NAEYC supports NCATE report calling for clinical practice, urges experience in all early learning settings

(WASHINGTON) – The National Association for the Education of Young Children (NAEYC) has revised its Standards for Programs that Prepare Early Childhood Professionals, which strengthen clinical field experiences for teachers working with children birth through age 8. These revisions support the emphasis of a new panel report from our partner organization, the National Council for Accreditation of Teacher Education (NCATE).

The NCATE panel report, Transforming Teacher Education through Clinical Practice: A National Strategy to Prepare Effective Teachers, released today, recommends sweeping changes intended to “revamp programs” and prioritize clinical partnerships between teacher education programs and school districts.

Early childhood education is unique in its reliance upon a diversity of settings to employ early childhood professionals and support early learning goals. It is critical that early childhood teacher candidates have clinical experiences that support the application of specialized early childhood development across these professional roles and settings. NAEYC’s teacher preparation standards require that early childhood teacher education programs include field practice in at least two out of three early childhood age groups (0-3, 3-5, or 5-8 years old) and at least two out of three early learning settings (schools, Head Start, and child care).

NAEYC supports the Transforming Teacher Education through Clinical Practice report and recommends expanding clinical partnerships with school districts to include partnerships with other early learning settings, including Head Start and child care, to promote the development and learning of all young children.
Executive Summary

The education of teachers in the United States needs to be turned upside down. To prepare effective teachers for 21st century classrooms, teacher 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.

This demanding, clinically based approach will create varied and extensive opportunities for candidates to connect what they learn with the challenge of using it, while under the expert tutelage of skilled clinical educators. Candidates will blend practitioner knowledge with academic knowledge as they learn by doing. They will refine their practice in the light of new knowledge acquired and data gathered about whether their students are learning.

Today there are many examples of excellent clinically based programs, and many are cited in this report. These programs can be found in higher education and in new pathways to prepare teachers. However, the nation needs an entire system of excellent programs, not a cottage industry of pathbreaking initiatives.

In order to make this change, teacher education programs must work in close partnership with school districts to redesign teacher preparation to better serve prospective teachers and the students they teach. Partnerships should include shared decision making and oversight on candidate selection and completion by school districts and teacher education programs. This will bring accountability closer to the classroom, based largely on evidence of candidates’ effective performance and their impact on student learning. It also will ensure professional accountability, creating a platform to ensure that teachers are able to own, and fully utilize, the knowledge base of most effective practice. In this way, we believe, public and professional accountability for candidate effectiveness can be aligned for the first time.

Creating a system built around programs centered on clinical practice also holds great promise for advancing shared responsibility for teacher preparation; supporting the development of complex teaching skills; and ensuring that all teachers will know how to work closely with colleagues, students, and community. It will be a crucial step towards empowering teachers to meet the urgent needs of schools and the challenges of 21st century classrooms.

The vision for transforming the education of the nation’s nearly four million teacher workforce presented in these pages comes not from any one group but from a diverse group representing a broad range of perspectives. The NCATE Blue Ribbon Panel on Clinical Preparation and Partnerships for Improved Student Learning is comprised of state officials, P-12 and higher education leaders, teachers, teacher educators, union representatives, and critics of teacher education. We spent the past ten months addressing the gap between how teachers are prepared and what schools need. As part of this effort, we have identified 10 design principles for clinically based programs and a comprehensive series of strategies to revolutionize teacher education.
What Needs To Be Done

We recognize that revamping teacher education around clinical practice is not only a matter of adding more hours for student teaching, ensuring improved mentoring of candidates, or adding new courses here and there, even though many preparation programs have made these significant improvements. This report recommends sweeping changes in how we deliver, monitor, evaluate, oversee, and staff clinically based preparation to nurture a whole new form of teacher education. Specifically, the report calls for:

- More Rigorous Accountability. All teacher education programs should be accountable for – and their accreditation contingent upon – how well they address the needs of schools and help improve P-12 student learning. This will require more rigorous monitoring and enforcement for program approval and accreditation according to a clear and definite timeline and holding all programs to the same high standards. School districts will have a more significant role in designing and implementing teacher education programs, selecting candidates for placement in their schools, and assessing candidate performance and progress.

