

NGEI Innovation Highlight: Clinical Coaches

WestEd and SRI International are conducting a formative evaluation to track New Generation of Educators Initiative (NGEI) implementation and outcomes at the CSU campuses that received comprehensive grants¹ in Phase 1. Based on site visits in spring 2016, we produced an Evaluation Cycle Memo on NGEI Phase I comprehensive grantees' clinical practice reforms. Drawing on that Evaluation Cycle Memo, this "NGEI Innovation Highlight" features one reform element at CSU Fullerton — the introduction of clinical coaches — that stood out for its high regard among informants during our spring 2016 data collection.²

While the development of the clinical coach role and related improvements to the performance feedback cycle are new and some specifics are being refined, in this NGEI Innovation Highlight we share information about the nature and reception of these reforms, as well as related resources for those interested in adopting similar reforms. Specifically, we describe the role of the clinical coach, how clinical coaches established relationships with candidates and mentor teachers*, and the new approaches to giving feedback to candidates afforded by this role.

What is a Clinical Coach?

The clinical coach position developed at one NGEI campus, CSU Fullerton, is a new position that replaces, or in some cases works with, traditional university supervisors.

* Different CSU campuses use "mentor," "master," and "cooperating" teacher terminology. "Mentor teacher" is used throughout this report to align with CSU Fullerton's terminology.

Specifically, clinical coaches replace the university supervisor position for Multiple Subject and Education Specialist candidates and work with content-specific university supervisors for Single Subject candidates. Clinical coaches are positioned to support both the candidates and the mentor teachers. *The major distinctions between a university supervisor and a clinical coach are related to timing of interactions, level of engagement with candidates and mentor teachers, and the extent and type of feedback provided to candidates.*

Box 1 shows the draft Job Description for this role, which the university is currently vetting to formalize as a new job description. Responsibilities include: supporting teacher candidates, guiding mentor teachers, maintaining a strong presence in assigned school sites, facilitating training in co-planning and co-teaching, and conducting three focused visits and two POP cycles with each candidate per semester.

Box 1. Draft Clinical Coach Job Description

Job Description for TK–Grade 6 Clinical Coach

The Clinical Coach is a crucial member of the teacher preparation team. The Clinical Coach serves as a coach/supervisor of Teacher Candidates throughout the year-long residency placement, guides and supports Mentor Teachers who work with Teacher Candidates, and facilitates a positive and productive relationship between the university and district and school.

Duties and Responsibilities

- Provide support (instructing, modeling, fostering reflective practice) to Teacher Candidates as they engage in clinical experiences; guide Mentor Teachers and other school/district personnel in their respective roles in Teacher Candidates' preparation.
- Establish and maintain mutual respect, trust, communication, and confidentiality with Teacher Candidates, the university, Mentor Teachers, and other school/district personnel.
- Maintain a frequent, recurring presence in the assigned school site(s).
- Follow all rules and guidelines for professional conduct established by the university, school, and district.
- Facilitate Pairs Training (i.e., training in co-planning and co-teaching).
- Facilitate Reflective Learning Walks at the school site in collaboration with the principal.
- Conduct three Focus Visits and two POP Cycles with each Teacher Candidate each semester.
- Hold a final evaluation conference with each Teacher Candidate each semester.
- Attend and participate in ongoing Clinical Coach training.
- Attend block cohort and department faculty meetings as appropriate.
- Work with the Professional Development Facilitator to identify and pursue focus areas for professional development.

Minimum Qualifications

- Master's Degree in Education
- Minimum of 3 years of successful teaching experience in a public school setting
- Experience in diverse school settings
- Expertise in using classroom assessments and student achievement data to inform instruction
- Knowledge of program coursework and current practices and curricula in TK–12 settings
- Strong communication skills with an ability to foster positive and productive working relationships with Teacher Candidates, Mentor Teachers, university faculty and staff, and school/district personnel

Desirable Qualifications

- Appropriate and effective use of technology to support teaching and learning in classroom and professional development settings
 - Participation in collaborative and school-based initiatives
 - Ongoing participation in professional learning opportunities
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Establishing Relationships with Candidates & Mentor Teachers

Clinical coaches begin working with candidates and mentor teachers before the K–12 school year and continue collaboration and support consistently throughout the year. In order to establish a relationship among clinical coaches, candidates, and mentor teachers, the clinical coaches meet with each candidate and mentor teacher pair prior to the beginning of the school year to form the triad team. As the year progresses, clinical coaches maintain consistent communication with candidates and mentor teachers. The coaches visit each candidate at their school site at least every other week and collaborate with candidates and mentor teachers as a triad to co-plan, an activity that did not occur within the traditional university supervisor role. Coupled with changes to formative feedback described below, the early creation of collaborative relationships facilitates a focus on coaching, rather than evaluating, candidates.

