

IHE NETWORK CLINICAL PRACTICE AND PARTNERSHIP SUBCOMMITTEE CONCEPTUAL FRAMEWORK

April 8, 2016

Introduction

The IHE Network's Clinical Practice and Partnership Subcommittee was established in fall 2014 with representation from six institutions of higher education (IHEs) to initiate a statewide IHE discussion about P-12 school partnerships (see Appendix A for list of IHE subcommittee members). The subcommittee members agreed to move past traditional models of partnering with P-12 schools and move towards more robust models to improve teaching, leading, and learning in New Hampshire.

In summer 2014 and summer 2015 additional members of the IHE Network gathered to share ideas, resources, research and models of school-IHE partnerships. At the summer 2015 meeting, an initial draft conceptual framework was presented for discussion with a focus on the development of guiding principles.

The purpose of the IHE Partnership Subcommittee outlined in the *NH IHE Network Position Statement* as stated in fall 2012 is: to create a community of practice to share knowledge and experiences related to the development of school-IHE partnerships. This involves:

- 1. Taking inventory of current partnership practices at NH IHEs and developing a resource list of IHE faculty contacts with expertise in school-college partnerships.
- 2. Reviewing and sharing various state and national approaches to school-college partnership development.
- 3. Exploring the development of general guidelines for what constitutes a high quality school-IHE partnership in NH.

It was clear in the discussion among IHE Network members that a critical step in the process of working as an IHE network to support high quality partnerships is to develop a concise conceptual framework that will evolve to guide our future efforts.

Definition of Partnership

The following definition of partnership is provided by the Council for the Accreditation of Educator Preparation [CAEP] (2015): A partnership is a "mutually beneficial agreement among various partners in which all participating members engage in and contribute to goals for the

preparation of education professionals. This may include examples such as pipeline initiatives, Professional Development Schools, and partner networks" (p.6).

Background

Institutions of higher education are at a critical juncture of preparing effective teachers and other school professionals who can ensure the success of all children. Clinical practice, and the relationships between IHEs and P-12 schools provide the foundation of our work in educator development. "As much as possible, clinical experiences should simulate the actual practice of teaching that candidates will encounter in their first job" (Council of Chief State School Officers, 2012, p.11). Furthermore, there is a demonstrated relationship between the success of a teacher candidate and strong clinical preparation (American Association of Colleges for Teacher Education, 2010). In order to accomplish this, intensive and immersive clinical experiences need to be developed with P-12 schools. Research has shown that rigorous programs with intensive clinical experiences have produced graduates with greater efficacy and higher retention rates (Castle, Fox & Souder, 2006). Educator Preparation Programs across NH are experimenting with new models and approaches to clinical preparation and partnering with schools. The need to provide a forum for sharing and learning from one another's institutional practices is critical. Schools and educator preparation programs across the country believe that in order to reform education, our institutions must work together to support each other (American Association of Colleges for Teacher Education, 2010; Robinson & Darling-Hammond, 2005).

In 2010, NCATE (National Council for the Accreditation of Teacher Education) commissioned a blue ribbon panel that produced an expanded examination of field experiences for teacher candidates: *Transforming Teacher Education through Clinical Practice: A National Strategy to Prepare Effective Teachers*. The report explicitly recognizes, if not demands, that educator preparation programs are "fully grounded in clinical practice and interwoven with academic content and professional courses" (NCATE, 2010, p. ii). At the same time, the panel acknowledged theory, content, or the pedagogy of teaching but encourages partnerships to "develop seamless curriculum that spirally integrates coursework and laboratory experience with extended embedded school experiences" (p. 19). While numerous educator preparation programs have experimented with various approaches to clinical preparation, NCATE, and more recently CAEP, challenges teacher education programs and school districts to systematically engage in extensive reform.

