

**Clinically Based Models of Teacher Preparation: A Snapshot of Three Systems**

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**Abstract**

A teacher preparation institution critically reviewed current programs and began moving toward a clinically based model. One focuses on Middle Grades/Secondary Math and Science, another focuses on Secondary English Language Arts, and a pilot project focuses on Elementary with a minor in either English/Language Arts or STEM (science, technology, engineering, and mathematics).

**Keywords:** teacher education, clinical practice, and clinical teacher preparation

## Introduction

America's classrooms have evolved and changed, while teacher preparation programs have not, leaving future teachers unprepared. Almost a third of America's teachers leave the field in their first three years (National Center for Education Statistics, 2011). Reasons cited include lack of knowledge and skills related to classroom management, teaching diverse students, and general lack of preparation. To better prepare teachers for the classroom, we share lessons from the past, and current best practice in teaching.

We highlight efforts underway at a southeastern regional university to move all areas of educator preparation to a clinically based model. Three preparation programs are discussed: Middle Grades/Secondary Math and Science, Secondary English Language Arts and Social Studies, and a pilot project to prepare elementary teachers with a minor in either English/Language Arts or STEM (science, technology, engineering, and mathematics).

### A Troubling Trend

By many measures, our K-12 students are falling behind their peers in countries around the world (Ripley, 2013; Tucker, 2011; Wagner, 2008). In addition, an achievement gap exists in the United States (Ravitch, 2010) and by various measures, students with special needs and those in high poverty schools are not achieving at their fullest potential (Dwyer, 2007), resulting in a negative impact on the economic growth and overall economy of the United States (Friedman, 2005; Friedman & Mandelbaum, 2011). Schools tend to reflect the community and state in which they are located, and it is at the local and state level where such gaps are felt the hardest.

Since the publication of the National Commission of Excellence in Education report in 1983, the passage of the Kentucky Education Reform Act of 1990, and the National Commission on Teaching and America's Future report in 1996, numerous attempts have been made to address the challenges faced by schools in Kentucky. The rate of poverty in Kentucky in 2012 was 18.6 percent, compared to the 14.9 percent rate of poverty in the United States (Spees, 2014). Highly qualified teachers can only combat this high poverty through rigorous, standards-based instruction.

Historically, attempts have been made to train high quality educators for Kentucky's schools. However, gaps persist and as a country we continue to fall behind. The U.S. carries the responsibility to provide a quality education for all students. We must focus on "improving the teaching force, limiting student testing to a necessary minimum, placing responsibility and trust before accountability, and handing over school-and district-level leadership to education professionals" (Sahlbert, 2011, p. 5).

New academic expectations clash with old conceptions of teaching and outmoded approaches to teacher practice, specifically the market model (Stone, 2002). In previous decades, teachers were expected to prepare only a small minority for ambitious, intellectual work; whereas today teachers are expected to prepare virtually all students for higher order thinking and performance skills which were once reserved for a few (Tucker, 2011). To make the shift to the new mission, teaching practice has to change. Research is clear that the teacher is the number one variable in student learning (Metlife Inc., 2013; Rice, 2003; Sanders, 1998; Sanders & Rivers, 1996).

### A Clinically Based Model of Teacher Preparation

The classroom teacher is the most important predictor of a student's success (Sanders & Rivers, 1996), due to their knowledge, skillsets, and abilities (Anderson, Hiebert, Scott, & Wilkinson, 1985). Ripley (2013) suggests that experiences within classrooms occur early in teacher preparation programs, coupled with meaningful feedback on ways to improve. Additionally, "for good or for ill, teachers' initial classroom experiences, especially in the first one or two years, are consistently a predictor of teacher effectiveness" (Rowan, Correnti, & Miller, 2002).

Within a clinical model of teacher preparation, teacher candidates have meaningful, rather than passive, teaching experiences. They observe effective teachers, analyze the craft of teaching, plan and engage in teaching, reflect on outcomes, and change practice based on outcomes. Pre-service teachers in a clinical model have the opportunity to reflect on the practice of teaching rather than on student learning (Darling-Hammond & Bransford, 2005). Not only do they learn about the craft of teaching, but also about working within various populations of students. Such experiences will encourage teacher candidates to become what Hammerness, Darling-Hammond, & Bransford (2005) call "adaptive experts" (p. 359).

An increasingly diverse range of student skills and needs often challenge teachers' abilities to complete their responsibilities (Darling-Hammond & McLaughlin, 1995; Hawley & Valli, 1999; Stein, Smith, & Silver, 1999). Quality teaching is a reciprocal process: the teacher's content and pedagogical choices are determined by the instructional needs of the students, and the teacher needs a vast knowledge base to differentiate accordingly (Darling-Hammond, 2006). It takes more than desire to be a quality teacher today. It takes effective planning, instructional knowledge, teaching skills, and extends to the teachers' dispositions and the ways beliefs and attitudes are displayed by actions (Ros-Voseles & Moss, 2007).

### Challenging Assumptions in Teacher Preparation

Historically, variables used in the process of admitting students to education programs have not been highly predictive of teacher performance (Heller & Clay, 1993). Admissions are based upon our assumptions about what makes a good teacher candidate, including the notions that success is based on higher expectations and accountability testing, individual candidate knowledge and skills, a perfect curriculum exists, culture and working environment don't matter, and parent involvement cannot be improved (Gordon, 2006). Such assumptions must be rejected to lead to a selection process that identifies candidates with the talent to positively impact student learning (Gordon, 2006).

