

HAWAII'S COP GUIDE



9/1/2011

Hawaii's School-based Behavioral Health Community of Practice

“The concept of a Community of Practice is influencing theory and practice in many domains. It is now the foundation of a perspective on knowing and learning that informs efforts to create learning systems in various sectors and at various levels of scale, from local communities, to single organizations, partnerships, cities, regions, and the entire world.” Adapted from *Etienne Wenger*

HAWAII'S SCHOOL-BASED BEHAVIORAL HEALTH COMMUNITY OF PRACTICE

GUIDE OVERVIEW

-  History of Hawaii State Community of Practice
-  Current Status of Hawaii State Community of Practice
-  Illustration of Implementation Phases
-  Examples of Local Community of Practice Groups
-  Next Steps: Working to Build Local Community of Practice Groups
-  Contact information



HAWAII'S SCHOOL-BASED BEHAVIORAL HEALTH COMMUNITY OF PRACTICE

HISTORY

Following the end of the Felix Consent Decree (1994-2005), the Hawaii Department of Education (DOE) was charged with moving beyond compliance to implementing a continuous progress improvement model for the integration of education and mental health. Monitoring alone is a technical process and cannot describe the dynamic interrelationships among the various stakeholders and service providers who support the system and its outcomes.

In order to create a sustainable system, change was imminent. The criteria for the new system required:

- The cultivation of a deep understanding of shared agendas and cross-cutting policy and practice issues that underlie the results that are captured and examined in a monitoring system
- The building of a learning loop between decision makers, practitioners and consumers who could test assumptions, create and evaluate pilot efforts, develop insights that inform policy, and drive strategies for sustainable change
- It to be self-directed and self-sustaining, built upon a shared vision, trustworthy relationships and effective self-monitoring powered by a continuous progress model

IDEA Partnership Community of Practice Grant

A grant was awarded to the State of Hawaii Department of Education in 2005 that forged the way for promotion of the Community of Practice (CoP) philosophy in school-based behavioral health (SBBH). A steering committee was formed and in 2006 a “Community of Practice Partnership Conference” was held to promote the formation of local CoPs across the state.

CURRENT STATUS OF THE HAWAII STATE CORE GROUP AND LOCAL PRACTICE GROUPS

In response to this charge, the core team developed a *State Community of Practice Strategic Plan* to move Hawaii forward. The current plan for 2011-2012 is defined below.

Vision

All children and families in Hawaii are healthy participants in their lives.

Mission

To promote Communities of Practice that support social, emotional and mental health for all children & their families in Hawaii.

Guiding Values

- Building trust
- Nurturing mutual respect
- Providing for cultural diversity
- Seeking youth and family involvement
- Working collaboratively
- Embracing the Hawai'i Child & Adolescent Service System Principles (CASSP)

Belief Statement

Healthy children and families are everyone's responsibility.

Definition of the Community of Practice

- Is a philosophical place that facilitates change
- Focuses on attainable goals
- Operationalizes belief statements
- Goes beyond institutional solutions; goes beyond what is currently in place
- Brings ideas to the table to broker discussion
- Has productive cross sector discussions regarding issues & policies affecting support for social, emotional and mental health for children & families
- Models the Communities of Practice philosophy in our daily activities
- Models the process as we create new Practice Groups
- Identifies what a “good” seamless system looks like; “good service delivery; good linkages”

State Core Team Function

- Serves as the coordinating entity for Communities of Practice in Hawaii relating to social, emotional and mental health and well-being of children and families
- Promotes and models the Community of Practice philosophy
- Facilitates and supports the Community of Practice process for the state and local CoPs and the Practice Groups
- Synthesizes data and information on systemic social, emotional and mental health issues
- Identifies issues for state level Practice Groups
- Serves as a “think tank” to advance social, emotional and mental health in Hawaii
- Provides opportunities for local CoPs and state, local, and private agencies to advance social, emotional and mental health

Membership

Criteria for membership on the State Core Team include but are not limited to:

- Demonstrates passion for the well-being of children and families
- Supports the Community of Practice philosophy
- Is able to commit the time necessary to attend meetings and move the agenda forward
- May or may not be involved in a local Community of Practice

Goals & Objectives for 2011-2012

Goal 1: Provide leadership and support to advance and develop viable, healthy local CoPs & practice groups.

Objective 1-1: Explore, support and assist existing and developing local CoPs & practice groups. *Timeline: Continuous*

Strategy: Provide the developed technical assistance menu to all existing and new CoPs

Strategy: Respond in a timely manner to requests for assistance

Goal 2: Promote communication and learning opportunities between National, State and Local levels of CoP.

