CT Supporting Families Community of Practice Talking Points

1. **What** is a Community of Practice?

Communities of practice (CoP) are groups of people who share a passion for something that they do, and who volunteer to interact regularly to learn how to do it better. Effective communities of practice:

- **Connect people** who might not otherwise have the opportunity to interact, either as frequently or at all.
- **Stimulate learning** by serving as a vehicle for authentic communication, mentoring, coaching, and self-reflection.
- **Capture and diffuse existing knowledge** to help people improve their practice by providing a forum to identify solutions to common problems and a process to collect and evaluate best practices.
- **Help people organize** around purposeful actions that deliver tangible results.
- **Generate new knowledge** to help people transform their practice to accommodate changes in needs and technologies.

2. **Why** has Connecticut formed a “Supporting Families Community of Practice”?

Connecticut is one of five states to receive a national grant to participate in a four year Supporting Families Community of Practice study. Other states selected were: Oklahoma, Tennessee, Washington and the District of Columbia. The Supporting Families Community of Practice is designed to include ideas, innovations and recommendations from the community. The purpose of the Supporting Families Community of Practice is to identify and implement policies and practices that will serve as a national framework for states to use to support individuals with intellectual and developmental disabilities and their families across the lifespan.

3. **Who** is involved in the CT “Supporting Families Community of Practice”?

The CT Supporting Families Community of Practice grant is administered as a partnership between the CT Department of Developmental Services (DDS) and the Connecticut Council on Developmental Disabilities. Individuals with disabilities and their families, members of the community, providers of family support services, state agency leaders and policy-makers and all other interested parties are welcome to participate in Supporting Families Community of Practice activities.

4. **When and where** will the “Supporting Families Community of Practice” activities take place?

The initial Supporting Families kickoff event is planned for September 17, 2013 in Windsor, CT. The SF CoP Communication Team will hold its first meeting on September 18, 2013 in West Hartford, CT. SF CoP sub-committees will be formed following these events. Sub-committee meetings will be video-conferenced so that a wide range of participants across the state can be included in meetings.

5. **How** can I learn more about future “Supporting Families Community of Practice” activities?

For more information about the CT Supporting Families Community of Practice activities please contact any of the Supporting Families Community of Practice Connecticut Facilitators listed below:

Robin Wood, DDS Director of Family Support Strategies & Advocacy, robin.wood@ct.gov Phone: 860-418-6035
Cathy Adamczyk, DD Council Policy Specialist, Cathleen.adamczyk@ct.gov Phone 860-418-6160
Tesha Imperati, Executive Director, Family Support Network, timperati@ctfsn.org, 203-710-3041
Additional Questions from the DDS perspective....

1. **How does the Supporting Families Community of Practice differ from a traditional DDS work group?**

<table>
<thead>
<tr>
<th>Community of Practice Expectation</th>
<th>Supporting Families Community of Practice</th>
<th>Traditional CT DDS Workgroup</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Connect people</strong> who might not otherwise have the opportunity to interact, either as frequently or at all.</td>
<td>Cross disability lifespan representation: People that represent a variety of disability groups across the lifespan represented.</td>
<td>Only people with ID represented. Limited to adult service perspective.</td>
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<tr>
<td><strong>Stimulate learning</strong> by serving as a vehicle for authentic communication, mentoring, coaching, and self-reflection.</td>
<td>Minds open to learning: Solutions and answers to identified barriers are not assumed. Participants recognize they all have something to learn from one another and that their job as a CoP member is to better understand each other’s needs and perspectives.</td>
<td>The workgroup is formed to implement actions that have already been formulated inside the organization. Learning is limited to what is known and discussed in the “silo”. There is often a strong hierarchy of who is in charge and who should be listened to.</td>
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<td><strong>Capture and diffuse existing knowledge</strong> to help people improve their practice by providing a forum to identify solutions to common problems and a process to collect and evaluate best practices.</td>
<td>Members of the community are involved in the work of the group. The “right people” are invited to help participate in the work of the group to help ensure that a variety of information (real stories, factual data, well researched information) is discussed and evaluated before decision-making occurs. Possible solutions focus on helping resolving common community problems, rather than focusing on a specific agency’s needs.</td>
<td>“Silo” thinking occurs because only the “usual players” are involved. Solutions focus on improving the silos, rather than on addressing common themes and problems facing people in the community-at-large. Decisions are often made based upon what committee members feel instead of being based upon real stories, factual data and well researched best practices.</td>
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<tr>
<td><strong>Help people organize</strong> around purposeful actions that deliver tangible results.</td>
<td>Solutions focus on resolving common problems across diverse groups rather than on agency-focused barriers. Members organize around “what’s best for the common good”, rather than on “what’s best for me”. Action plans developed by the group feel meaningful to CoP members and produce results that are meaningful to the community-at-large.</td>
<td>Actions are organized around getting the work done that needs to be completed in the silo. People outside of the group often don’t understand, don’t agree with, or don’t care about the actions taken by the group.</td>
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<td><strong>Generate new knowledge</strong> to help people transform their practice to accommodate changes in needs and technologies.</td>
<td>A solution implemented in one group creates synergy that leads to positive change in other groups. Actions are constantly expanding due to the influence created by the energy, excitement and results achieved by the group.</td>
<td>Due to the isolation and insulation of the silo group, change seldom manifests itself outside of the rigid boundaries of the group.</td>
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</table>
Traditional DDS workgroups are usually formed to implement actions that will quickly address identified problems, in the fastest way possible. CoP teams are formed to study problems in as thorough a manner as possible in order to create long-range community-based solutions that are implemented over time in a way that is meaningful to the community at-large. CoP groups and traditional DDS workgroups benefit from the work that is performed by the other. The better the communication that occurs between the CoP groups and the DDS workgroups who are addressing similar issues, the more likely that each group’s work will produce successful short and long-term solutions to barriers impacting the quality-of-life of the the people served by the department.

2. **How does the Supporting Families Community of Practice fit in with the CT DDS Mission and Five Year Plan?**

The DDS mission and the Five Year plan address many of the same issues identified through the Supporting Families Community-of-Practice. The CoP provides participants the opportunity to think outside of the DDS “silo” and expects that identified solutions will focus on making people lives better, not just on improving the way DDS does its business. It is anticipated that the COP subcommittees will inform DDS internal workgroups on best practices that individuals and families hope will be replicated in the department and will provide “sounding boards” regarding proposed changes that DDS plans to make to its services. The SF CoP committees will focus on the “big changes” and new directions needed by the department. The internal DDS workgroups will continue to focus on the enhancement of day-to-day policies, procedures, and guidelines, that need to occur in order to adapt to new ways of doing business that have been proposed by the SF CoP groups.

3. **What changes does DDS expect to occur by the end of the Supporting Families Community of Practice four year grant?**

**Improved services for families whose children live at home:**

- Improved information dissemination
- More family-to-family support connections
- Enhanced respite services
- Enhanced behavior supports
- Enhanced in-home supports