

## Communities of Practice



### Goals

The goal of a Community of Practice is to provide a space and opportunity, whether face-to-face or virtual, for shared learning and inquiry among professionals.

### Practice Features

Wenger (2011) defined a Communities of Practice as *“groups of people who share a concern or a passion for something they do and learn how to do it better as they interact regularly.”* Wenger further reported that Communities of Practice were identified by three characteristics: (a) shared domain of interest; (b) members who “engage in joint activities and discussions, help each other, and share information. They build relationships that enable them to learn from each other”; and (c) a sense of practice (shared resource, experiences, tools, advice, guidance, etc.).<sup>i</sup>

By participating in a Community of Practice, providers gain from each other’s knowledge and experience in a mutually supportive environment, thereby advancing their own knowledge and practice as well as that of their Community of Practice peers and the profession.

The Communities of Practice studied in the research consulted for this review each used designated facilitators.

### Target Audience

Early care and education professionals

### Communities of Practice Snapshot

- **EC Profile Indicators:**
  - PLA40 - Average Star Rating for Children in 1-5 Star Care and Percent of Children in 4 and 5 star care or
  - PLA50 - Average Star Rating for Subsidized Children in 1-5 Star Care and Percent of Subsidized Children in 4 and 5 star care
  - EDU 10 - Percent of children enrolled in 1-5 star centers that have at least 75% of lead teachers with college degrees
  - EDU 20 - Percent of children enrolled in 1-5 star centers that have directors with college degrees
- **Research supports** use within the early childhood professional community
- **Related Smart Start outcomes:**
  - Improved teacher/director knowledge
  - Improved ECE program environment
- **Training required:** Yes, typically for the facilitator
- **Frequency:** Generally once a month or more

## Documented Outcomes

	Type of Study	Improved provider attitudes	Improved practices*	Improved trust among participants
Haine-Schlagel et al. (2013) <sup>ii</sup>	Non-experimental	✓	✓	
Thornton & Cherrington (2014) <sup>iii</sup>	Non-experimental, case studies			✓

*This table contains outcomes found to be associated with the program or approach. Individual studies may contain additional outcomes that were tested and not found to be associated with the program or approach.*

\*Aligned with Smart Start outcome *Improved ECE program environment*

## Research Evidence for Communities of Practice

- A small case study of four communities of practice suggests that the practices of the professional leader and the level of relational trust among the members of the group have an impact on the effectiveness and sustainability of Professional Learning Communities (PLCs).<sup>iv</sup>
- Participants responded positively in an examination of learning communities in the mental health arena with reported changes in attitudes, and individual and organizational practices.<sup>v</sup>

## Review of Experimental and Quasi-Experimental Studies

None

## Review of Meta-Analyses

None

## Review of Descriptive and Non-Experimental Studies

<b>Citation</b>	Haine-Schlagel, R., Brookman-Frazee, L., Janis, B., & Gordon, J. (2013). Evaluating a learning collaborative to implement evidence-informed engagement strategies in community-based services for young children. <i>Child Youth Care Forum, 42</i> , pp. 457–473.
<b>Population and Sample</b>	<ul style="list-style-type: none"> <li>• 29 providers from four hospital-based early childhood intervention programs in teams of 5-11 members; 26 provided demographic information:               <ul style="list-style-type: none"> <li>○ 26 females ranging in age from 23 to 49</li> <li>○ 42% Caucasian, 35% Hispanic/Latino, 23% African American, Asian American, mixed, or other</li> <li>○ 38% with Bachelor's degrees or less, 50% with Master's, 12% with Doctorates</li> </ul> </li> </ul>
<b>Methodology</b>	Non-experimental
<b>Purpose</b>	This study on examined the feasibility and effectiveness of using the Breakthrough Series Collaborative-based learning collaborative (LC) to implement evidence-informed attendance engagement strategies in community-based early intervention programs. The study utilized a train-the-trainer model and the LC was facilitated by a trainer certified on the attendance engagement intervention over a 9-month period.
<b>Measures &amp; Assessments</b>	<ul style="list-style-type: none"> <li>• Pre Learning Collaborative (LC) Survey</li> <li>• Participant Perceptions of the LC Process: Satisfaction</li> <li>• Participant Perceptions of Impact on Client Attendance: Perceived Improvement on</li> <li>• Attendance</li> </ul>