- Strengthening Candidate Selection and Placement. In order to make teacher education programs more selective and diverse, the selection process must take into consideration not only test scores but key attributes that lead to effective teachers. We urge states and the federal government to develop opportunities for teacher candidates to work in hard-to-staff schools through a “matching” program similar to that developed by the American Association for Medical Colleges for placing medical school graduates in teaching hospitals for internships and residencies. The report calls for clinical internships to take place in school settings that are structured and staffed to support teacher learning and student achievement. We also call on states and districts to require that candidates be supervised and mentored by effective practitioners, coaches, and clinical faculty. Clinical faculty – drawn from higher education and the P-12 sector – will have a say about whether teacher candidates are ready to enter the classroom on the basis of the candidate’s performance and student outcomes.

- Revamping Curricula, Incentives, and Staffing. It is time to fundamentally redesign preparation programs to support the close coupling of practice, content, theory, and pedagogy. Preparation faculty and mentor teachers should routinely be expected to model appropriate uses of assessment to enhance learning. We also call for significant changes in the reward structure in academe and the staffing models of P-12 schools to value clinical teaching and support effective mentoring and improvement in clinical preparation. Higher education must develop and implement alternative reward structures that enhance and legitimize the role of clinical faculty and create dual assignments for faculty with an ongoing role as teachers and mentors in schools. Similarly, school districts can work with preparation program partners to advance new staffing models patterned after teaching hospitals, which will enable clinical faculty, mentors, coaches, teacher interns and residents to work together to better educate students and prospective teachers as part of clinical practice teams. This report also urges the development of rigorous criteria for the preparation, selection, and certification of clinical faculty and mentors.

- Supporting Partnerships. State policies should provide incentives for such partnership arrangements, and should remove any inhibiting legal or regulatory barriers. This will require
new financial incentives that would reward expansion of these partnerships. Incentives also should reward programs that produce graduates who do want to teach and are being prepared in fields where there is market demand. Universities should ensure that their teacher education programs are treated like other professional programs, and get their fair share of funding from the revenues they generate to support the development of clinically based programs.

- **Expanding the Knowledge Base to Identify What Works and Support Continuous Improvement.** Currently, there is not a large research base on what makes clinical preparation effective. We urge the federal and state government and philanthropy to invest in new research to support the development and continuous improvement of new models and to help determine which are the most effective. NCATE* should facilitate a national data network among interested collaborators — states, institutions, school districts and others — to help gather and disseminate what we learn from this research. Partnerships need this information on a continuing basis to trace the progress of their own programs and make day-to-day decisions. Sharing this information across the nation will help to shape future research as well as public policies on preparation.

**Hard Choices and Cost Implications**

Implementing this agenda is difficult but doable. It will require reallocation of resources and making hard choices about institutional priorities, changing selection criteria, and restructuring staffing patterns in P-12 schools. Clinically based programs may cost more per candidate than current programs but will be more cost-effective by yielding educators who enter the field ready to teach, which will increase productivity and reduce costs associated with staff development and turnover.

We urge states, institutions, and school districts to explore alternative funding models, including those used in medicine to fuse funds for patient care and the training of residents in teaching hospitals. We also urge states and the federal government to provide incentives for programs that prepare teachers in high-need content and specialty areas and for teaching in schools with the most challenging populations.

**An Opportune Moment**

This is an opportune time to introduce these changes, in spite of the current economic climate. Federal, state, and district policy continue to focus on improving the quality of teaching and teachers as a cornerstone of school improvement. The development and acceptance of common core standards and InTASC core teaching standards for teachers are already helping to frame revisions of teacher education curricula. The expansion of state databases permits new kinds of accountability approaches, more useful “feedback” for schools, districts and preparation programs, and more easily accessible information. Efforts to invest in research on effective practice and the development of valid new tools to assess teacher performance and measure various domains of teaching that have been linked to student outcomes create an opportunity for the panel’s recommendations to land on fertile ground.