“I saw [my clinical coach] all the time, it was great. I got to know [my clinical coach] very well so we could talk very easily about my practice. When [my clinical coach] would come in for actual supervisor visits it was no big deal to me, other candidates got so nervous but I didn’t, that was really nice to have a really good relationship.”

— Candidate

New Approaches to Giving Feedback to Candidates

Clinical coaches implement new feedback processes including focused visits and pre-observation, observation, post-observation (POP) cycles. Focused visits are brief and concentrate on a small number of skills for which the candidate receives immediate feedback. POP cycles are more intensive formative feedback opportunities. Together, these new feedback approaches provide candidates a greater amount of formative feedback to improve practice compared to what was provided previously by traditional supervisors.

Focused visits — quick, targeted feedback to candidates. During three “focused visits” each semester, the clinical coaches conduct a brief observation of approximately 15 minutes, focusing on a small number of skills that the candidate is working on. Immediately afterwards, the candidate and clinical coach step outside to discuss the observation. Focused visits are intended to provide timely feedback on a few select skills that the candidate can immediately implement in the classroom (see Appendix 2).

POP cycles — a comprehensive coaching approach to formative feedback. POP cycles are more involved than focused visits and included meetings to co-plan, reviews of lesson plans, observations, and feedback. The POP cycle is scheduled to occur at four occasions during student teaching placements and each cycle begins with the pre-observation component. The pre-observation includes a meeting between

“Planning the lesson with my coach and teacher taught me how to write a lesson plan more than my core classes did. That also really helped me write my lesson plans for my TPAs.”

— Candidate

“After 41 years in education and almost 25 years at the university, I don’t think I have run across anything that could impact student teachers as much as what we have discovered through this process.”

— Clinical coach

the clinical coach, mentor teacher, and candidate where the goals of the lesson to be observed are discussed to ensure all three parties have a common understanding about the lesson content and approach. As part of the pre-observation process, the candidate submits a lesson plan to the clinical coach and the clinical coach provides feedback to improve the lesson. During the spring 2016 site visit, candidates and clinical coaches reported that although only one review was required, in

many instances the lesson plan was exchanged several times to refine the plan. Together, these steps support co-planning between the candidate, clinical coach, and mentor teacher.

Next, the observation portion occurs. During the observation, the clinical coach takes detailed notes and uses a form developed for the POP cycle to capture candidate performance. In addition, the candidate is video-recorded and expected to review the recording and use the POP form to rate their own performance, which is another mechanism for formative evaluation by supporting self-reflection on a candidate's own teaching practices. After both parties complete the observation, the post-observation component occurs. During the post-observation, candidates discuss areas in which they believe they excelled, as well as self-identified areas for continued work. The clinical coaches engage with candidates in this discussion, providing input based on what they noticed. Although clinical coaches had ideas to further improve this process (e.g., make refinements to the POP schedule and procedure), candidates, mentor teachers, and clinical coaches spoke highly of the POP cycle. Participants representing all three roles reported it to be a supportive mechanism for providing feedback outside of the formal end-of-semester evaluations.

“The main differences between NGEI and traditional is more guidance and more clarity on everything. I feel like if my coach wasn't there as my coach I would be so limited on the things I would have learned... I got more feedback, I got an extra person to really guide you through.”

— Candidate

During the first semester of implementation, the use of the clinical coaches and the new feedback system took more time for clinical coaches and candidates compared to the pre-NGEI arrangements, though one clinical coach suggested that with a bit of refinement and streamlining the responsibilities could be nearly equal to that of a traditional university supervisor. NGEI candidates noticed that they had additional tasks, such as preparing for and undergoing the POP process, but indicated that they saw the value in the extra work.

