**Reviewer’s report**

**Title:** Assessing Communities of Practice in health policy: A conceptual framework as a first step towards empirical research

**Version:** 1  **Date:** 4 March 2013

**Reviewer:** Maarten Kok

**Reviewer’s report:**

The manuscript on Assessing communities of practice is a thorough and interesting attempt to provide a conceptual framework that can be used to assess COPs.

The literature on COPs is complex, conceptually diffuse and ambiguous. The COP concept was initially developed through grounded, detailed empirical work, emphasizing the situated character of learning in practice. This grounded theoretical notion has since been transformed into a management tool that has gained considerable attention as key aspect of organizational learning and informal problem solving. This ‘managerial shift’ has been forcefully criticized by authors arguing that this shift obscured much of the original richness of the notion. An unresolved debate in the literature is to what extent COPs can actually be created or fostered. While this theoretical debate continues, attempts are made around the world to create COPs. Meanwhile, there are very few empirical demonstrations that COPs can be fostered and the claims about the value of COPs lack empirical evidence (Braithwaite et al 2009, Ranmuthugala et al 2011). This makes this manuscript, and the attempt to develop a framework for assessing COPs important. At the same time, I am not entirely convinced of the depth of the proposed framework and the applicability of the long list of almost 150 indicators.

A major challenge is that the framework tends towards linearity, starting from investments into COPs and ending with better health. The risk is that very complex dynamics and processes are transformed to fit them into the framework, instead of the framework being an analytical focusing device to learn what is actually going on.

I suggest cutting the framework in two:

A first part in which a strategy to foster a COP contributes to the actual emergence of a de facto COP in practice.

A second part in which an emerging COP contributes to learning and change in policy and practice.

Both are interesting evaluation challenges.

I foresee two ways forward. The first would be to delve deeper into the more critical debate on fostering COPs, bring in more literature on the evaluation of complex processes in systems, such as a co-evolutionary perspective and transition theory and further refine the framework.
The other way forward for is the empirical route, in which the framework is critically applied and further refined by learning in practice. This is the route the authors seem to choose and I can agree with, as long as studying the actual dynamics remains the focus I still do have two suggestions that I would kindly invite the authors to respond to.

- Major Compulsory Revisions (which the author must respond to before a decision on publication can be reached)

The dualism of COPs

Throughout the article, there is a challenging dualism on COP as a de facto phenomenon that emerges in practice (and exist everywhere), and COPs as a formal management strategy. This dualism is briefly recognized by the authors in the beginning, but not solved and remains problematic throughout the evaluation framework. For instance, when the authors discuss how ‘contributions’ may result from COP’s activities (in two alineas before the discussion, and also in the opening of the discussion). Do they mean the activities that are part of the COP management strategy, or the activities that are part of the de facto COP that has emerged?

My suggestion would be to clarify that through a COP strategy, a de facto COP should emerge. I suggest that every time the notion of COP is used in the paper, it should be made explicit whether the authors refer to a strategy or a de facto COP.

Even evaluating the extent to which the activities of a COP strategy will facilitate the emergence of a de facto COP is a complex challenge. A split in the framework may be in order, between monitoring how activities as part of a COP strategy facilitate the emergence of a well-functioning COP and monitoring how the emerged COP(s) contribute to more research informed policy and practice.

‘Niche’ should be ‘Regime’

The authors use the concept of ‘niche’, to refer to the diverse ‘worlds’ in which the researchers, policy makers and health practitioners function. I suggest the authors replace ‘niche’ with the notion of ‘regime’. In the science and technology studies and the innovation literature, a ‘niche’ is considered a protected space (a lab, experiment, r&d department) in which a novelty is produced. The notion of a ‘regime’ refers to dominant practices and structures, such the scientific regime, traffic policy regime, medical regime, Evidence based regime, etc. This mistake is also made in the nice article by Janssen et al. Extensive literature on regimes exist, e.g. the multi-level framework described by Schot.

- Discretionary Revisions (which are recommendations for improvement but which the author can choose to ignore)

Several elements of the original COP diagnoses by Wenger are neglected in later managerial approaches. Two key neglected issues are: 1) power, which is considered a vital element in the process of negotiating meaning in COPs and, 2) trust, which is difficult to create in a managed COPs. The authors may want to reflect on these, as they seem important for fostering joint learning, especially in development dynamics.
Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I declare I have no conflict of interest