Objective 2-1: Participation by State CoP members with National Practice groups. Explore and develop a user-friendly system for dissemination of information to local CoPs. *Timeline: July, 2012*

Objective 2-2: Promote local CoP participation with National Practice Groups that meet their needs. *Timeline: July, 2012*

Goal 3: Build collaborative partnerships for State CoP across sectors that support positive change.

Objective 3-1: Recruit two or more missing partners (Developmental Disabilities Division (DDD), Child & Adolescent Mental Health Division (CAMHD), Department of Human Services (DHS), Office of Youth Services (OYS), Alcohol & Drug Abuse Division (ADAD), Early Intervention (EI), Hawai'i Community Foundation (HCF) and youth.

Timeline: Continuous recruitment

Objective 3-2: Establish quarterly meetings to attract a broader partnership representation. *Timeline: June, 2012*

Goal 4: Improve outcomes for students and schools through enhanced partnering between the Departments of Health and Education at the District Level.

- Objective 4-1:** Utilize the quality assurance (QA) indicators to identify what are promising practices that can be shared among schools and Family Guidance Centers (FGCs). *Timeline: July, 2012*
- Objective 4-2:** Explore the feasibility of training on promising practices as identified. *Timeline: September, 2012*
- Objective 4-3:** Explore the feasibility of co-location of mental health services on campus through partnering between SBBH and CAMHD. *Timeline: September, 2012*
- Objective 4-4:** Assist with community outreach regarding the impact of bullying and raising awareness “Make a Friend, be a Friend”. *Timeline: August, 2012*
- Objective 4-5:** Develop a plan to support SBBH in meeting its goal of serving all youth in need of mental health services within our school system. *Timeline: July, 2012*

Moving To Action, Illustration of Implementation Phases

Phase I: Identifying Systemic Needs

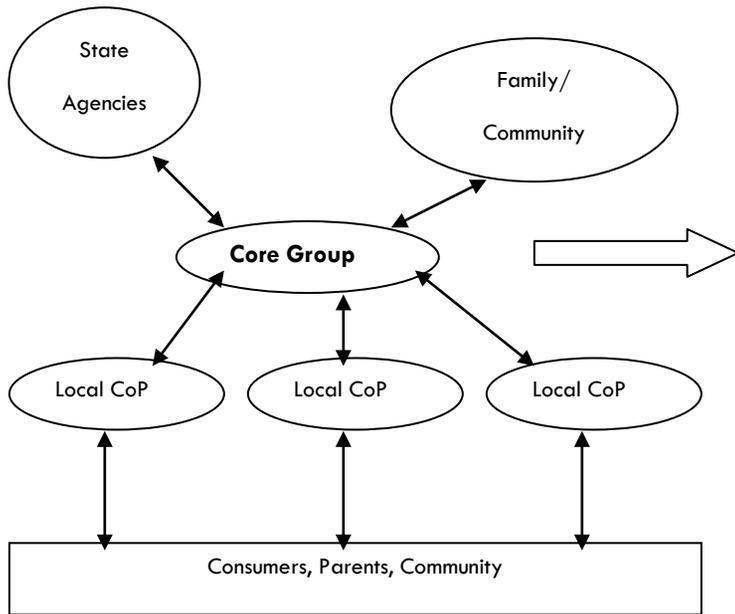


Figure 1

Phase II: Studying the Needs
(Learning as a Community)



