LEARNING UNCUT EPISODE 14: COMMUNITIES OF PRACTICE – EMELIA WINTER

Karen Moloney: Hi and welcome to another episode of Learning Uncut. I'm Karen Moloney.

Michelle Ockers: And I'm Michelle Ockers.

Karen Moloney: Today we're talking to Emelia Winter, who is a learning development specialist for eHealth New South Wales, where she's created an active community of practice for their internal L&D consultants. Welcome to the podcast, Emelia.

Emelia Winter: Hello, everybody.

Karen Moloney: So Michelle, I know this is a space that you love working in, so do you want to get us started?

Michelle Ockers: Yeah, thanks Karen. I do love communities of practice. I think they're very valuable if facilitated well, and excited to talk to Emelia about this community of practice. Emelia, your community of practice grew out of a project working group in New South Wales health. To provide background, can you briefly describe the purpose of the original working group, and who the people in the group were?

Emelia Winter: So to answer that question, we probably just want to talk a little bit about the history of New South Wales health and eHealth, which is the IT arm that I work in. We only just sort of started getting online learning happening in the last couple of years. That was what that working group was initiated for, so we tried to get learning managers across the state together so that we could have a look at, from a state perspective, what kind of online learning do we need for the IT systems that we have? That's what that working group was there for.

Emelia Winter: Once we finished that project, we sort of I guess matured, or moved towards a community of practice so that we could keep that communication going between each of the training managers across the state.

Michelle Ockers: So apart from just keeping everybody connected and talking, what were you hoping to achieve out of the community of practice?

Emelia Winter: There was a lot of disjointedness across the state. It's broken down into 13 different what we call local health districts, and each of those local health districts will have a project training manager who's rolling out new IT projects, as well as a business as usual training manager as well, who's maintaining all of those new projects. So you're looking at about 26 training managers across the state. No one was talking to anybody else, and everyone was just developing the same sort of content, but slightly different for each of their areas. There was a lot of silos. We were hoping with that community of practice to kind of break down those silos, and start getting everyone to share what they were doing and stop a lot of this recreation of content and of approaches when we could really just be taking from each other and slightly editing.

Michelle Ockers: Okay, so that really encapsulates the purpose of the community. Thinking about stakeholders other than those community members, the training managers across the 13 districts, I firstly: apart from the training managers, are there any other participants or members of the community?

Emelia Winter: Because the structures across the districts can be slightly different, sometimes it might be a change manager who's more of a decision maker in this, in these kinds of roles for training. Sometimes it will be a training manager, sometimes it's really a trainer. They don't actually have a training manager. Also from a clinical perspective, we have what's called clinical nurse educators, so nurses who are on the floor who work as educators but are also training from a software simulations perspective as well, so that the clinicians can use the software to complete their practice. We'll have a lot of those people inside that, and then just anyone else who maybe wants to know what's going on in that learning space for this software as well.

Michelle Ockers: Fantastic. Apart from community members, when we think about who are the other stakeholders, whose support did you need to set up the community and how did you go about getting that support?

Emelia Winter: Right, so because it's sort of like my time that needs to be used to actually support the community, essentially I had to go to my initial managers and our project manager as well to say, "Look. This is something that we want to do. This is the time and the effort that it actually is going to take, and here's some of the benefits that we see out of that." Once we had our own project manager buy-in, we then actually had to send out letters to each of the districts because they all act independently to what we do. I sort of act as a consultant rather than actually a manager or an influencer directly. Once those letters had gone out to chief executives of each of the local health districts, it kind of filtered down from there. That was just to kick off the initiation.

Emelia Winter: As we've progressed and evolved, I think we've probably lost a little bit of that stakeholder buy-in, because we're just sort of happening, I guess. I think I've talked before a little bit about how can we kind of keep that stakeholder buy-in as you progress, because when you want to start to initiate some new changes or new ideas, you kind of need to re-initiate with them or still have that buy-in so that they can sport you as you put new processes into place. So it was a great kickoff to have that, but we have lost it as we've evolved.