Box 2 offers suggestions and lessons learned that may be helpful for campuses interested in adopting these approaches.

Box 2. Making the Shift to Clinical Coaches

Developing the clinical coach position and supporting clinical coaches in new formative feedback processes was an iterative process. After conceptualizing the role of clinical coach, the campus asked three standing university supervisors to serve as clinical coaches for the NGEI candidates. These individuals were already familiar with the traditional supervision process and agreed to try a new approach to supporting candidates. As clinical coaches, they took on different responsibilities than those of a traditional university supervisor.

While a traditional university supervisor primarily focused on providing formal feedback, the clinical coaches were expected to become more enmeshed in their candidates' school site(s) and engage in regular formative feedback activities. CSU Fullerton combined the reform around clinical coaches with an anchor sites candidate placement approach, allowing clinical coaches to coach multiple candidates at a small number of school sites. The use of anchor sites provided greater opportunities for the clinical coaches to become familiar with the school staff and culture.

To guide clinical coaches and candidates through the new feedback processes, the campus developed forms for both the focused visits and the POP cycles (see Appendix 2). These forms provide explicit instructions to walk clinical coaches and candidates through the observation and feedback process, as well as ensure the observations are aligned with TPEs.

While the introduction of the clinical coach role was met with enthusiasm from candidates, mentor teachers, and clinical coaches, implementation has required reflection and refinement. First, when the campus originally conceptualized the clinical coach role, it was unclear to what extent the workload and job characteristics would differ from those of a university supervisor. Clinical coaches documented their activities and time spent on those activities. Through these efforts it became clear that the clinical coach truly was a unique position and therefore required a distinct job description.

Second, the frequency and intensity of POPs is still being refined. In particular, candidates and clinical coaches noted that the number of POPs could potentially be reduced and the video component may not be vital for every POP. As the campus continues use of the clinical coaches and the POP cycles, the frequency and format may be revised.

Both the development of the clinical coach role and the development of new feedback processes carried out by clinical coaches were praised by candidates, mentor teachers, school administrators, and clinical coaches during the WestEd/SRI Spring 2016 data collection. These shifts in clinical preparation align with NGEI's Key Transformation Elements (KTEs) and represent structural reforms that could facilitate improvements in the quality of feedback and support grantees receive.

Endnotes

¹ The larger of two funding categories in Phase 1.

² WestEd and SRI conducted original data collection to gather information on reforms to clinical preparation among NGEI comprehensive grantees. We drew upon perspectives from multiple stakeholders to understand implementation and perceived impacts of reforms to the clinical experience in light of the KTEs. From February–June 2016, the WestEd/SRI team interviewed 77 people from the eight campuses including project directors, university supervisors, school administrators, mentor teachers, and teacher preparation candidates (see Appendix 1). We confirmed the nature and scope of clinical practice reforms with project directors from all eight campuses and analyzed data across all respondents to ascertain the nature and perceived quality of the clinical practice reforms. This report focuses on five of the six Phase 1 comprehensive grantees funded to continue efforts in NGEI Phase 2.

Appendix 1. Spring 2016 NGEI Interview Participants

Role	Individuals Interviewed
Principal Investigators/Project Directors	14
University Supervisors	18
K-12 School Administrators	7
Mentor teachers	20
Teacher Preparation Candidates	18

Appendix 2. Focused Visit and POP Cycle Feedback Forms

Focused Coaching Visit Draft Feedback Form				
<p>Focused Coaching Visit: The Clinical Coach will use this form during 15-minute walkthroughs, after the initial POP Cycle, to provide documentation of further coaching and support for the teacher candidate. When the observation is complete, the Clinical Coach will fill out targeted and focused areas in Section II. The Clinical Coach will email the form to the Teacher Candidate within a 24-hour period.</p>				
Section I: Candidate Information				
Teacher Candidate	CWID	Subject Area	Semester	Date of Visit
Mentor teacher/Co-Teacher(s)	School/District	Clinical Coach	Supervisor	
Subject and Grade Level	Content Standard and Lesson Objectives	Unit topic	Lesson Title	