Figure 2

Phase III: Acting on the Needs

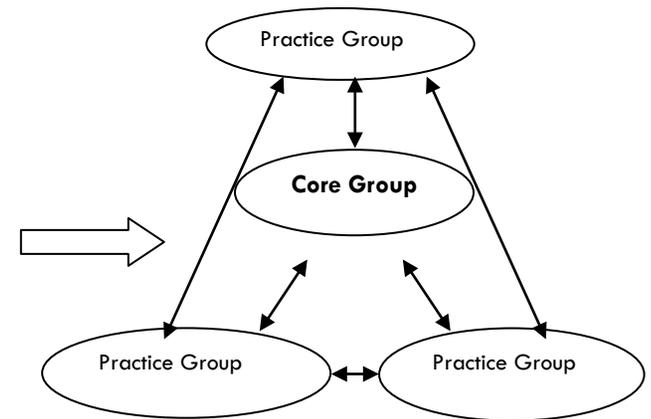
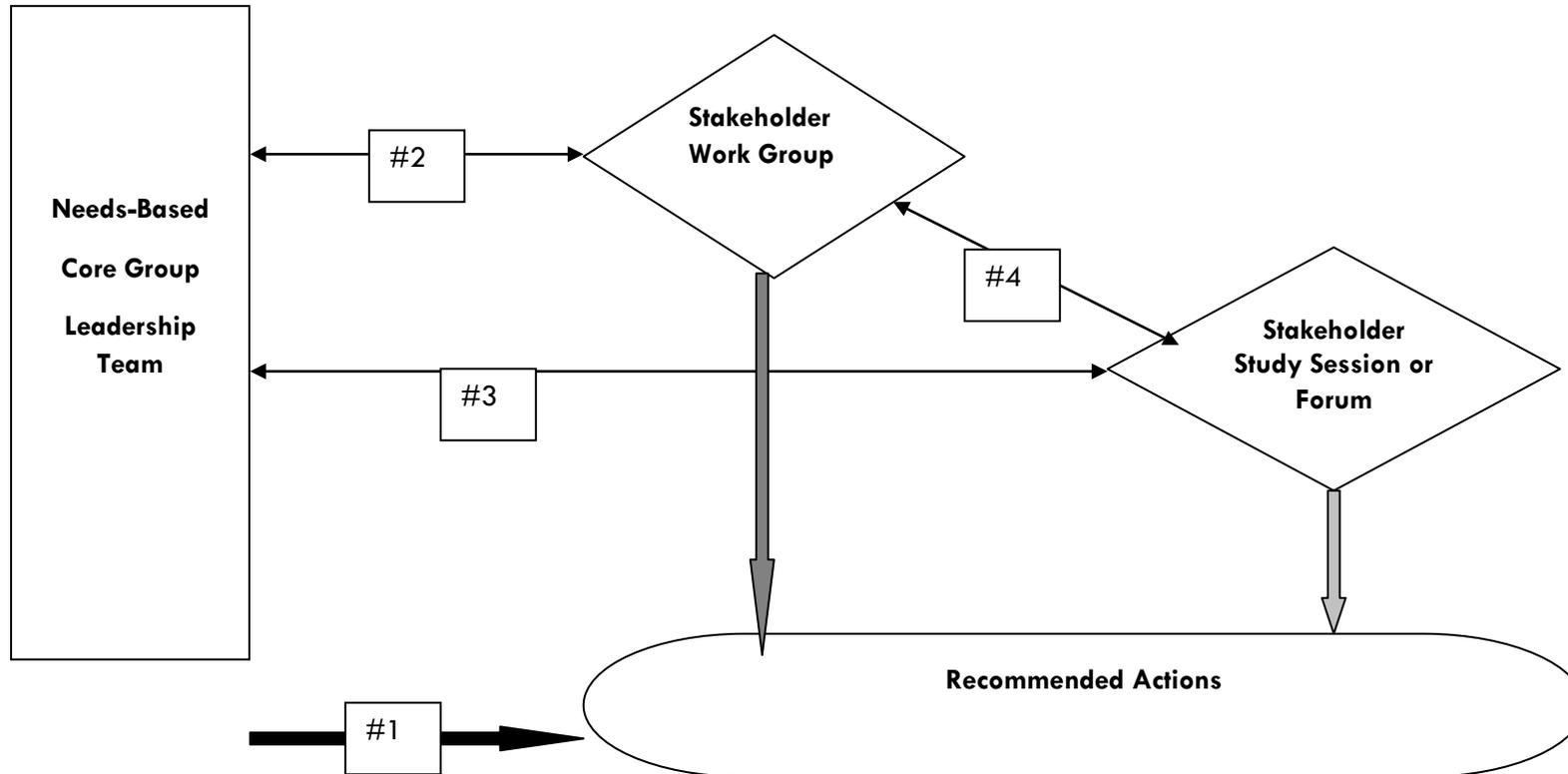


Figure 3

Pathways to Action



Pathway #1: Leadership Team studies Systemic Need(s) and makes recommendations.

Pathway #2: Leadership Team convenes Stakeholder Work Group to study Systemic Need(s). Recommendations are generated by the Work Group or via the Leadership Team in collaboration with Work Group.

Pathway #3: Leadership Team convenes Stakeholder Study Session/Forum to study Systemic Need(s). Generate recommendations at the Study Session/Forum or via the Leadership Team with input from the Study Session.

Pathway #4: Leadership Team/Work Group convenes Stakeholder Study Session/Forum to study Systemic Need(s). Generate recommendations at the Study Session/Forum or via the Leadership Team/Work Group.

