

Facilitating Practitioner Knowledge Exchange  
through Collaborative Practice Groups <sup>1,2</sup>

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RUNNING HEAD: Facilitating Practitioner Knowledge

### Abstract

Working counsellors and therapists most often work in relative isolation, meeting to report on “cases” at best but rarely witnessing their colleagues’ work. Annual allocations for professional development, if they are available at all, typically lead to practitioners enrolling in disparate trainings offered by a variety of experts often disconnected from front line work. Alternately, all workers in an agency or region are given a one-size-fits-all training. Either way, the professional development is only temporarily energizing and learnings quickly dissipate without the opportunity for ongoing dialogue within a community of learners. This compartmentalization of professional development squanders the opportunity for lateral knowledge exchange among practitioners and increases the chances of burnout associated with professional isolation. This paper describes how the dilemmas have been addressed through the formation of inter-agency “collaborative practice groups” of therapists and counsellors in Ottawa, Canada.

Things change dramatically for therapists, counselors, and social workers once their formal training ends and they enter the workforce. After a sustained period of mutual inquiry, collective discussions, and the regular sharing and witnessing of therapeutic work, practitioners typically "fly solo". Their practice happens behind closed doors, with no "reflecting surface" (White, 1997) from which to derive feedback and engage in ongoing examination of their work. Discussions with colleagues shift. They're more taken up with the logistics of referrals and scheduling, and perhaps the venting of discontent that characterizes coffee room chatter. Gone is the spirit of exploration and learning encouraged within a formal educational setting.

Training does not *entirely* end once a practitioner graduates, but it frequently comes in the form of indiscriminate application of a one-size-fits-all model across agencies or regions, the so-called "spray and pray" strategy of professional development (Delisio, 2005). This generalized approach fails to accommodate for contextual variations in the workplace and has been shown to reap small rewards in terms of practice change (Delisio, 2005). In other cases, practitioners are allotted annual professional development allowances which they spend on trainings of their choice. The dilemma here is that they are unable to continue to experiment with their learnings in the company of workmates familiar with the newly learned practices.

The frequency and continuity of trainings presents a further challenge. Intermittent professional development workshops, often just one or two days in duration, have a brief impact which often evaporates with the reversion to habitual practices. As therapists' more immediate and mundane demands present themselves, their learnings fade and they revert to "business as usual".

The relative failure to disseminate and sustain innovative practice amongst working therapists and counsellors has very real implications for consumers of their services; but it also has grave consequences for the practitioners themselves. It denies them the revitalizing impact of trying out new ideas and approaches (Cook et al., 1999) and robs them of the opportunity to proactively sustain their professional competencies. As a consequence, there is a high vulnerability to burnout, and high turnover rate among frontline counsellors (Casey Foundation, 2003).

In our work in Ottawa, we have tapped into some very real opportunities for counteracting some of the risks of isolated practice. We have collectively fashioned processes for consolidating referral networks and nurturing practitioner communities. This paper provides a brief account of these initiatives, which offer promise for sustaining growthful interactions and connections between therapists beyond the years of their formal training.

The initiatives are centered around the creation of what have come to be called "collaborative community practice groups". There are currently five such groups either operating or in the planning stages in Ottawa. The groups share a number of features. Although they bear similarities to each of the following, they are not quite: 1. supervision groups, 2. case conferencing units, or 3. therapy training programs. To greater and lesser extents, the collaborative practice groups engage in case review, skill development, literature discussion, and co-therapy. All use reflecting processes as vehicles for shared participation. The models of reflecting derive from contemporary family therapy traditions. They include variations on the reflecting team<sup>3</sup> (Andersen, 1991; Anderson & Jensen, 2007; Friedman, 1995; Paré et al., 2004) and definitional ceremony (White, 1997,

1995; 2007). None of the groups are represented by a single institution; they each include between 8 and 12 participants from an assortment of agencies, and in some cases private practice. They all meet biweekly or monthly, between Fall and Spring. All are facilitated by a paid consultant.