To prepare effective teachers for 21st century classrooms, educator preparation must shift away from a norm [that] emphasizes academic preparation and course work loosely linked to schoolbased experiences. Rather, it must move to programs that are fully grounded in clinical practice and interwoven with academic content and professional courses (Darling-Hammond, 2006; NCATE, 2010). Throughout the 2010 NCATE report, the term "shared responsibility" for teacher education is emphasized. No longer can qualified and well-prepared candidates be delivered to school districts without the support and collaboration of P-12 schools. "The report recommends sweeping changes in how we deliver, monitor, evaluate, oversee, and staff clinical based preparation to nurture a whole new form of teacher education" (NCATE, 2010, p. iii). The current national accrediting body, CAEP, was influenced by this body of work and the value of clinical practice in the context of formal partnerships with schools is clearly evident in *Standard 2 Clinical Practice* (see Appendix B). The importance of developing formal partnerships with P-12 schools is clearly stipulated in CAEP Standard 2 (2015), "The provider ensures that effective partnerships and high-quality clinical practice are central to preparation so that candidates develop the knowledge, skills, and professional dispositions necessary to demonstrate positive impact on all P-12 students' learning and development" (p. 6). Additionally, CAEP stresses that IHEs and their school partners "co-construct mutually beneficial school and community arrangements" (p.6). CAEP emphasizes that partners work together to select and support clinical educators and collaborate to retain them as they move through their careers.

In October 2011, the NH Department of Education published the *New Hampshire Task Force on Effective Teaching Phase I Report* (NH Department of Education, 2011) where the focus was not just on defining effective teaching for the state but how to create a blueprint or a model that includes (1) teacher education for initial certification, (2) induction and mentoring for beginning teachers, (3) professional development for experienced teachers, and (4) useful and valid teacher evaluation systems. The report stresses the importance of schools and educator preparation programs working together to support P-20 student learning and professional development (NHDOE, 2011).

The New Hampshire State Department of Education is actively engaged in a number of collaborative efforts for statewide reform, which dovetails with the work of the IHE Network subcommittee. Currently, a state steering committee of the Network of the Transformation of Educator Preparation (NTEP) is engaged in collaborative work through the Council for Chief State School Officers (CCSSO). One of the goals of NTEP is to "develop robust models of clinical practice". Similarly, the NH CEEDAR steering committee has established the goal to "Develop mutually beneficial partnerships between preparation programs and elementary, middle, and high schools". CEEDAR (Collaboration for Effective Educator Development, Accountability and Reform) is providing technical assistance to improve the preparation of educators to teach diverse learners (students with disabilities). Both statewide and leadership steering committees intend to review the state and national standards in regards to clinical experiences and partnerships (see Appendix B for CAEP standard two and Appendix C for New Hampshire state standards).

In May 2015, the NH Commissioner of Education convened a joint meeting of school district administrators and IHE faculty to discuss successes, challenges, and needs. The discussion centered on how to improve partnerships between the schools and IHE's and the desire for both parties to work together to improve student achievement and create a pipeline of qualified teachers. Additionally, the NH Department of Education in its Vision 2.0 presents higher education and P-12 school as a seamless integrated system that supports these efforts (NH Department of Education, 2015).

All IHEs have some degree of partnership with schools, but we are working together to create greater consistency and framing of our work across programs so we can realize our commitments. These connections provide the cornerstone for the ongoing development of educator talent in the state. Our connections with local school districts need to be further refined and expanded so that educator preparation is valued as a "shared responsibility" (NCATE, 2010).

We value each unique relationship that we build with P-12 schools, and we realize that the diversity of school experiences in which our candidates engage is essential for their development. School partnerships can have an enormous impact on the future of public education. Collectively our Educator Preparation Programs are evolving to respond to emerging expectations and changing needs of schools. We need to ensure educator preparation candidates are well prepared to start their careers where they will continue to grow and thrive and have a positive impact on student achievement.

Guiding Principles

NH Educator Preparation Programs (EPPs) collaborate with schools in many different ways. The most common way is within the context of supporting field experiences for pre-service and inservice educators. Additionally, EPPs provide professional learning opportunities, mentoring, on site graduate courses and programs, conduct collaborative research with schools, and engage in other outreach activities.

The following three principles evolved from subcommittee meetings, an initial literature review including the National Association of Professional Development Schools (NAPDS) Nine Essential Principles and summer statewide partnership meetings. The intention is that these basic principles will underlie our collaborative work moving forward across IHEs. As a collective group of IHEs we realize that one size does not fit all, standardization is not what we are striving to achieve. Flexibility will be critical in guiding our efforts.