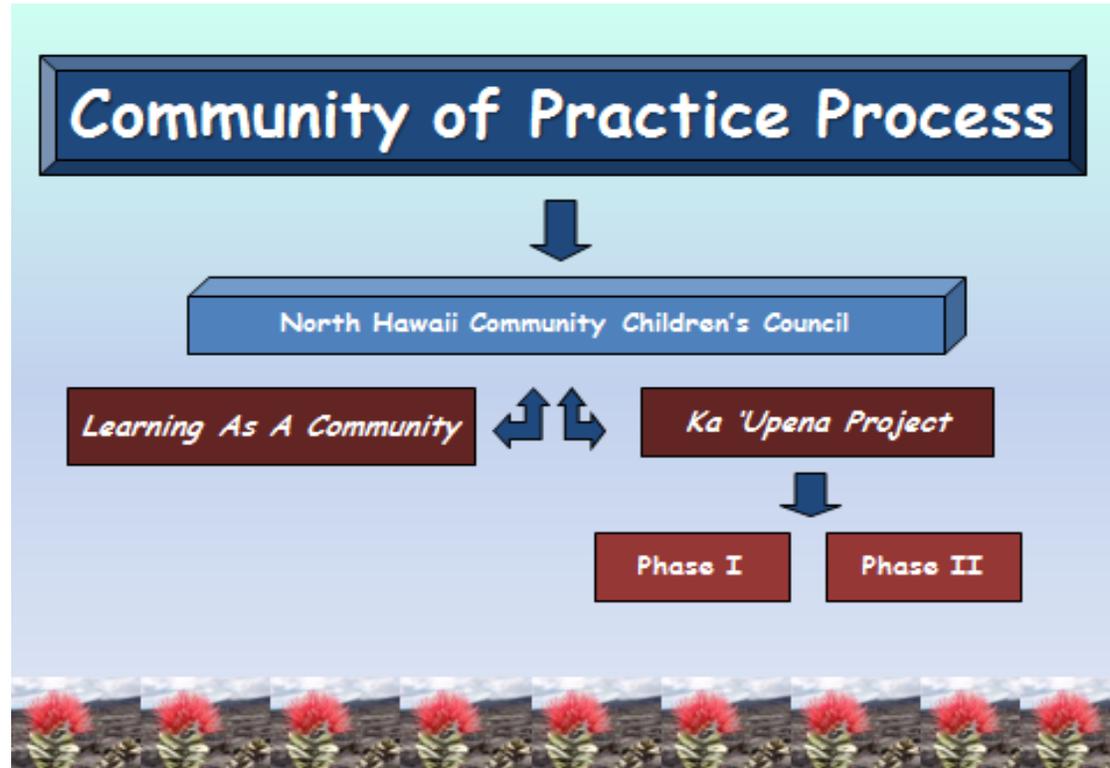
Pathway to Action: A Process

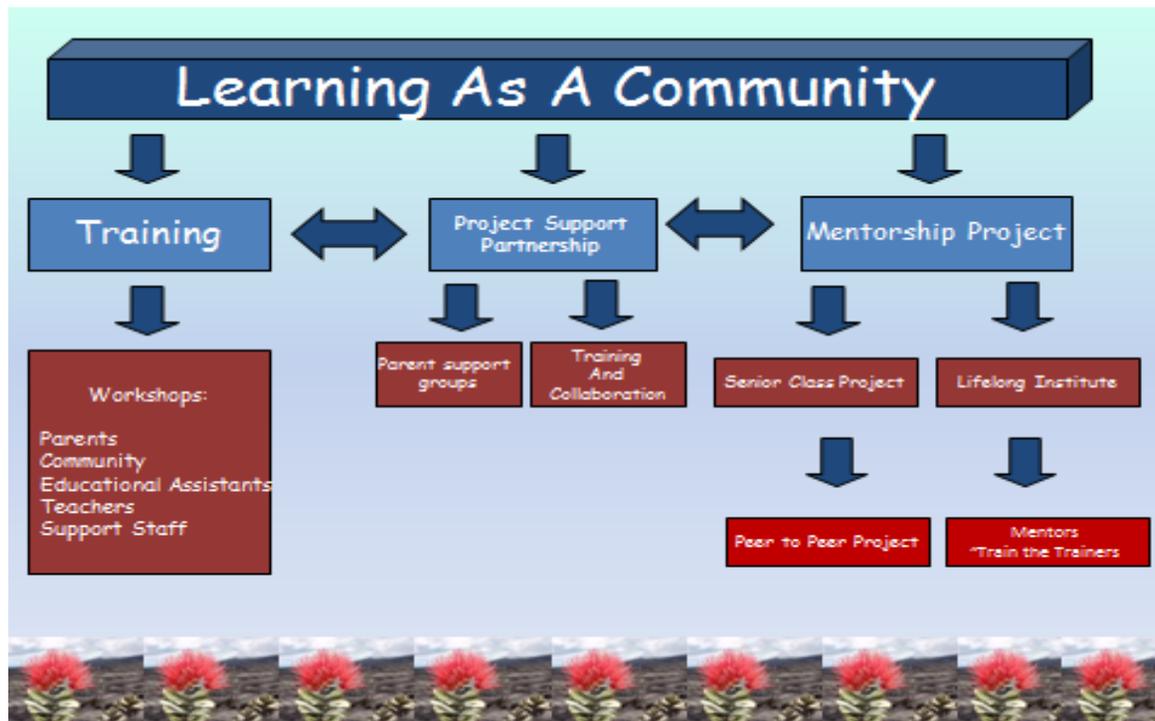


Getting from Here to There, A Process:

- ✓ *What are the perceived need(s)?*
- ✓ *Do we have data?*
- ✓ *What does the data tell us?*
- ✓ *Does the data prompt additional questions?*
- ✓ *Are there any recommended actions? What are they?*
- ✓ *Define priority recommendations.*
- ✓ *Which prioritized recommendations can we implement?*

LOCAL PRACTICE GROUP EXAMPLES







FUTURE DIRECTION

The future direction for Communities of Practice in Hawaii is outlined in the various activities set forth by the core team's strategic plan. It is our vision to increase participation and strengthen relationships between agency and family stakeholders.

NEXT STEPS: WORKING TO BUILD LOCAL COMMUNITY OF PRACTICE GROUPS

The foundation of a successful COP lies in each individual's understanding of the dimension of partnerships. These dimensions include the personal, professional, and cultural understanding of how each person works in partnership within the larger community. The first dimension involves a deep personal reflection by the individual in terms of understanding what he or she brings to the partnership. It involves a personal commitment and a willingness to internalize what contribution will be made to create positive good for the community initiative in which you are engaged.

The second dimension involves a professional commitment to work in a trusting and reciprocal relationship with other professionals involved in the community. Most importantly, this commitment obligates the individual to share professional, fiscal and other resources to provide for the betterment of the effort.

Lastly, it is important to understand the cultural dimension of your local community. Every organization, school, business entity, agency has a unique culture all its own. It is imperative that in a Community of Practice relationship we distinctly respect and value the unique cultures that blend into our larger community. Understanding, appreciating and supporting the multiple perspectives brought forward to the community is essential in securing a successful process.

