

## **Frequently Asked Questions (FAQ):**

### **Community of Practice (COP)**

- 1. What is a Community of Practice (COP)**
- 2. How do you create a COP and what is the purpose of a COP?**
- 3. How does the Surgical Oncology Program (SOP) support CoPs?**
- 4. What is the role of a COP member?**
- 5. How do you engage COP members?**

Do you have another question that you think should be addressed in this format? Does your region have a unique solution or best practice that you would like to share? To enquire further about COPs with the Surgical Oncology Program (SOP), please email: [SOPinfo@cancercare.on.ca](mailto:SOPinfo@cancercare.on.ca)

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#### **1. What is a Community of Practice (COP)?**

A Community of Practice is:

A group of people who share a common concern, set of problems, or passion about a topic, that expand their knowledge and expertise in their area of interest through ongoing interaction with each other<sup>1</sup>

References:

<sup>1</sup>Wenger E, McDermott RA, Snyder W: *Cultivating Communities of Practice*. Boston, MA: Harvard Business School Press; 2001.

#### **2. How do you create a COP and what purpose does a COP serve?**

Establishing a COP involves leadership, determination and drive to achieve common goals and objectives. When establishing a COP, the purpose behind it needs to be kept in mind.

- A leader(s) facilitates the group to reach consensus on the focus of the COP, how it will operate, and who should participate.
- The focus may be colorectal cancer, surgical technology or any other topic of interest
- Participation is typically voluntary and generally, the COP meets regularly to discuss priority topics.
- Participants include those interested in the subject and those who will contribute to completing the priorities.

### 3. How does the Surgical Oncology Program (SOP) support COPs?

The SOP uses COPs composed of leaders from each region to move quality initiatives forward. Province-wide communities of practice have been established for the SOP's colorectal and prostate disease sites, with the purpose of identifying gaps in cancer care and developing quality improvement initiatives to address these gaps.

Regional surgical oncology leads and regional pathology leads nominated physician leaders (champions) such that each region (14) has a surgery, and a pathology, champion which are brought together to discuss various quality topics related to their respective expertise – prostate or colorectal cancer.

COP members (champions) participate in provincial web-conferences, in-person meetings, and opinion leader site visits, to work towards achieving their identified goals and objectives.

Members are also expected to develop COPs within their own regions for their respective disease site – colorectal or prostate - that encompasses multiple physician disciplines and hospitals from within the region.

Resources developed by the SOP to assist in moving quality improvement forward can be found at: <http://www.cancercare.on.ca/cms/one.aspx?portalId=1377&pageId=80763>

### 4. What is the role of a COP member?

Specific roles and responsibilities of a COP member may include:

- 1) Participation in the development of provincial and/or regional priorities and goals for the COP.
- 2) Sharing of best practices and barriers to quality improvement with other COP members.
- 3) Developing and maintaining working relationships with relevant stakeholders.
- 4) Promoting or leading the implementation of quality improvement initiatives.
- 5) Participation in regional and/or provincial teleconferences/web conferences/in-person meetings.

It is important to note that the expectations of COP members should be adapted to meet the needs of each specific COP.

### 5. How do you engage COP members?

The key elements to engaging CoP members include:

- Leadership: A leader or leaders who actively work to engage a larger community and guide COP members.
- Consensus Building and Seeking Input: Experience has shown that engaging all of the appropriate disciplines and relevant stakeholders early in the process will aid to the success of implementing the end product.
- Communication: Keeping open and regular communication with members (e.g. meetings, emails, and newsletters) may assist in building the COP's identity)
- Self-Audit through Data Collection: When the COP is focused on a quality initiative, members have stated that auditing the initiative and providing individual feedback to members in a productive and non-threatening manner is very effective at improving quality.

The SOP has successfully employed several strategies at a provincial level to engage members of the colorectal cancer and prostate cancer COPs:

- Provincial Workshops: In-person workshops and web-conferences provide an opportunity for multiple disciplines from across the province to come together and discuss quality improvement initiatives, identify gaps in care, and determine goals for the COP.
- List Serv Online Discussion Forum: The Colorectal and Prostate Cancer List Servs provided a multidisciplinary online discussion platform for physicians/COP members to improve their knowledge and management of colorectal and prostate cancer.
- Newsletters: Newsletters keep COP members informed of quality improvement initiatives occurring in the province.
- Data Distribution: Data is an important driver of quality improvement, and both the colorectal cancer and prostate cancer COPs receive data on positive margin rates and lymph node status.
- Educational Slide decks: Presentations on the colorectal and prostate cancer guidelines can be used at regional educational rounds or meetings.

COP member engagement strategies may vary depending on the goals, structure and size of the COP.