Learning Goal: To support the development of professional skills and dispositions		
Teaching Performance Expectations		
<p>TPE 1: Subject Specific Pedagogical Skills</p> <p>TPE 2: Monitoring Student Learning During Instruction</p> <p>TPE 3: Interpretation and Use of Assessments</p> <p>TPE 4: Making Content Accessible</p>	<p>TPE 5: Student Engagement</p> <p>TPE 6: Developmentally Appropriate Teaching Practices</p> <p>TPE 7: Teaching English Learners</p> <p>TPE 8: Learning About Students</p>	<p>TPE 9: Instructional Planning</p> <p>TPE 10: Instructional Time</p> <p>TPE 11: Social Environment</p> <p>TPE 12: Professional, Legal, and Ethical Obligations</p> <p>TPE 13: Professional Growth</p>

Section II: Teaching Performance Expectations (TPE #)	Observation notes with explicit support/suggestions from Clinical Coach
<p>I. ESTABLISHING A LEARNING SET:</p> <ul style="list-style-type: none"> a. presents lesson objectives (5) b. provides rationale for lesson (4) c. relates lesson to previous lesson (9) d. relates material to student interests (8) e. gains student attention at beginning of lesson (10) 	
<p>II. LESSON DESIGN AND DEVELOPMENT:</p> <ul style="list-style-type: none"> a. starts class promptly and has materials ready (10) b. relates teacher input to lesson objective (5) c. emphasizes key points (4) d. keeps students alert and accountable (5) e. models task or activity (4) f. provides guided practice (4) g. provides corrective feedback (4) h. provides internal and concluding summaries (4) i. plans differentiated instruction (9) 	
<p>III. (Co-)TEACHING STRATEGIES:</p> <ul style="list-style-type: none"> a. ensures that strategies are appropriate (1) b. accommodates different learning styles (4) c. makes instructional adaptations (7) d. allows students time to respond (5) e. probes for clarification, elaboration (5) f. presents material in a logical sequence (4, 6) g. provides comprehensible input for all levels of EL (7) 	
<p>IV. TEACHER-STUDENT COMMUNICATION:</p> <ul style="list-style-type: none"> a. provides clear and concise directions (10) b. uses vocabulary appropriate for all learners (7) c. uses the English language orally and in writing with no errors (1) d. supports verbal messages with non-verbal cues (11) e. demonstrates enthusiasm (11) 	
<p>V. CLASSROOM CLIMATE:</p> <ul style="list-style-type: none"> a. effectively manages the classroom (11) b. creates a positive climate for learning (11) c. builds positive self-concept (11) d. encourages cooperation (11) e. communicates high expectations (5) 	
<p>VI. ASSESSMENT:</p> <ul style="list-style-type: none"> a. uses progress monitoring during instruction (2) b. checks for understanding (2) c. uses informal and formal assessments (3) 	

Section III: Target(s) Growth Areas

Held conference with teacher candidate

Held conference with mentor teacher (Please note what topics were discussed.)

Converted form to PDF and emailed teacher candidate on:

**Pre/Observation/Post Cycle
Draft Feedback Form**

Pre-Observation Instructions: The purpose of this form is to provide the basis of coaching and support for the teacher candidate. The Clinical Coach (CC) and the Teacher Candidate (TC) will use this form.

1. The Clinical Coach will email the Teacher Candidate with an agreed-upon day and time of observation and will send this document one week prior to the planned observation.
2. The Teacher Candidate will complete **Section I: Candidate Information** on the POP Cycle Form.
3. The Candidate will complete **Section II: Pre-Observation Conference, Part A: Teacher Candidate Reflection Response**, at least 72 hours prior to lesson.
4. The Clinical Coach will review **Section II: Pre-Observation Conference, Part A: Teacher Candidate Reflection Response** and will complete **Section II, Part B: Observation Notes and Feedback**, at least 48 hours prior to lesson.
5. Additional instructions follow.

Section I: Candidate Information

Teacher Candidate	CWID	Subject Area	Semester
			Date of Visit
Mentor Teacher/Co-Teacher(s)	School/District	Clinical Coach	Supervisor
Subject and Grade Level	Content Standard and Lesson Objectives	Unit topic	Lesson Title

Learning Goal: To coach teacher candidates in meeting the TPE expectations.