Karen Moloney: Just going back to the point that this actually started as a working group and has developed into a community of practice, can you just clarify for us what the difference is between a working group and a community of practice?

Emelia Winter: So from our point of view the working group was put into place to use subject matter expertise to specifically complete a project. In our case, it was the online learning, so we used all of these subject matter experts to identify what the requirements were and how we were going to do this project and use their input as we built it. Once that project was finalized, we sort of moved into a

community of practice so that we could continue to get people to share their lessons learned, whatever else they're doing in their local health districts as well as build capability across the state, so everyone is kind of on a similar path.

Karen Moloney: Yeah, so it's kind of like just going from ... the implementation is over now, how do we maintain and support those people to carry on doing what they're doing?

Emelia Winter: Yeah, exactly. We've evolved a lot from there, as well. That was very single-minded focus to complete one simple thing, whereas now we're sort of bringing in a lot of different things: what is your issue here? Okay, how does somebody fix that? What's going on over there that sounds really interesting? Who thinks they might be able to implement something like that? So a lot of sharing.

Michelle Ockers: Emelia, I've done something similar before. I've worked with a team of people in a project environment and then kind of morphed it into a community of practice. I think one of the traps I had fallen into was trying to over-structure the interactions, and it still felt like a business meeting when we got people together, rather than more around, as you say, sharing and collaboration and kind of a looser structure. Were you able to make that transition fairly readily, or did you have to support the members of the group to make the transition in any way?

Emelia Winter: Yeah, went through similar process as yourself. It was very much: we'd go in with an agenda, and this is what we're going to talk about and what I actually found was not getting a lot of feedback back from the members for the first six months or so. Even now, it can be a bit of a challenge. So had to look at: how do I move myself from being a facilitator of what we're trying to achieve to a facilitator of opening people up to share what they're doing. So some of the things that we did was actually take away from having regular meetup sessions where people were there to share, and started doing webinar sessions on some topics that they wanted us to cover. So you know, what do you guys want to learn about? What do you want to know? And we ran webinar sessions instead. They were live, so that questions could occur at the end of the sessions, but we also videoed them as well as retained collateral for later stage.

Karen Moloney: I just want to dig into a little bit more about your role of the facilitator of the community of practice, and some of the things that are going on there, because I think lots of communities sort of get started but never really come to anything, which is why this one was so interesting: because it's got legs. So just thinking about your role as the facilitator of that community, what do you actually do as the facilitator and what help do you have from other people to keep that running?

Emelia Winter: I'll look at what I do now, rather than how it's evolved. We actually have a workspace that is run on SharePoint, so that's where all of our project information goes. I've actually got one page in there specifically for the community of practice. It has a couple of news articles that I try to update every couple of weeks on what might be going on around, or what we've done new

	that people might want to know about. We also have a spinoff Yammer group from there-
Karen Moloney:	And you moderate that, do you?
Emelia Winter:	I do. Look, it's new and it's still kind of getting people to use it at the moment.
Karen Moloney:	Yeah.
Emelia Winter:	So it's more sort of myself putting information up there, but it is there and we're hoping to grow it. A lot of links to other areas. We also put up a lot of the collaterals, so if we've had a meetup, I've recorded them before or just put agenda notes in there, plus video links to the webinars. Plus I also have a list at the bottom ...
	It's kind of useful. They love it. They really love this page. This is one of the things I get the most feedback from and it actually has all of the contacts for all of the members at the bottom, so if someone wanted to talk to somebody else, they don't always have to go through me to say, "Hey, can I speak to so and so?" It's up there and trying to just generate themselves between themselves to start talking to each other as well, so breaking down those silos.
	We have that workspace, and that takes me, you know, an hour or so every couple of weeks to just try and get it updated and keep on top of it all. Then of course, we run ... Once a month we have sessions, so every second month it's a webinar and the alternate month is an actual meetup. I find I have to do a lot of work for the meetup, you know, really think about: what do we want to focus on for this time? See if I've got someone who wants to share something that they're happening for 10 minutes. Make sure that I've got, you know, all the IT bits and pieces happening because we use ... We use Slido, because we have a lot of people that don't really tend to speak up in the sessions but if I get them to answer questions, I get some really great feedback. That's one way that we do things. Then also making sure that I can record it for later for those people who miss it.
Emelia Winter:	Being in a clinical environment, we do have people who go, "Oh, I'm really sorry but I have to go and deal with this patient," or whatever, "and I just can't make it." So we need to be wary of that, of those people in our audiences. So yeah, those monthly meetups, I usually put about half a day's preparation into getting ready for them, and then the webinars as well. I used to present from the webinars because a lot of the topics, there was something that I could provide to all of the state, but I'm slowly trying to ... It was also that that was the beginning. Whereas now, I actually am starting to get ... I'm so excited. This morning I got an email from someone saying, "Hey. I've been working on this and I'd like to present it for your next webinar." I went, "Oh my goodness! Thank you."

