

# Community of Practice: Creating Organizational Capacity and Culture for Service Evaluation

Sharing from the Hong Kong Red Cross

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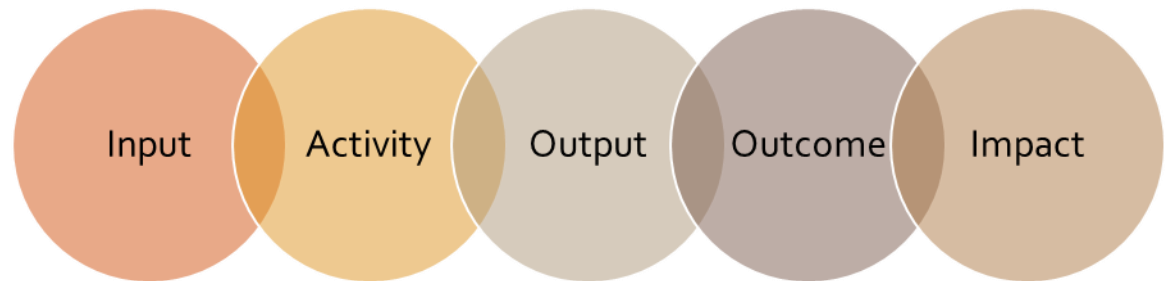
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## Why service evaluation in HKRC

- Accountability
- Quality improvement
- Learning organization
- Knowledge-based organization

# Our philosophy

- Results based management (RBM)



- Evaluation is an integral part of service and program
- Staff capacity is essential

# A Journey since 2014



2011 - 2016

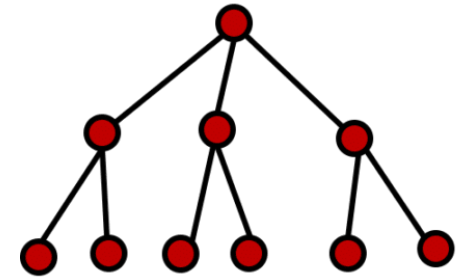
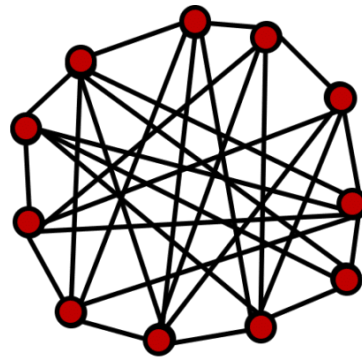


2017 - 2022

- Focused on capacity and culture building
- Started with pilot projects
- External resources engaged

- Developed system and mechanism
- Built in daily work
- Hired first research staff

## Our strategy



- Bottom-up and participatory

- Top-down and compulsory

## Approaches

1. Integration with strategic plan and revision of annual plan template
2. Formal training, briefing and experience sharing session
3. Provision of template and sample
4. Review and give feedback on project proposals and annual plans
5. Joining / leading the evaluation teams
6. Knowledge hub (intranet with useful reference and samples)
7. Peer Group: Community of Practice

# Peer Group: Experience of Community of Practice

## Peer Group: How did it start?

2014-16 (Sow the seeds)

Proactively worked with project teams on project design, logic model development and project evaluation.

2017 (First harvest)

Identify and invite the Right People\* (interested, curious, eager to make improvement, willing to share) to join CoP

\*It's okay not covering all service teams.

\*VOLUNTARY participation is the golden rule.



## Peer Group: Objectives

### Objective:

- To improve knowledge of RBM
- To arouse interest of RBM
- To build mutual support
- To form a cross-departmental evaluation team (hidden long-term agenda)

## Peer Group: What do we do?

What do we do in 1.5 hours?

1. Every member will take turn to share a topic\* (30 mins).
2. The topics are based on their daily work. We, as facilitators, will help them relate the daily work to RBM.
3. Free flow discussion (30-45 mins) after the sharing.
4. Round table update of recent RBM related work/tasks, external news. (10-15 mins)

\*In 1<sup>st</sup> meeting, everyone listed out their recent work related to RBM. Then we voted for the most interesting ones and the concerned colleague will do the sharing as scheduled.

## Peer Group: Arrangement

- Meetings are held every 2-2.5 months.
- Not required to make a commitment to join every meetings. It's okay to be excused.
- Free to invite others to join.
- Supervisors are acknowledged about their staff joining the group.

## Peer Group: Changes and impacts

### Changes in the group:

1. Aroused interest about RBM
2. Better knowledge of RBM
3. Improved understanding of practices in other departments
4. Be inspired

### Impact:

1. Bottom-up culture building
2. Recognition from department heads (collaboration in Project Evaluation)

## Peer Group: Key Success Factors

### Open mind

Allow unexpected changes in objective/rundown/  
members/anything – CoP is not a duty!

### Ownership

Members own the group, so they do the sharing, and  
the discussions. They make the decision to continue  
the group (or not).

### Right People

Voluntary, interested, curious, eager to make  
improvement, willing to share

### Recap of Knowledge

Voluntary members do not spend their time for  
nothing. Ensure everyone (incl. absentees) get the key  
learning.

## Agency resources

- Finance: external consultants
- Structure: new working team, with a research staff
- Mandate: policy and guideline
- Steer from the Governance and support from the top management

Our  
experience to  
make  
changes  
happen

- Be firm. Make the goal and vision clear.
- Be flexible. Keep learning.
- Be empathetic. Let's do it together.