### Origins of the Groups

The creation of the existing groups happened gradually in a sort of organic unfolding of events, starting with an in-house professional development program offered by the Youth Services Bureau of Ottawa (YSB) between 1998 and 2003. I was one of the trainers contracted by the YSB. The training program was focused on what I call "collaborative therapies"-- contemporary, strength based approaches associated with postmodern family therapy. These include three "models" gathered under the "postmodern umbrella" (Anderson, 2007; Paré & Tarragona, 2006) of contemporary family therapy approaches. Narrative therapy (Freedman & Combs, 1995; Morgan, 2000; White, 2007; White & Epston, 1990) encourages a view of people as separate from their problems and is focused on joining clients in "re-authoring" their accounts of their lives. Solution-Focused Therapy (Berg, 1994; de Shazer and Berg, 2007; Walter & Peller, 2000) advocates constructing solutions rather than "fixing problems". Collaborative Language Systems (Andersen, 1995; Anderson, 1997; Anderson & Gehart, 2007) pays particular attention to the way that meaning is collaboratively arrived at through dialogue between therapists and clients. These approaches share theoretical origins and are all devoted to the constructive (versus diagnostic) dimensions of therapeutic work.

Although it was primarily intended as a YSB staff development initiative, the training was offered free of charge to a pair of local practitioners who worked at a

different agency not exclusively focused on youth. The cross-fertilization that resulted from this bringing together of practitioners from separate therapeutic sectors was experienced as helpful by some of the participants, and contributed to the invention of the first collaborative practice group.

This is how it happened. When the training program ended, the YSB resumed relatively conventional small group supervision. I facilitated one of these groups. The group included the two “outside” therapists who were graciously offered continuing participation by the YSB at no charge. At this point, our supervision inadvertently reverted to a thinly veiled variation of a familiar supervision scenario: a “supervisee” presents, and others (more or less) raise the question “Have you tried...?”. This practice contrasted with the tenor of the training we had shared, training replaced the convergent search for single “objective” truth with an open-ended, tentative sharing that allowed for multiple possibilities. We felt stale, and wondered aloud whether there would be a way to recapture the dynamic sense of collective exploration we had shared as part of the YSB training.

At this point, the idea arose to expand the supervision group to 10 or 12 members from both YSB and other community locations. We thought we could recapture some of the energy which comes from larger group interactions and facilitate the cross-fertilization of ideas that happens when members work in disparate contexts. The idea was presented to YSB management, who daringly agreed, and the first collaborative practice group was born.

#### Collaborative Practice Group #1

To form the group, we generated a list of practitioners in the community whose work and values we knew to be similar to our own. It wasn't difficult to identify names, and we ended up with a group of about 12 practitioners, a mixture of counselors, child and youth workers, social workers, and some recent graduate students. The members all brought their unique gifts and varied backgrounds to the group. Now, with 12 hungry learners assembled around a table each meeting, united in a commitment to collaborative approaches, the energy was palpable. The group coalesced quickly, and members began to network with each other in a variety of ways. This included cross referrals, and also the development of initiatives to be undertaken outside of our group meetings. These initiatives included mutual participation in live sessions conducted at the YSB and elsewhere.

In the first few months, I played a more central role as a university-based counselor educator with a history of publications and presentations devoted to postmodern theory and practice. Over time, our group evolved to a more collaborative model where all participants brought material to the group, including articles, handouts and structured learning activities which they facilitated.

At the end of the first year of this experiment, the YSB concluded the collaborative initiative was working, and committed to a second year. By then, we had a strong sense of collective identity. We voted on a group name, calling ourselves the *Collaborative Community Practice Group (CCPG)*. And we designed a "gathering" to provide a forum for group members to step forward with their developing knowledges and skills. We were also interested in reaching out to the community in the hopes of expanding our network of collaborative practitioners.

We called the conference *Working Together: Exploring Collaborative Practice*. It was planned over many group meetings, and designed so that each group member would have an opportunity to participate some substantial manner. We even co-wrote a short play to demonstrate certain aspects of our work.

