not appear connected one to another, yet further reflection reveals a common thread of meaning for leadership development initiatives.

## WHAT ARE COMMUNITIES OF PRACTICE?

Communities of practice are informally organized groups of people, described by Etienne C. Wenger as the "social fabric of knowing." They are composed of persons who have a shared interest in a particular issue and who commit to building relationships in which they intend to share and increase knowledge. This knowledge includes such topics as in-depth issue analysis and successful practices. These groups are most frequently cross-functional and multidisciplinary and often composed of persons who do not work together on a daily basis.

At recent invitational symposium hosted by Catholic Healthcare Partners, Cincinnati, Wenger, an international authority on communities of practice, described possible applications of the notion, which is increasingly popular among businesses.

A community of practice is aimed at improving both the work product and the work environment—in this case by managing knowledge. A definite link exists between communities of practice and continued learning and leadership development.

For our purposes—relating communities of practice to leadership development—the critical factors contributing to this notion's success are:



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- A passion for a particular issue (spiritual leadership, mission integration, leadership formation, or sponsorship evolution, for example)

- A commitment to sharing experiences, knowledge, and dreams

- A commitment to building relationships among selected community members

In a single-workplace situation, this practice can easily be integrated into a process such as mission discernment. It can also be incorporated in systems that have common and collective endeavors, such as ministry leadership development for physicians and development programs for the next generation of sponsors. The notion can also be applied to efforts intended to address medical errors or clinical pathways or to improve access to health services for the poor in a single community. The applications are limitless. Wenger described innovative projects that ran the gamut from efforts by the World Bank to curb violence in cities to team development at the Veterans Administration.

Communities of practice are different from teams, networks, and work groups. Teams are generally created around projects or tasks; they are bound by time frames and defined by "deliverables" or goals. Networks are looser organizations not bound by strong commitments. Work groups tend to be like teams in that they coalesce around a project or task with a defined schedule or timetable. Communities of practice, however, are much more fluid; they are generally composed of individuals who contribute at various times, in different ways and roles, according to their unique expertise.

In elaborating on his research into and study of this development, Wenger cited seven design principles that are vital to success:

- "Shepherd the evolution"
- Encourage internal leadership
- Weave private and public space
- Invite multiple levels of participation
- Find rhythm between familiarity and excitement
- Build momentum
- Develop both communal and personal identity

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\*The notion of "communities of practice" will be further developed in an article by Jon Abeles in a subsequent issue of *Health Progress*. A description of communities of practice appeared in the *Harvard Business Review*, January-February 2000, pp. 139-145.



## MINISTRY LEADERSHIP

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Musing on how communities of practice might affect our health care ministry might give us an opportunity to envision a new way of uniting for a common cause: the future of the ministry. If "shepherding the evolution" is critical, senior leadership might reflect on some advice offered by management guru Kenneth Blanchard. A recent interview with Blanchard quotes him as saying, "Among other things, I'm the chief spiritual officer of our company. I'm in charge of vision and values and energy . . ."<sup>1</sup> As "chief spiritual officer," Blanchard delivers an inspirational message to employees every morning. Seeing how his role relates to vision and energy could show us ways in which senior leaders might encourage communities of practice in their own organization and might show the ministry itself how to shepherd energy and stimulate visioning.

Couple these thoughts with the parting advice of one of America's most successful leaders, and we get a formula for leadership development. Jack Welch, former CEO of General Electric, was interviewed by one of the major networks on his final day at that company and stated that the most critical factor in his success was "continuous learning." The CEO as "chief spiritual officer" and the need for continuous growth and development neatly tie in with the notion of communities of practice.

Communities of practice provide an incubator for new and untried ideas. Perhaps we in Catholic health care could adopt the idea of communities of practice in the various strategies and endeavors around which we have both passion and passionately committed persons. □

### NOTES

1. A. J. Vogl, "Taking the B.S. Out of Behavioral Science," *Across the Board*, May/June 2001, p. 37.

*The Ministry Leadership column is intended to evoke response, debate, and dialogue. Positive and negative reactions to this column are welcomed and invited, as are topics for further consideration. Please address all correspondence to the editor at [hpeditor@chausa.org](mailto:hpeditor@chausa.org).*

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