Karen Moloney: Ah, so you've reached that point now where it's all starting to shift?

Emelia Winter: Yeah. Generally I've been having to ask specific people, but now I've actually got an email that says, "Yes. I would like to present." I went, "Wow! This is fantastic."

Karen Moloney: I think if people see somebody doing something consistently over a period of time, then you sort of build trust in that and there's that consistency knowing that that's going to happen and that will be there, so it then gives people the confidence I suppose to put their hand up and get involved. It does take a long time.

Emelia Winter: I think for a long time, I was sort of going, "Oh no. Maybe I need to give up. I'm just not getting anything back from the members. Are they actually getting anything out of it?" And every time I'd go to them and say, "all right guys, we're thinking about cutting this down, or not doing that," I'd get so many comments back saying, "No, no. We love what you're doing. Don't change it, it's great. It's fantastic." You're like, "Okay, all right. Well just keep going."

                    I think, Karen, you and I have spoken a little bit before, but it's about, from a social collaboration perspective, which definitely a community of practice really is, is that participation inequality. There's a triangle that talks about participation inequality, and it says essentially there's 100% of your members, so we have 80 members on our email list and about 20 or 30 actually turn up to sessions. So that's like your, you know, 10% of occasional contributors. Then you'll have about 1% of heavy contributors and those are the people who will actually present or put their hands up or give you feedback, et cetera. It's just sort of saying, "Okay. There are these people that are lurking in the background. They are paying attention. Whilst they maybe aren't actually participating in a really obviously way, they are still getting a lot out of that and that you do just need to keep pushing through to keep reaching them.

Karen Moloney: Just in terms of the effort that you've put into facilitating the community initially, and now it's up and running, what would you say is the difference in say, I don't know, was it a couple of days a week over a six month period before things had started to settle down a little bit? Or how does it compare to the initial setup phase and what you're doing now?

Emelia Winter: I definitely think the setup phase was a couple of weeks probably, and just a couple of days a week over about a four to six week period in respect of setting up that working group and moving it from a working group to a community of practice was more so a focus on building the workspace and then just setting up the meetings, so the focus there was more about building that workspace. Again, that was probably a couple of weeks' work and a couple of days a week.

Emelia Winter: We were really lucky we had a comms person who was a SharePoint person, and they did a lot of the work for us. We kind of just went, "This is how we want

it to be built," and they went off and built it for us. So there was a little bit less effort in that transition, but still definitely some time. Nowadays, like I said, it's really just a couple of hours a week where I just keep things ticking over.

Emelia Winter: What I do find a little bit challenging is finding that critical thinking time where you just sort of challenge yourself and go, "What else can I do? Where else can I take this community? What else could we try, just to push to that next level of engagement?" Just to turn that conversation around to getting people to present, rather than myself. So I think for a long time, I just hadn't had that space to actually think about what I could do there, just being so busy with other work. When I did finally have that time, I think that's where we've been able to have that flip start to occur.

Karen Moloney: Do you think that's representative of the main shift of how your facilitator role has changed over time, in terms of rather than just the doing, organizing, getting things set up, you can now step back from it a little bit and take that critical thinking time to develop it as opposed to just getting it up there?