Teaching Performance Expectations

<p>TPE 1: Subject Specific Pedagogical Skills</p> <p>TPE 2: Monitoring Student Learning During Instruction</p> <p>TPE 3: Interpretation and Use of Assessments</p> <p>TPE 4: Making Content Accessible</p>	<p>TPE 5: Student Engagement</p> <p>TPE 6: Developmentally Appropriate Teaching Practices</p> <p>TPE 7: Teaching English Learners</p> <p>TPE 8: Learning About Students</p>	<p>TPE 9: Instructional Planning</p> <p>TPE 10: Instructional Time</p> <p>TPE 11: Social Environment</p> <p>TPE 12: Professional, Legal, and Ethical Obligations</p> <p>TPE 13: Professional Growth</p>
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Section II: Pre-Observation Conference	Part A: Teacher Candidate Reflection Response	Part B: Clinical Coach Observation Notes & Feedback
<p>General Lesson Questions Describe the lesson that will be observed. What process, if any, did you take to co-plan with your MT?</p> <p>Standards/Objectives How does the lesson objective relate to the content standard? What will the student be doing to show progress towards mastery of the lesson objectives?</p> <p>Student Engagement How will you make the lesson relevant to all the students?</p> <p>Instructional Planning Talk about the lesson structure (opening, body, and closing). Talk about how the plan uses varied teaching strategies and differentiated instruction to help students meet lesson goals. Talk about how you will progress monitor student learning and reflect on how the results will inform your instruction.</p> <p>Classroom Management Discuss how will you maintain a positive learning environment with a welcoming climate of caring, respect, and fairness. Discuss specific classroom procedures, including c-teaching strategies. What strategies have you considered to prevent and redirect challenging behaviors?</p> <p>Closure Discuss how you will close your lesson and describe how this activity will inform the next day lesson.</p> <p>For your Clinical Coach: What do you want specific feedback on while the CC observes?</p>	<p><i>Candidate: Reflect upon the lesson that will be taught. Use questions on the left hand to guide your reflection.</i></p>	<p><i>How did the TC use reflection and feedback to formulate and prioritize goals for increasing their subject matter knowledge and teaching effectiveness?</i></p>

Observation Instructions:

6. The Teacher Candidate will arrange the details for video capturing the observed lesson. The video will not be made public or shared with anyone other than the Teacher Candidate, the classroom teacher, and/or the Clinical Coach, as necessary.

7. During the lesson delivery, the Clinical Coach will complete **Section III: Lesson Delivery, Part B: Clinical Coach Observed Evidence**. The CC will email the form to the candidate.

8. The Teacher Candidate will view and reflect upon the observed lesson within 24 hours and will complete **Section III: Lesson Delivery, Part A: Teacher Candidate Observed Evidence**. Once completed, the TC will email this form back to the CC.

Section III: Lesson Delivery	Part A: Teacher Candidate Observed Evidence	Part B: Clinical Coach Observed Evidence
Introduction How did the TC introduce the lesson while connecting to prior knowledge?		
Body of Lesson How did the TC facilitate new content? Consider: development of new knowledge and skills sets, real-world application, and interactions		
Lesson Closure How did the TC provide opportunities for students to process and reflect on the lesson?		
Making Content Accessible How did the TC differentiate instruction for individual student needs and whole-class instruction?		
Assessing Student Learning How did the TC implement entry-level progress monitoring or summative assessments? Did assessments target lesson objectives?		
Student Engagement How did the TC maintain a positive learning environment with a welcoming climate of caring, respect, and fairness? How did the TC manage routine tasks and student behavior?		

Post Observation Conference Instructions:

8. The Clinical Coach will email the TC to schedule a post-observation conference within two to five school days.

9. During the Post Observation Conference, the TC and the CC will discuss information recorded from **Section III: Lesson Delivery, Part A and B.**

10. The CC and TC will discuss and complete **Section IV: Post Observation Proficiency Scale** during the post-conference meeting.

11. Finally, the Teacher Candidate will record agreed-upon action items and goals in **Section V: Action Items and Goals.** The TC will update the POP form and email a final version to the CC within three days.

Section IV: Post Observation Proficiency Scale Here

Progressing <i>"I still have some work to do!"</i>	Proficient <i>"I am where I should be, but not where I want to stay!"</i>	Advanced <i>"I am teaching like a second year teacher!"</i>
TC:		
CC:		

Section V: Action Items and Goals

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