Although the totality of the changes recommended is sweeping, they can be scaffolded. We should take advantage of this moment by beginning to make some of them now and at little or no incremental expense. State policy makers can revamp teacher licensing requirements by raising expectations for graduates of teacher preparation programs. State program approval policies can be

*NCATE convened and supported the work of the Panel. It has recently entered into partnership with the Teacher Accreditation Council (TEAC) to create the Council for the Accreditation of Educator Preparation (CAEP) as the unified accreditor for the field. We expect this new partnership to provide accreditation with even greater leverage to implement the Panel’s recommendations.*
reformed to focus on clinical preparation, program outcomes, and partnerships with P-12 schools. School districts and preparation programs can begin to build powerful partnerships in collaboration with teachers’ associations. Higher education institutions can reallocate resources internally at the campus and school or department level to facilitate reform. NCATE can raise its accreditation standards. These are changes that can create momentum and lay the foundation for other reforms such as funding.

**Call To Action**

This report concludes with a Call to Action that urges teacher education programs to transform preparation of all teachers, regardless of where they teach, but also notes the urgent need to address the staffing and learning challenges facing high-need and low-performing schools. To support this implementation, we call on federal lawmakers and the U.S. Department of Education to invest Elementary and Secondary Education Act funds, funds available through School Improvement Grants for school turnaround efforts, and the continued funding of grants to school and university partnerships.

Already, eight states – California, Colorado, Louisiana, Maryland, New York, Ohio, Oregon and Tennessee – have signed letters of intent to implement the new agenda. As part of the NCATE Alliance for Clinical Teacher Preparation, these states will work with national experts, pilot diverse approaches to implementation, and bring new models of clinical preparation to scale in their states. Working with NCATE and other invested organizations including the American Association of Colleges of Teacher Education, the Association of Teacher Educators, the teacher unions, and their state and local affiliates, the Alliance also will reach out to and learn from other states working to transform teacher education.

In addition to ensuring more rigorous monitoring and enforcement for program approval and accreditation, NCATE should pursue an agenda to promote the Panel recommendations. This will include raising the bar for accreditation; expanding membership and visiting teams to include a higher proportion of major research universities and selective colleges; standard setting to support transformation of preparation programs; capacity building that will involve both states and the profession; and promoting research, development and dissemination of prototypes and scale-up strategies. These activities are intended to inform and strengthen the role of accreditation in supporting the transformation of the education of teachers to a clinically based, partnership supported approach.

We encourage all key stakeholders to join us in this effort, for much more is at stake than teacher education as an enterprise. Our economic future depends on our ability to ensure that all teachers have the skills and knowledge they will need to help their students overcome barriers to their success and complete school college- and career-ready. The next few years will help shape education policy and practice for many years to come. A comprehensive strategy to transform teacher education through clinical practice must be part of any significant national approach to school reform. We hope that this plan will serve as a road map for preparing the effective teachers and school leaders the nation will need in the future and provide the impetus for concerted action.
issues for advocacy and policy change. Candidates have a basic understanding of how public policies are developed, and they demonstrate essential advocacy skills, including verbal and written communication and collaboration with others around common issues.

This Initial Standard provides a general description of the unique nature of the early childhood profession, its unique Code of Ethical Conduct and other guidelines, and special importance of collaboration and continuous learning in a rapidly evolving field that includes professional roles and settings inside and outside of traditional schools. See the NAEYC publication Developmentally appropriate practice in early childhood programs serving children birth through age 8 (2009) for a fully developed description of expectations for this standard.