The gathering was attended by several dozen local therapists, counselors, youth workers, social workers, and graduate students hand-picked for their interest in collaborative approaches. It unfolded smoothly and was enormously energizing for the group. It was also received very well by attendees whose written feedback sheets were perused with interest by the management at YSB. At this point, two years after the start-up of the first group, there was interest expressed in the second group by other YSB staff members as well as colleagues in the community. The YSB approved the formation of a second group, to be facilitated by a member of the original collaborative practice group.

### Groups #2, #3, and Beyond

The body of theory which informs the work of the collaborative practice groups privileges local knowledge and contextual meaning over the search for universal "truths". So it is probably not surprising that, although the groups share family resemblances, each one is distinct. Our inclination has been to adapt the group processes to the particular needs of the members. The second group also started out on a biweekly schedule of three hour meetings, but after detailed consultations among members and the facilitator, Christine Novy, the group decided to primarily focus on training in narrative therapy. This distinguished it from the more varied activities of the first group. Like the first one, however, this second collaborative practice group adopted a variation of reflecting team

work as the primary vehicle for responding to each other within the group and in any clinical sessions attended by group members. The two groups stayed in touch throughout that first year, coming together in the spring for a conjoint meeting where the second group reflected on their learnings, and the first group responded via reflecting team.

While these developments were unfolding, the seeds of the third group began to sprout. We got a phone call from the dynamic executive director of a local non-profit housing agency. Val Hinsperger had been searching for ways to support reflective practice amongst the front line practitioners in her sector. She Googled the term "reflective practice" and stumbled on the first collaborative practice group through an article posted on a website. Val joined one of our group meetings and we demonstrated our process by responding to her presentation in a reflecting team format. She was immediately enthusiastic, and in the weeks to follow she and I devised a three-year funded research project, focused on the formation of an inter-agency reflective practice group for front-line workers in the non-profit housing sector.

This third group is now in its second year of operation. Although participants have had minimal prior training in collaborative approaches as I use the term here, the group is not devoted to "therapy training" in the conventional sense. Instead, the bi-weekly meetings provide a forum for members to share their experience of their work, both in general terms, and in reference to particular "cases" challenging them. The reflecting team format is used in place of more open-ended sharing--which too often can deteriorate into mutual complaining or advice giving, neither of which manages to exploit the rich and constructive sharing possible within a group setting. Members talk about their work in more general terms, as well as speaking of particular challenges they face.

However, their manner of sharing is rigorous and much of the first year was taken up developing reflecting skills.

This third group differs from the first two in another important way. It is funded differently. Facilitation fees are shared by the agencies whose employees participate. In their formative years, the previous groups were exclusively underwritten by the YSB. Having the funding shared contributes to a certain robustness for the initiative because it does not depend on a single financial source. Involving a research component also helps to ensure the ongoing participation of member agencies, many who are interested in research both out of their commitment to improving practice, and in some cases because of requirements from their own funding sources.

A second community gathering involving the three collaborative groups and other interested community members happened at the conclusion of the third group's first year of operation. This gathering had multiple purposes. It was a chance for the three operating groups to connect with each other face-to-face, and also an opportunity to provide a snapshot of the groups for other practitioners who had expressed interest in participating. Members of each group presented in unique ways: some were interviewed, others shared anecdotes about "sparkling moments", others reflected openly on their learnings. There was another short play, this time with a troupe of presenters directed by (drama therapist) Christine and ingeniously named *Plays on Conversations*.

Invitees interested in joining a group filled in short questionnaires to assist in planning. This meeting marked the transition from a sole funder (YSB for the first two groups) to a shared funding model where new members were being asked to contribute for participation. Their responses are now being analyzed; at the time of this writing it

appears a fourth group is emerging and that all new members will pay a fee to cover the facilitation costs.