	<ul style="list-style-type: none"> <li>• Participant Attitudes Towards EBPs: Modified Practice Attitudes Scale (MPAS)</li> <li>• Participant Adoption of TIES Strategies: Self-Reported Practice Changes</li> <li>• Team Fidelity to TIES Strategies: Plan-Do-Study-Act Form (PDSA)</li> <li>• Participant Plans to Sustain Practice Changes</li> <li>• Team Plans to Sustain Practice Changes</li> </ul>
<b>Study Implementation</b>	<ul style="list-style-type: none"> <li>• Providers received a one-day collaborative-based training in evidence-based practices, including evidence-informed attendance engagement interventions, using Training Intervention for the Engagement of Families (TIES). The training was available to all employees from four early intervention programs.</li> <li>• Following the training, LC teams were selected by program leaders and monthly meetings were held to encourage systematic implementation of the TIES strategies. The meetings involved 3 action cycles consisting of a 3-hour learning session and 2 1-hour check-in sessions held over a 9-month period. Participants were required to attend the learning sessions in person but had the option to attend the check-in meetings in person or by phone. Learning sessions included training on improvement strategies and methods for implementing and sustaining organizational change, opportunities for programs to examine their current processes and develop ideas and plans to implement changes, and opportunities to provide feedback to each other. Check-in sessions included progress reporting and opportunities for participants to provide feedback and troubleshoot challenges. LC teams submitted monthly Plan-Do-Study-Act reports to the LC facilitator.</li> <li>• A Google Group was established for cross-program sharing and feedback.</li> <li>• A pre LC Perceptions Survey and a measure of attitudes about EBPs were completed by 26 of 29 participants at the first LC learning session. Both surveys were completed at the end of the LC by 22 of 27 participants.</li> <li>• Team Fidelity to TIES Strategies: Plan-Do-Study-Act Form (PDSA) was submitted monthly to the LC facilitator.</li> </ul>
<b>Staff Qualifications</b>	<ul style="list-style-type: none"> <li>• The first author was a certified trainer and a paid consultant of Danya International, owner of the TIES training and LC implementation protocols. The first author co-conducted the training with Dr. McKay and independently facilitated LC.</li> </ul>
<b>Key Findings</b>	<ul style="list-style-type: none"> <li>• Early intervention providers engaged in the learning collaborative, which was associated with improvements in attendance and an increase in attitudes towards EBPs.</li> <li>• 82% of participants reported improvement in family attendance as a result of LC.</li> <li>• Post MPAS scores were significantly higher at the end of the LC, indicating improved participant attitudes about EBPs.</li> <li>• 91% of participants reported that they had improved their approach to engaging families as a result of the LC. The most common changes in individuals include an increased focus on collaboration and alliance with parents and caregivers (e.g., encouraging parent and caregiver participation in decision making and goal setting, tailoring services to the family, having patience and focusing on the individual), improved clarity of communication with families, and being receptive to parent and caregiver feedback and trying new strategies. Organizational level changes include improving data collection and reporting and changes to policies and procedures (e.g., consistency across staff/sites, streamlining processes) to support parent and caregiver engagement.</li> <li>• All participants reported they were likely to continue the change in approach to interacting with families.</li> </ul>

<b>Citation</b>	Thornton, K., & Cherrington, S. (2014). Leadership in professional learning communities. <i>Australasian Journal of Early Childhood</i> , 39(3), pp. 94-102.
<b>Population and Sample</b>	35 teachers from 18 sites in four Professional Learning Communities
<b>Methodology</b>	Case studies
<b>Purpose</b>	The study focused on leadership in different models for professional learning communities (PLCs) in the early childhood profession. The goal of the study was to explore the factors that contribute to effective PLCs in early care and education, particularly organizational and structural factors, as key influences on the effectiveness of PLCs including leadership.
<b>Measures &amp; Assessments</b>	<ul style="list-style-type: none"> <li>• PLC blogs</li> <li>• Individual reflective journal entries and online discussions</li> <li>• Pre/post online surveys</li> <li>• Group interviews</li> </ul>
<b>Study Implementation</b>	<ul style="list-style-type: none"> <li>• Four PLCs were formed and facilitated over a period of six months. Two involved one facility with all members of the teaching team focused their action research on an area of interest to their</li> </ul>

	<p>facilities. The other two were 'cluster' PLCs that included teaching staff from several different facilities. These PLCs focused on the interest of the researchers, with one being leadership and the other being reflective practice.</p> <ul style="list-style-type: none"> <li>• All four PLCs met regularly and worked on action research projects between meetings. A research assistant was available to provide support, take meeting minutes, video-record practice, and collect observational data. Meeting notes and final group interviews were transcribed.</li> <li>• Each PLC established a Moodle site with related resources, discussion forums for documenting the action research process, blogs, and reflective journal entries (only accessible to individual PLC members and the researchers).</li> <li>• All data were content analyzed for patterns and themes relating to leadership practice.</li> </ul>
<b>Staff Qualifications</b>	<ul style="list-style-type: none"> <li>• Participating services were required to have all teachers qualified and registered.</li> <li>• This study involved two researchers and one research assistant.</li> <li>• Head teachers or managers served as professional or designated leaders.</li> </ul>
<b>Key Findings</b>	<ul style="list-style-type: none"> <li>• Survey results indicated that shared leadership and relational trust increased through participation in the PLCs.</li> <li>• Professional leader support is necessary for the effective functioning of PLCs and for embedding any change in practice.</li> <li>• The study highlighted the importance of several factors on the effectiveness of PLCs: <ul style="list-style-type: none"> <li>○ Sharing a learning focus</li> <li>○ Cultivating involvement and distributed leadership</li> <li>○ Nurturing respectful, trusting relationships</li> <li>○ Promoting collaborative inquiry</li> <li>○ Ensuring supportive structures</li> <li>○ Drawing on external facilitators and critical friends</li> </ul> </li> <li>• The authors cautioned that findings from this small-scale case study into leadership in PLCs cannot be transferred to other ECE contexts</li> </ul>

## End Notes

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<sup>i</sup> Wenger, E. (2011). *Communities of Practice: A Brief Introduction*.

<sup>ii</sup> Haine-Schlagel, R., Brookman-Fraze, L., Janis, B., & Gordon, J. (2013). Evaluating a learning collaborative to implement evidence-informed engagement strategies in community-based services for young children. *Child Youth Care Forum*, 42, pp. 457–473.

<sup>iii</sup> Thornton, K., & Cherrington, S. (2014). Leadership in professional learning communities. *Australasian Journal of Early Childhood*, 39(3), pp. 94-102.

<sup>iv</sup> Ibid

<sup>v</sup> Haine-Schlagel, R., Brookman-Fraze, L., Janis, B., & Gordon, J. (2013). Evaluating a learning collaborative to implement evidence-informed engagement strategies in community-based services for young children. *Child Youth Care Forum*, 42, pp. 457–473.

Note: Research summaries could include verbiage directly reproduced from the research literature. Quotes and italics may be used to show a direct quote but not always.

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