Emelia Winter: Yeah, absolutely. Much harder though, the critical thinking.

Karen Moloney: Very challenging. Speaking of challenges, what do you think has been your biggest challenge in running this community of practice?

Emelia Winter: I think there's probably two. We've touched on the first one considerably, so really it's that engagement in keeping the people who are part of the community coming back, actually contributing, sharing their learnings. That's a massive challenge and one that really can question whether you keep going forwards. The other one, which it would be great to talk about a little bit more in depth, is really about sharing the benefits of what you're actually doing. So quite often, especially for me and I'm in a project world, it always comes back down to that deadline, you know? How is this piece of work actually helping us to achieve the project outcomes? So it's really about looking at: what are the benefits of having this community of practice? And how can I communicate that to my stakeholders, to my project managers, to ensure that we can still have the time and the space to keep this going? That one's been a bit-

Michelle Ockers: Emelia, what do you see as the benefits from an organizational perspective, then, of what you have done with this community of practice?

Emelia Winter: So like I said, I've talked a little bit about breaking down the silos, so building that communication and sharing of lessons between the trainers across the state. You can start to break that down to say, "Well that's time and money that we've saved, because these guys didn't have to rebuild their training collateral. They just took it from these people and tried to, you know, they just edited it a little bit." You can really dig quite deep into that, depending on your stakeholders and what they want to know.

	For my guys, they weren't quite so interested in me digging into that. It was more about probably the collaboration that we've got, and knowing that we have a group of learning and development specialists that you can go and talk to when they say, "Hey. We're going to implement this piece of software. What do these guys think of this? What is their take, before we even actually go to implementing it?" And so we can make sure that we can fix it before it gets there. That's been a really big positive for our business, because we didn't have a lot of that communication happening previously.
Michelle Ockers:	Yep. It's interesting. There's sort of knee-turn benefits around specific initiatives, but then over time there's these longer term benefits that build because you've enabled people to connect more effectively and have better conversations.
Emelia Winter:	Yeah, and what we find now is the business is actually reliant on that group of people to go and talk to when they're building software and when they're completing projects. Now it's kind of like, well, if we took that away you wouldn't have those people to talk to and to get that feedback from and then we'd be back having a massive gap of issues. It's kind of built itself in as now a requirement, which is great.
Michelle Ockers:	That's interesting. At the end of the day, the purpose of the community of practice is to improve practice in an area of common interest, right?
Emelia Winter:	Yes.
Michelle Ockers:	So there's a concrete example of how practice is improving as a result of having this community together. What about from the perspective of the individual members of the community? You spoke earlier about sometimes not really knowing who's getting value and what value they're getting. It can be a hard slog, setting up and supporting a community where you're not seeing some people being active, but that doesn't mean they're not getting some value out of it. What value do you think people have gotten from participating in the community?
Emelia Winter:	We have a sort of older group of training managers that have been working in health for a very long time, so they're already coming in with their expectations. So trying to kick off something that's maybe a little bit more forward thinking can be a challenge. I was really lucky that we do have a couple of training managers that are just in that forward thinking space, and they were excited about us kicking off a community of practice and being part of that. So having those couple of front runners that really supported what you were doing was probably what kept us going in the first few months. They were probably some of our people that were able to push out to the rest of them and say, "Hey, come along to this. This is great. I'm getting something out of this, but I won't continue to get something out of this unless you participate as well."