Principle 1: Partnerships improve pupil learning

- Build capacity for collaborative learning among adults/professionals related to pupil learning.
- Make student learning at the core of our work. The primary goal of a partnership is to improve teaching, learning (Heafner, McIntyre, & Spooner, 2015) and ultimately improve NH schools.
- Connect theory to practice in clinical placements with corresponding coursework with intent of developing correlating projects and experiences that show how theory informs practice (AACTE, 2010; Allsopp, DeMarie, Alvarez-McHatton, & Doone, 2006; Darling-Hammond, 2006).
- Support teacher candidates in learning how to do the work of teaching, rather than just theorize.

Principle 2: Partnerships foster a culture of adult lifelong learning.

- Emphasize teaching as a profession not an occupation. Communities of practice elevate the teaching profession and improve educator preparation.
- Realize that students are not finished 'learning to teach' when they graduate from an IHE. Collaborate among IHEs to provide regional support and professional development to NH EPP graduates across the teaching continuum.
- Professional learning occurs across all four pillars of "learning to teach" as outlined by the New Hampshire Department of Education (2011) *Task Force on Effective Teaching*. We desire to improve our profession through specific practices such as: educator rounds, utilizing performance plus data, educator assessment/accountability, immersion in a variety of clinical models, and NH TCAP.

Principle 3: Partnerships are bidirectional and mutually beneficial.

- Practice knowledge, skills, and dispositions, in an authentic setting, are all of which are enhanced by a clinical, bi-directional relationship (KSC, 2012).
- Share vision and values between IHEs and schools (Snyder, 2005).
- Be sensitive to goals of the school and the context where clinical educators practice and integrate within the school culture.
- Collaborate and share decision-making on curriculum development activities, professional learning, and applied research to solidify long-term partnerships (Robinson & Darling-Hammond, 2005; Wasielewski & Gahlsdorf Terrell, 2014).
- Create interconnected structures of support for educators and community stakeholders in education. Networked communities are proactive and responsive over time.
- "Collaboration occurs through mutual problem solving on issues related to student learning, shared teaching at the university and schools, and cooperative, innovative supervision of teacher candidates" (Boyle-Baise & McIntyre, 2008).

The Nature of NH IHE Partnerships with P-12 Schools

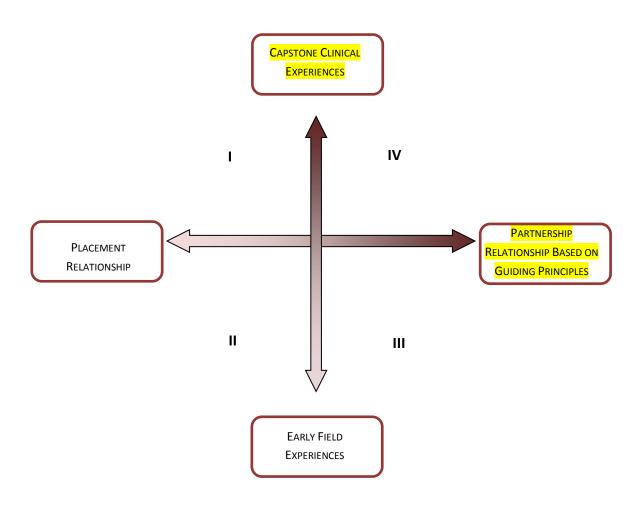


Figure 1: Nature of IHE Partnerships with P-12 Schools (IHE Network Partnership Subcommittee, 2016)

Figure 1 helps to frame the types of relationships NH EPPs have with schools and districts. The x-axis represents the spectrum of relationships with schools ranging from placements to partnerships. On one end of the spectrum students can be placed in schools and EPP faculty focus their energy on the supervision of the teacher candidate. These are often one time opportunities, unidirectional, and focus solely on supporting the teacher candidate. In many respects this is the "traditional" relationship EPPs have had with schools. The other end of the spectrum reflects a true partnership which aspires to reflect the guiding principles outlined in the conceptual framework while supporting the development of EPP candidates in the field. The y-axis represents the range of field experiences (e.g., site based courses, freshman through junior year experiences) through intensive and immersive clinical experiences (e.g., student teaching, internships, capstones). The focus of our work in the Clinical Practice and Partnership Subcommittee is to begin the conversation about ways to become more systematic across IHEs so relationships with schools gravitate toward quadrants III and IV.