There was another important gathering a few days later when members of the housing-sector group met with their managers to review the group's first year. A reflecting team process with central here as well. Marc interviewed each group member about their experience. After a year of developing reflecting skills, the group members shared their experience in vivid and passionate words. They spoke of their commitment to hope-filled, respectful practice, and the challenges of the work. These articulate sharings were a powerful testament to the group process. The managers who witnessed reported how struck they were with confidence and clarity with which their employees shared their voices.

In a follow-up meeting to this gathering, the managers expressed their enthusiasm for the process and indicated they were interested in forming a reflective practice groups themselves. Discussions are now underway for the formation of what may be the fifth collaborative practice group in the city. As with the other groups, this one will likely have a "shape" of its own-- particularly because the prospective participants are managers, rather than front-line workers. Nevertheless, it is expected the group will the commitment to constructive, respectful reflection, and many of the values expressed within the collaborative therapies.

#### Tapping Local Knowledge: Closing Reflections

While there are good reasons for providing front line counselors and therapists with access to the work of "expert" practitioners, there are some clear downsides to relying primarily on outside expertise for upgrading skills. This has long been

understood in the domain of education. Sfard (1998) talks about the distinction between the *acquisition* metaphor versus the *participation* metaphor for learning. Learning as acquisition is about the largely passive acquisition of knowledge from another, whereas the participatory view sees learning as a communal, constructive process. He argues that effective learning is increasingly seen as a joint endeavour, rather than the individual accumulation of private possessions: “Learning a subject is now conceived of as a process of becoming a member of a certain community” (Sfard, 1998, p. 6).

Most of all, the the practice groups are about community, about sharing a way of life (St. George & Wulff) characterized by a collaborative spirit. Imbedded in this idea, however, is the notion of a *resourceful* community possessing much of the knowledge and skill for its own development. In this sense, our group building initiatives have been informed by anthropologist Clifford Geertz’ (1983) notion of “local knowledge”. The term refers to the beliefs, symbols, and rituals of meaning-making specific to cultural groups, and it here concerns what is happening at the front line, in the unique contexts that bear the stamp of particular agencies, particular clients, particular practitioners working from particular orientations in particular situations. In describing our efforts to achieve this, we are not motivated to distil a tidy list of “best practices” presumably applicable across contexts. Indeed, the narrative quality of this account is intended to allow readers to appreciate the community-building initiatives described here as contextually imbedded, and to use their own judgment to discern what learnings they might bring to related initiatives of their own.

One final reflection concerns the sharing of practice, rather than talk *about* practice, that is a common feature of the various collaborative group processes.

Reflecting teams in their various incarnations involve careful attention to choice of language and focus of expression, much like therapeutic practice itself. Whereas case conference participants most often do not *show* the work or *do* the work in the room, reflecting team members pay acute attention to their speech, utterance by utterance, while sharing on behalf of the practitioners and/or clients in the room, or for absent clients via a recorded reflections. More than merely recounting practice, reflecting is therefore a *form of practice* itself. Readers familiar with reflecting team practice will likely appreciate this sense of "seeing someone work"--their idiosyncratic ways of being, their style of speaking and conceptualizing--when hearing them reflect.

As my colleagues and I continue to develop further collaborative practice groups, and to refine the reflecting practices they utilize, we experience a collective purpose and a sense of connection that vitalizes as our work. This is not to say that these initiatives do not come with their own challenges. At the time of this writing the practice groups are experiencing a difficult transition from a reliance on a single institution for funding, to a model that distributes funding amongst a variety of agencies and private practitioners. This comes with administrative challenges, and increases the burden on group facilitators to ensure that all paying participants have experiences which they deem worthy of the (sometimes personal) expense. How this transition unfolds will be part of a subsequent story of these developments, a new leg of our collective journey.



## Footnotes

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2. This research was partially funded by a grant from the Social Sciences and Humanities Research Council of Canada.
3. For the purposes of this articles I will occasionally use the term “reflecting team” to refer to both traditions. Readers interested in learning more about these practices are encouraged to consult Andersen, 1995; Friedman, 1995; and Anderson & Jensen, 2007.
4. James Galipeau, Stephanie Kain, Randy Leibovitch, Anna Nyiri.

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