	We're really lucky to have that, and that was a great way to actually build the expectations from the rest of the training managers across the state. So first off, those first few who were really into it and really able to support it, but then they also reached out to the rest of the training managers saying, "Hey, you guys also need to contribute and we'll be able to build even more so." I think that was where we were able to then really get that flip of even more training managers on board, and starting to participate and attend those meetings as well.
Emelia Winter:	I think I only answered part of your question there.
Michelle Ockers:	It was really about what they, do individuals get out of being part of the community?
Emelia Winter:	Yeah. I think they get that capability lift, but specific to their role in our industry. A lot of us, I know for myself when it comes to professional development I might be on LinkedIn and I'll be reading this article about what's happening in learning, and I'll be reading about that article, what's happening in learning. What happens in health is that there's not too much specifically about learning and development in health, or how it's working. Especially IT health. It's a really new area, and so a lot of those training managers either don't have some of those professional development ways to link into, or it's not something that they've been doing previously. That community of practice kind of brings that bit of professional development to them, that's been supported by their business and so they can get that value there. That's what I've seen. I get a lot of feedback back from them saying, "We love all of this information. We love this, and we love that," and they might say, "and can you also give us this?" Then when we address it, they're getting that capability lift. They're getting that information that they want.
Karen Moloney:	I think that's great. I mean, I've certainly been part of teams in large organizations, where we're disparate teams that are geographically spread and working on different things. Even though you're kind of part of the overall L&D function, many people still work in isolation or work in very small teams. So I think for me, being part of those things was always just the value in having those conversations and learning from one another, as to just how we could do things better or differently.
Emelia Winter:	Yeah, definitely from an L&D space, you know? It might just be one person in an organization, and it can be very isolating and so then you forget to keep pushing yourself, because this is okay for my organization. But the second you look outside and you start to talk to somebody else, you go, "Ooh. I could do that. Oh, I could do that. I could do that." So you're already starting to open your mind and think about how you can build your L&D focus or your strategies even more. I think that that's what that brings to them as well.
Michelle Ockers:	There's a couple of really good frameworks for thinking about what value are people getting out of both being part of a network as well as specifically a community of practice. There's one from Ben Betts, a curator at HT2 Labs I think

	it is? We'll put a link to that in the show notes, and also Wenger-Trayner around the idea of value creation cycles. We'll add those to the resources.
Karen Moloney:	I think that kind of leads us nicely into that next question around, when people look at communities of practice, everybody likes the idea of it and thinks, "Oh, if I build it they will come." We know that that's just not true. It takes a lot more to get them to come and be involved. So Emelia, what would be your top tips for anybody that's looking to start up a community of practice, or maybe revive or refresh an existing community that's kind of died a little bit?
Emelia Winter:	Yeah, absolutely. I think for the first bit, you really kind of need to have a bit of an idea or a consistent approach. Like I said for us, we sort of started doing some webinar sessions and rolled them out. It's just picking one thing and being quite consistent about it, and putting that into place. You might want to stockpile that, as well. Stockpile some of those ideas because you'll start to find towards the end you might get a little bit dry. Once you set that expectation, it makes it a little bit easier for the community to go, "Oh, I could do something like that. I've seen it enough times now, I'm feeling a little bit comfortable to provide some of that information myself."
	The other one is: don't give up. I talked about that, the inequality, the triangle there. You know, it really is amazing how many people are lurking in the background and getting so much out of this, but you have absolutely no idea. So don't give up, because the lurkers are there and they're real and they really want to hear what you've got to say, or what everyone else has got to say as well.
Karen Moloney:	Obviously in running this community of practice you're helping everybody with their professional development, but what's the biggest thing that you do for your own professional development?
Emelia Winter:	I mentioned a little bit before, but I try to just get up onto LinkedIn, have a read of what's being shared from a articles sort of base. I've got a couple of key thought leaders that I follow and read up on regularly. A big one for me for the last few years has been attending the Australian Institute of Training and Development conference. Just seeing some fantastic speakers that inspire you and getting to talk to other people that are putting things into place has been fantastic for myself. There's enough content in there now that usually keeps me going for most of the year until the next time.
Karen Moloney:	We'll include a link to your LinkedIn profile if anyone wants to get in touch with you and find out more about your community of practice and the things that you've discussed in today's episode. I'll also get some links into the show notes for some of those things that we've talked about. So Emelia, thank you so much for joining us and sharing your work and insights with us today.
Emelia Winter:	Thank you so much for having me. I really appreciate it.

Michelle Ockers: It was lovely, Emelia. Thank you.

Emelia Winter: Thanks.