Here we share several models of teacher preparation that support teachers for success early and throughout their careers. These include the following: 1) meaningful experiences in school settings, 2) purposeful assignments linked to experiences in school settings, 3) regular teaching experiences coupled with constructive feedback, 4) high standards for entrance into the teacher preparation program, and 5) on-going support once a teacher has gained employment. These models are in various stages of implementation and development.

### The Evolution of Clinically Based Teacher Preparation Models SKyTeach (Southern Kentucky Teach)

This nationally recognized teacher preparation program prepares Middle Grades and Secondary Math and Science teachers. SkyTeach is a unique collaboration between the College of Education and Behavioral Sciences and College of Science and Engineering, and is modeled

after the highly successful UTeach program at the University of Texas at Austin. SKyTeach includes partnerships with 10 school districts in a Regional Educational Cooperative.

The SKyTeach teaching team consists of college professors and Master Teachers (all former high school teachers). College professors deliver a majority of the content, theory, and instruction; Master Teachers provide critical feedback and support on designing and implementing lessons and experiences with middle and high school students. Teacher candidates begin their education coursework during their first semester in college, providing the opportunity to engage in K-12 settings in a meaningful and intentional manner.

#### Clinical Experiences and Practices in Teaching (CEPT)

The NCATE Blue Ribbon Report (2010) panel indicated, “teacher preparation education must shift away from a norm which emphasizes academic preparation and course work loosely linked to school-based experiences. Rather, it must move to programs that are fully grounded in clinical practice and interwoven with academic content and professional courses.” (p ii). In response, the College of Education, College of Arts and Letters and two local high schools collaborated to develop the CEPT model, designed to prepare Secondary English Language Arts and Social Studies teachers. The Council on Postsecondary Education (CPE) provided initial funding for CEPT. For two semesters prior to student teaching candidates spend two full days a week in a high school setting. The candidates receive instruction, feedback, guidance and mentoring from professors in the School of Teacher Education, departments of History and English, and content area high school teachers. Instruction is delivered in the clinical setting and is based on concepts of a teaching hospital where candidates engage in table rounds, instructional rounds, and guided observations among many other effective clinical practices. All course outcomes are clearly connected with a set of clinical experiences. Instruction is based on teacher preparation, Common Core, and content standards. Candidates are evaluated using the Danielson Framework for Effective Teaching (Danielson, 2007).

The CEPT model signifies a paradigm shift from a minimally field-based model of individual secondary methods courses taught over multiple semesters, to a cohesive two-consecutive semester classroom-based clinical model. The model provides a cohort of teacher candidates the benefit of working within a team of education professionals integrating content and pedagogy through a variety of clinical experiences (NCATE, 2010).

#### Pilot – Hilltopper Educator Preparatory Academy (TopPrep)

In countries where students perform the best academically, teachers typically come from the top 25 percentile of students. In the United States, teachers tend to be the lowest academic performers (bottom third), especially in elementary education (Kentucky Council on Postsecondary Education, 2013). To address this issue the TopPrep Academy is based on the following objectives:

1. Recruit high-performing students;
2. Increase standards for admission to and exiting the program;
3. Increase expectations relative to mastery of subject matter;
4. Provide clinical experiences for teaching mastery

Admission is multi-phased and incorporates multiple measures for candidates to demonstrate their ability and commitment to the field and craft of teaching, including the use of test scores, dispositions, and interviews. Ongoing feedback to candidates is provided throughout the program from school-based and university-based personnel.

The Five-Year TopPrep Academy for elementary education teachers requires a bachelor's degree in education and an integrated minor in either STEM or ELA/SS. Candidates participate in a clinical seminar culminating in a total of 280 hours of clinical experience at the end of the undergraduate program. The fifth year requires residency in a school.

Each semester, students take major, minor, and seminar coursework connected to clinically based experiences. The fifth year is a residency that stretches from the beginning of summer one to the end of summer two. In summer one, students participate in a study away or study abroad experience comparing US schools with those abroad/away and identifying promising practices or problems of focus. Summer classes are held in partnership with local schools. Collaborative “academies” are offered for struggling learners. Teacher candidates in the second half of summer one and the full summer two work and learn in these academies. From assessment data, candidates design and implement differentiated instruction with various learners, specifically English Language Learners, children with special needs, and high ability learners.

Throughout the academic year, candidates engage in classes hosted at local school sites following teaching hospital methodologies. The teacher candidates are evaluated via the Danielson framework and implement action research throughout the residency year.

### Conclusion

Two of the models shared here (SKyTeach and CEPT) are successful on several fronts: teacher candidates are more prepared for the classroom, are hired more rapidly, and are effective upon entry into the classroom. The third model presented, TopPrep, has not been implemented, but holds great promise for elementary schools and students as recipients of TopPrep teachers.

While these models present positive gains for the teaching profession, there are also limitations. For one, the demand on personnel from the university and school levels is much greater. Professors and cooperating teachers have on-going collaboration and “boots on the ground” through these programs. This presents a significant paradigm shift for university faculty, and poses challenges to leaders of teacher preparation programs to hire personnel interested in working in such models. Funds to support such positions must be secured. It is critical that all stakeholders' voices are heard and respected within such a model—a true collaboration requires nothing less.

The rate of attrition of new teachers, changes in the make-up of schools, and the on-going challenge to compete in a global economy require that schools of teacher education adapt and modify the ways we prepare teachers. We want our teacher candidates to be proficient at adapting to the needs and requirements of the students in their classrooms. In order to get them to that point, schools of teacher education must also be “adaptive experts” (Hammerness, Darling-Hammond, & Bransford, 2005, p.359) and change when what we're doing isn't working.

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