# **Our Clinical Practice: An Innovative Approach**

Delar K. Singh, PhD Associate Professor of Special Education Morehead State University Morehead, KY

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## **Our Clinical Practice: An Innovative Approach**

## ABSTRACT

This presentation covers the importance of clinical experiences in teacher preparation. It also includes a brief description of our innovative approach to clinical practice at a public comprehensive, state university in Southeast. Findings of our research endeavors indicate that majority of our teacher candidates agree or strongly agree that clinical experiences have helped them realize the realities of school and classroom. Further, clinical experiences have significantly contributed to their development as teachers. The presentation concludes with implications for action.

## **Our Clinical Practice: An Innovative Approach**

### **Section I: Content**

### A. Statement of the Issue

Clinical Practice represents an essential component of a teacher preparation program. It allows candidates opportunities to apply and reflect on their content, professional, and pedagogical knowledge, skills, and dispositions. In CAEP Standards, Clinical Practice is Standard 2, in NCATE Standards, Clinical Practice was Standard 3. Recognizing the significance of clinical practice, Association of Teacher Educators (ATE) has developed standards for field experience, AACTE (2018) also has released a report that expands upon the NCATE Blue Ribbon Panel report to provide guidance in the development and implementation of clinical practice. Despite all these reports and extant literature, different teacher education programs offer different kinds of clinical experiences. There is no one model of clinical practice (AACTE, 2010). We aim to describe our exemplary approach to clinical experience. We would like to share the ways we are leading in our state through leveraging partnerships with local schools and communities.

#### **B.** Literature Review

Downey & Cobbs (2007) investigated field experience of 61 preservice elementary teachers for a math course. One of the field assignments was to conduct a semi-structured interview with a student whose cultural background was different than their own. Findings indicated that field experience provided preservice teachers with increased insight into math instruction and learning needs of diverse students. The researchers concluded that well- constructed field experiences can help pre-service teachers gain understanding of important cultural considerations related to effective teaching and learning.

Gill, Sherman, & Sherman (2009) studied 140 preservice teachers who were placed in a number of professional development school sites. A survey about attitudes towards students with disabilities was administered to the preservice teachers in the beginning of semester and then at the end of semester. Analyses of data indicated that after the field experience pre-service teachers had a significant change in their attitude towards students with disabilities.

Cooper & Nesmith (2013) investigated the field experiences of pre-service math teachers in two separate school districts in a qualitative research endeavor. Findings indicated that field experiences influenced the preservice teachers' perspectives and beliefs toward math teaching, their application of math pedagogy, and their development as math teachers.

Peebles and Mendaglio (2014) examined the impact of field experience offered concurrently with an inclusion course on pre-service teachers' self-efficacy for teaching inclusive classrooms.

Data were collected from 141 teacher candidates. Results indicated that field experience and inclusion course both produced significant gains in self-efficacy.

Welsh & Schaffer (2017) examined the development of effective teaching skills in secondary teacher candidates enrolled in an early field experience directly tied to a pedagogical course. Data collected from faculty instructors, mentor teachers and teacher candidates indicated that field experience helped secondary teacher candidates develop effective instructional strategies, classroom management, and curriculum design.

As is evident from the above literature review, all field experiences are not alike. There is amazing variability in their design, implementation, and desired outcomes. Further, field experiences are different along several other dimensions such as the duration, intensity, their place in the teacher preparation curriculum, the way they are evaluated, the quality of supervision and feedback, the learning activities teacher candidates are expected to engage in, their integration with pre-service coursework, the nature of university-school partnerships, the large context of the teacher preparation program in which they take place, the opportunities for support as well as learning from the peers, and lastly the setting and the culture of school in which candidates are placed. There is not one Model of clinical practice (AACTE, 2010). Their variance poses a challenge to the researcher and to the practitioner. It prevents us to draw any definite conclusions.

Moreover, as Wilson & Floden (2003) ascertained, we lack reliable and valid measures of impact as well insights into what specific features of clinical experience are more effective and which specific features are less effective. In light of incomplete and inconclusive evidence, it is imperative that investigators continue to examine the impact of clinical experience on the preparation of teacher candidates.

Despite our inability to generalize from the current research, there is hardly any disagreement amongst professionals about the value of practical experience in learning to teach (Education Commission of the States, 2003). According to NCATE (2010), for sparking improvement in P-12 learning and achievement, improvements in clinical practice hold a great promise. Quality clinical experiences even have the potential to lower teacher attrition.

