How an Association Evolved Using Communities of Practice

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INTRODUCTION

Communities of practice have always existed in some form. However, it was not until the late 20th century that they entered the lexicon of business. Experts such as Wenger, McDermott, and Snyder (2002) point to companies such as Shell, World Bank, and Xerox that have successfully used communities to encourage innovation or the development of best practices. But the concept was rarely extended to other kinds of organizations, such as nonprofit organizations and associations. In creating and launching its online Communities of Practice (CoP), the American Health Information Management Association (AHIMA) blazed new trails as it set out to redefine the way it worked as an association.

The drive toward communities emerged from a number of factors. The 76-year-old association is at the epicenter of a healthcare world where information and knowledge are key assets in the ongoing effort to advance health and patient care. AHIMA now serves a membership of 50,000 professionals who work in increasingly varied roles. Like many associations, AHIMA strives to demonstrate and improve the value of its services to members at the same time that member needs are growing more and more diverse. Members seek ways to better leverage information to achieve greater levels of personal efficiency and effectiveness and contribute to better performance for their healthcare organization’s business operations.

By the late 1990s, members were looking for more efficient forms of knowledge exchange with other members. Many of the breakthrough professional practice improvements were happening in the field. Members could not wait for these best practices to “trickle up” to the national level, be packaged, and trickle back down. New ways of disseminating information had to be devised to complement the tried-and-true ways.

AHIMA members said that one of their primary reasons for belonging to the association was the interaction it provides with their peers. However, with decreasing travel and conference budgets and severe time constraints, members were less able to extract themselves from their workplace to attend meetings. The association offered membership in specialty groups as a means of networking, but this structure was costly for members and for AHIMA and not flexible enough to meet member needs for networking and knowledge exchange.

In 1998, AHIMA’s Board of Directors charged an organizational structure task force with leading an organizational design process. This design process was not about rearranging the boxes on an organizational chart, but about creating a new model that would allow the association to be more member centered and facilitate interactions between members.

The task force released its recommendations in 1999. One of these called for instituting “practice communities.” It defined “practice community” as a way of enabling AHIMA members with common interests to network across geographic boundaries.

The task force went on to recommend a new association-wide model, a key component of which is CoP.

BACKGROUND

It should be noted that the phrase “communities of practice” was just beginning to appear in business literature, referring to a new organizational form that complements existing structures and facilitates knowledge sharing, learning, and change. (One particularly influential article by Wenger and Snyder appeared in the January–February 2000 Harvard Business Review, pp. 139-145.) It was reassuring to learn that leading companies were using this organizational form, though association experience at the time was almost nonexistent.

Wenger, McDermott, and Snyder (2002) define CoP as “groups of people who share a concern, set of problems, or a passion about a topic and who deepen their knowledge and expertise by interacting on an ongoing basis.” They emphasize that communities “develop a unique perspective on their topic as well as a body of common knowledge, practices, and approaches. …They may even develop a common sense of identity.” This definition seemed particularly meaningful in an association context, where an individual’s sense of belonging depends, to an extent, on a sense of collective identity. This idea underscored the association’s core concept of the CoP.
Rheingold (2000) points out that community had always been a compelling part of the history of the Internet, since the dawn of e-mail lists, BBSs, and Usenet. Later, the successful online social community the Well demonstrated the power of virtual communicating. The advent of the Web took communities to a more graphical-based level, but new challenges emerged, too. Rheingold notes: “virtual communities won’t automatically grow in a healthy manner simply by adding a forum or chat room to a web page… Skilled facilitation, well-thought-out social contracts, social mechanisms, and multimedia material for initiating newcomers in the medium—the ‘social infrastructure’ for success in virtual-community building—has become valuable, now that tools are free.” AHIMA sought to develop these very tools to make its initiative a success.

Powazek (2001) defines a Web community as something that happens “when users are given tools to use their voice in a public and immediate way, forming intimate relationships over time.” This is pertinent given the networking and collaborating environment that AHIMA wanted to foster.

Preece (Preece, Maloney-Krichmar, & Abras, 2003) gives a brief history of virtual communities and notes that research on communities is being done in a variety of disciplines. “It is impossible to do justice to the array of research being produced,” she notes. More work needs to be done in the areas of life cycle of communities, ways to support sociability and usability, and how software can be scaled up or down depending on the population. These, too, are issues AHIMA is grappling with.

While much has been written about CoP in theory and in practical applications in the business world, there is relatively little in the literature about communities in the world of professional membership associations.

**AHIMA’S COMMUNITIES TODAY**

Today, AHIMA’s CoP comprise an interactivity-rich, Web-based portal that members use to access the full range of knowledge resources, maintain member-to-member networking groups, share professional practice solutions, and conduct association business.

AHIMA’s intention in creating the CoP was to build more than a Web site. Instead, its intention was to create “one-stop shops” where its members could learn to do their jobs better—from each other. CoP are defined as clusters of members with common interests in areas of professional practice and networking. The purpose of establishing CoP is to advance the practice and promote unity and member interconnectedness.

The principle was not “build it and they will come.” AHIMA board and staff members understood that this would not be enough to make the endeavor successful. Instead, the initiative would be member centered and member driven. Staff would provide resources and support, but what would make the communities come alive would be member involvement.

Tools to facilitate this involvement include common Web-based communication tools including threaded discussion forums, chats, and polls. But the CoP take these tools to another level to facilitate member-to-member networking, including the ability to share previously created documents (forms, sample policies and procedures, etc.) that demonstrate best practices, the ability to propose, lead, and disband communities as needed, and a connection to the FORE Library: HIM Body of Knowledge, an online knowledge base of health information management-related literature.

The CoP platform is developed using a custom-built framework which is designed with modular code that can be easily inserted, removed, and maintained. The main technology used is Cold Fusion scripting, using a normalized MS SQL server backend database. The CoP platform can also be configured to take advantage of an existing database containing member data.

The connection to the member database allows members to use a detailed member profile function to search for others with similar interests, job titles, and geographic location. The member profile, designed at a level of granularity that supercedes the average member database, can ultimately be used by members to invite others to participate in a new community.

Some of the ways that members are using the CoP include the following:

- Joining whichever communities they choose, or just visiting a community to pick up information of interest at the moment. Communities are like neighborhoods, set up around any number of member characteristics such as geographic locations (e.g., local, state, regional, or international), a member’s role in the workplace (e.g., clinical coder, director, or consultant), workplace setting (e.g., academic medical center, rural hospital, long-term care, or software developer), or issues (e.g., shortage of credentialed professionals or compliance).
- Visiting the global Community of Members to learn what is new in the field, check the calendar, or scan the news from AHIMA. The Community of Members is equivalent to a town square. It is a virtual gathering place for all members.
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