Revised Purpose and Vision

Purpose

To create a community of practice to share knowledge and experiences related to the development of school-IHE partnerships so that a coordinated and statewide effort can be established.

Vision

NH Educator Preparation Program educators will partner with P-12 school educators to effectively support the development of teaching and learning for pre-service and in-service educators so that P-12 learners can achieve their maximum potential.

Action Steps

The IHE Network Clinical Practice and Partnership subcommittee proposes the following revised action steps to move this initiative forward in the context of the initial charge to the subcommittee:

- 1. Reconfigure the membership of the IHE subcommittee and consider representatives or seek feedback from P-12 schools, statewide administrator organizations (e.g., school board association, superintendents, principals). Collaborate with existing partnership statewide partnership initiatives (i.e., CEEDAR, NTEP, and other NH DOE initiatives).
- 2. Continue to develop and refine the conceptual framework through feedback and evidence from the literature. Share the framework and seek feedback from P-12 partners and other shareholders. Integrate this feedback with the literature to update the conceptual framework to reflect other voices.

- 3. Take inventory of current partnership practices at NH IHEs, create a list of IHE's and their school partners indicating degree of involvement using the frame in Figure 1, and develop a resource list of IHE faculty contacts and share model partnerships with larger education community. Outline commonalities and differences across IHEs to determine where we can identify and refine consistencies and respect the uniqueness of each institution.
- 4. Explore the development of indicators/outcomes (in the context of the guiding principles) for what constitutes a high quality school-college partnership in NH.
- 5. Collaborate with the IHE Leadership Subcommittee about ways to expand our clinical experience and partnership framework to IHE educational leadership programs.
- 6. Create an online platform for sharing of information from the subcommittee (e.g., consider the NH Networks).

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APPENDIX A

List of IHE Clinical Practice and Partnership Subcommittee Members

Subcommittee members

Co-Leaders: Steve Bigaj, Keene State College

Laura Wasielewski, Saint Anselm College

Subcommittee members:

Gerry Buteau, Plymouth State University

Vince Connolly, University of New Hampshire

Mary Ford, Granite State College

Kathy Holt, Manchester Community College

Cynthia Lucero, Concord Community College

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APPENDIX B

Council for the Accreditation of Educator Preparation (CAEP) Standard #2

The provider ensures that effective partnerships and high-quality clinical practice are central to preparation so that candidates develop the knowledge, skills, and professional dispositions necessary to demonstrate positive impact on all P-12 students' learning and development.

Components:

Partnerships for Clinical Preparation

2.1 Partners co-construct mutually beneficial P-12 school and community arrangements, including technology-based collaborations, for clinical preparation and share responsibility for continuous improvement of candidate preparation. Partnerships for clinical preparation can follow a range of forms, participants, and functions. They establish mutually agreeable expectations for candidate entry, preparation, and exit; ensure that theory and practice are linked; maintain coherence across clinical and academic components of preparation; and share accountability for candidate outcomes.

Clinical Educators

2.2 Partners co-select, prepare, evaluate, support, and retain high-quality clinical educators, both provider- and school-based, who demonstrate a positive impact on candidates' development and P-12 student learning and development. In collaboration with their partners, providers use multiple indicators and appropriate technology-based applications to establish, maintain, and refine criteria for selection, professional development, performance evaluation, continuous improvement, and retention of clinical educators in all clinical placement settings.

Clinical Experiences

2.3 The provider works with partners to design clinical experiences of sufficient depth, breadth, diversity, coherence, and duration to ensure that candidates demonstrate their developing effectiveness and positive impact on all students' learning and development. Clinical experiences, including technology-enhanced learning opportunities, are structured to have multiple performance-based assessments at key points within the program to demonstrate candidates' development of the knowledge, skills, and professional dispositions, as delineated in Standard 1, that are associated with a positive impact on the learning and development.