EMERGING PRINCIPLES: THE OUTLINE OF A MODEL

(Adopted from "Communities of Practice, a New Approach to Solving Complex Educational Problems", NASDSE)

"...the IDEA Partnership's Community of Practice approach illustrates the following principles of learning systems that are needed to address complex issues:

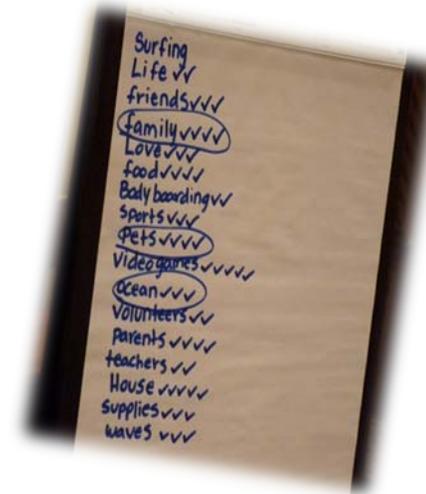
- Convene a constellation of communities that matches the size and complexity of the challenge you are trying to address
- Bring together the people who have a stake in key issues to work in community structures that allow them to take charge of their learning together
- Involve them as expert practitioners in real work that contributes both to a joint goal and to their learning in collaboration with each other
- Recognize and sponsor the work of the social artists who can convene these communities and weave them into a dynamic constellation

Questions to ponder:

- What shared concerns are going to bring people together in meaningful ways?
- Who should be at the table to ensure real progress in practice?
- What should participants be doing together to increase their individual and collective learning and ability to act?
- Who has the skill, legitimacy and leadership to convene these communities?

"Never doubt that a small group of thoughtful committed citizens can change the world: indeed it's the only thing that ever has."

(Margaret Mead)



CONTACT INFORMATION

State Core Group Contact Information:

For further information or technical assistance in beginning a local Community of Practice project for the advancement of school-based mental health, please contact one of the following core team members.

Steven Vannatta, Co-chair: steven_vannatta@notes.k12.hi.us

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