#### C. Contribution

Our work relates to the **Strand IV:** Clinical Practice and Community Engagement. We address the **question:** In what ways are educator preparation programs leading in their states through leveraging partnerships with schools and/or communities? **We** discuss clinical experiences of our public, comprehensive state university in southeast. We share the policies that support our clinical partnerships. Our field experiences are governed by policies of Educational Professional Standards Board (EPSB) which has required since 2013 that before student teaching, candidates complete a minimum of 200 clock hours in a variety of P-12 school settings. The policy requires that candidates interact with families of students, attend a school board meeting, participate in school-based professional learning community, and engage with diverse populations of students from a minimum of two different ethnic or cultural groups of which the candidate would not be considered a member. We will share the ways we distribute 200 clock hours across teacher

preparation courses in special education program and the assignments candidates complete at their field placement site. We will talk about strategies we use to help candidates connect theory with practice & how we collaborate with P-12 schools. We share innovative features of our clinical experiences such as mandated training for all mentor teachers, and university supervisors with Blackboard, Learning Management System, weekly presence of our faculty in partner schools, regular meetings of faculty and mentor teachers, open lines of communication between faculty, mentor teachers, and building principal, end of semester mentor teacher evaluation and candidate evaluation, end of semester social for faculty, mentor teachers, and candidates.

We discuss how faculty go into schools before the beginning of semester and work with mentor teachers in placing candidates in their classrooms. Faculty electronically send their syllabi to mentor teachers. Lines of communication are always open between faculty and mentor teachers. In the events of candidate absence from the placement site and/or any candidate dispositional issues, mentor teachers e-mail the faculty and together they resolve the issue.

#### D. Relevance

A survey of our 67 candidates (n=67) indicates that they find their clinical experience to be very effective and responsive of their training needs. Anecdotal evidence points that we are leading in our state, our candidates are in great demand upon graduation and regular meetings with partner school district administrators show our candidates are doing well. Here are findings of one of our surveys:

- ✓ One hundred percent of the teacher candidates agree or strongly agree that clinical experience has helped them realize the realities of school and classroom.
- ✓ Approximately 99% of the teacher candidates agree or strongly agree that the clinical experience increased their pedagogical knowledge and subject matter knowledge.
- ✓ Overall, 100% of the teacher candidates agree or strongly agree that clinical experience provided them opportunities to observe models of exemplary practice.
- ✓ Approximately 99% of the participants agree or strongly agree that clinical experience has played a significant role in their teacher preparation.
  - Here are samples of qualitative data:
- ✓ "Field experience helped me realize what is expected of me".
- ✓ "It has helped me in my presentation skills".
- ✓ "It helped me learn what it takes to prepare for class every day to achieve maximum learning".
- ✓ "It has made me somewhat more comfortable in teaching."
- ✓ "My anxiety level has decreased a little bit".
- ✓ "I have been able to interact with many different types of students".

✓ "I did not realize, how much a teacher could mean to a student who has rough home life.

## **E.** Implications for Action

It is imperative for teacher education programs to continue with quality clinical practice as an integral part of teacher preparation. It is also essential that we continue **researching** exactly what makes a clinical experience a quality experience. **At current time**, **we do not even have a shared terminology**. Some programs refer to clinical practice as field experience, others clinical practice/experience, some refer to it as practicum, and others refer to it as internship. Our presentation is likely to provide us with useful, objective feedback. The presentation, interactions, and the feedback might lead to an advanced scholarly contribution and added improvements to our approach of clinical practice.

#### **Section II: Outcomes and Methods**

## A. Learner/Participant Outcomes

At the end of this session, attendees:

- Demonstrated knowledge about the unique features of our clinical practice.
- Had opportunity to network with other attendee teacher educators who are interested in designing and implementing quality clinical experiences.
- Were able to discuss the voices of our candidates about their clinical experiences.

#### B. Methods

- ✓ Using handouts and PowerPoint slides, we shared with attendees all that we have learned about the effectiveness of our clinical practice.
- ✓ We used principles of collaborative learning.
- ✓ We engaged audience in reflective dialog about developing and implementing effective clinical experiences.
- ✓ We invited their input and objective critique of our approach to clinical practice.
- ✓ We invited them to share the features and successful elements of their clinical practice.
- ✓ We shared with them voices of our teacher candidates

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