APPENDIX C

New Hampshire State Department of Education Relevant Field Experience Standards

Ed. 604.03 Requirements for Cooperating Practitioner. Each PEPP shall assess and ensure that cooperating practitioners:

(a) Have a credential under Ed 507 in the content, specialist, or administrator area in which the practitioner mentors the candidate;

(b) Have experience with at least 3 years as a certificate holder under Ed 507, or as a certified professional in another state, with experience in public schools, in the content, specialist, or administrator area in which the practitioner mentors the candidate;

(c) Demonstrate the skill to mentor candidates;

(d) Model high quality learning facilitation that results in student learning; and

(e) Are recommended by their peers, administrators, or institution faculty and staff.

Ed 604.04 Field Experiences.

(a) PEPP shall design varied field experiences that require candidates to interact with diverse learners, in diverse settings, and that are designed to help candidates integrate the requirements of Ed 609 and Ed 610 as well as the skills, knowledge and dispositions related to their area of endorsement.

(b) There shall be written agreements between field-placement sites that are committed to simultaneous review and reform of education and which:

(1) Make explicit the roles and responsibilities of the PEPP and the field-placement sites;

(2) Include the expectations for the PEPP and the field placement site;

(3) Articulate methods for solving problems which might arise; and

(4) Prescribe a procedure for modifying the agreement itself.

Ed 604.05 Early Field Experiences.

(a) Early field experience(s) shall require candidates to engage in a variety of experiences related to their content, specialist, or administrator area(s) for which the PEPP is designed.

(b) Each PEPP designed to lead to certification in a particular Ed 612 content area(s) shall require each candidate to participate in guided early field experience(s) before participating in a culminating field experience.

(c) Each PEPP designed to lead to certification in a particular Ed 614 specialist or administrator area(s) shall require each candidate to account for an early field experience before participating in a culminating field experience.

Ed 604.06 Requirements for the Culminating Field Experience.

(a) The PEPP shall require that each candidate successfully complete a sustained, and cohesive culminating field experience with sufficient opportunities to demonstrate the ability to acceptably perform the competencies described in Ed 610 and either Ed 612 or Ed 614.

(b) The culminating field experience shall require the candidate to assume the range of teaching or specialist or administrator area activities, roles, and responsibilities that demonstrate the candidate has the knowledge, skills and dispositions of a beginning educator.

(c) The PEPP shall work with the field experience supervisor supervising the candidate's culminating field experience to document a demonstration of competency in the depth and range of knowledge, skills, and dispositions detailed in Ed 610 and either Ed 612 or Ed 614 for the certification area(s) for which the program is designed. If the certification requirements for a specialist or administrator area specify a timeframe for the culminating field experience, the PEPP shall ensure that such timeframes are completed.

Ed 604.07 Field Experience Supervision.

(a) The culminating field experience supervisory system shall follow clearly articulated, written criteria for supervising candidates in the culminating field experience(s). The criteria shall include supervision of each candidate by institutional personnel or designee(s) and cooperating practitioner(s).

(b) The supervision shall include, but not be limited to, direct observation, evaluation of candidates, and follow-up conferences for providing timely, on-going and meaningful feedback.

(c) The field experience supervisor, cooperating practitioner, and candidate shall all have knowledge and understanding of the requirements in Ed 610, Ed 612 and the supervisory criteria. Both field experience supervisors and cooperating practitioners shall collaborate in the evaluation of candidates.

- (d) Field experience supervisors are selected based on their ability to:
 - (1) Recognize effective learning facilitation;
 - (2) Help candidates integrate academic content and pedagogy;
 - (3) Mentor and support candidates, including appropriate feedback; and

(4) Evaluate a candidate's performance as it relates to learning facilitation and student learning.

Ed 604.08 Coordination <u>of Field Experience and Cooperating Practitioners</u>. For each PEPP, an institution shall:

(a) Designate one or more persons to be responsible for coordinating and managing the field experiences, including the orientation and professional development of cooperating practitioners as mentors following clearly articulated, written criteria for mentoring practices;

(b) Provide for the supervision of each candidate by one or more field experience supervisors;

(c) Provide each cooperating practitioner with clearly articulated written criteria for mentoring practices and the requirements of the PEPP relating to field experiences;

(d) Provide each cooperating practitioner with any information concerning the candidate that may be helpful to the cooperating practitioner in mentoring the candidate, provided that provision of the information does not violate any confidentiality or privacy laws; and

(e) Designate one or more persons to develop partnerships with school districts