**STANDARD 7. EARLY CHILDHOOD FIELD EXPERIENCES**

Field experiences and clinical practice are planned and sequenced so that candidates develop the knowledge, skills and professional dispositions necessary to promote the development and learning of young children across the entire developmental period of early childhood – in at least two of the three early childhood age groups (birth – age 3, 3 through 5, 5 through 8 years) and in the variety of settings that offer early education (early school grades, child care centers and homes, Head Start programs).

**Key elements of Standard 7**

7a. Opportunities to observe and practice in at least two of the three early childhood age groups (birth – age 3, 3-5, 5-8)

7b. Opportunities to observe and practice in at least two of the three main types of early education settings (early school grades, child care centers and homes, Head Start programs)

**Supporting explanation**

A key component of NAEYC standards at all degree levels is hands-on field or clinical experiences. Each of the first six NAEYC Standards includes a key element focused on application or use of knowledge and skills related to the standard. These key elements are learned, practiced and assessed in field experiences. This Initial and Advanced Program Standard 7 is comparable to NAEYC Associate Program Criterion 5.

Field experiences should be well planned and sequenced within and across degree levels to prepare candidates for the unique qualities of the early childhood developmental period and early educational settings. From field observations for the candidate considering an early childhood career, to systematic inquiry into their own classroom practices for the candidate in the field, to immersion in applied research for the doctoral candidate, supervised, reflective field experiences are critical to high quality professional preparation. Developmental research and theory has long been the foundation of early childhood education theory and practice.

Initial and Advanced programs should assign field experiences in at least two age groups and at least two early education settings. Current research and policy leaders hope to build a more integrated and aligned PreK-3 system for young children, for early childhood teacher preparation and for early childhood professional careers. Although the current early education system is fragmented, many of the teachers currently working in Head Start, preschool and child care settings are enrolled in early childhood baccalaureate degree programs in order to meet the requirements of the federal Head Start program, to meet the requirements of NAEYC accreditation for early educational settings directly serving young children, or to increase their career options. Although state policies and professional credentials may focus one age group or
setting in a particular context, over the course of a career, an early childhood teacher may move from an infant toddler setting, to a third grade classroom, and then to a community Head Start or prekindergarten program. In the current context, a sequence of field experiences should ensure that graduates of baccalaureate programs in early childhood are qualified for a career with options across the entire early childhood age range and in multiple early education settings.

Finding high quality early childhood field sites is a challenge across all early childhood settings - whether primary school, child care center, or Head Start classroom. The “professional development schools” movement and the current interest in “residency” models for teacher education underscore the challenge of identifying and partnering with high-quality sites in which education professionals can develop or refine their skills with competent mentorship and supervision. Some programs may choose to partner with high need / low resource schools or centers. Many programs are working with states, communities or local school districts to raise teacher qualifications and improve quality in child care, Head Start, or primary grade classrooms. When the quality of the field site is not high, it is the responsibility of the teacher preparation program to provide other models and/or experiences to ensure that candidates are learning to work with young children and families in ways consistent with the NAEYC standards.

Quality field experiences support candidates to understand and apply the competencies reflected in the NAEYC standards as they observe, implement and receive constructive feedback in real world early learning settings. **Indicators of strength** in the quality of field experiences include:

- Field experiences are well planned and sequenced, and allow candidates to integrate theory, research and practice.
- When settings used for field experiences do not reflect high quality standards, candidates are provided with other models and/or experiences to ensure that they are learning to work with young children and families in ways consistent with the NAEYC standards.
- Faculty and other supervisors help candidates to make meaning of their experiences in early childhood settings and to evaluate those experiences against standards of quality.
- Adults who mentor and supervise candidates provide positive models of early childhood practice consistent with NAEYC standards.
- Field experiences expose candidates to settings that include cultural, linguistic, racial and ethnic diversity in families and communities.
**Suggested program chart of field experiences**

<table>
<thead>
<tr>
<th>Location / setting</th>
<th># Hours</th>
<th>Age group</th>
<th>Assignments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Field Experience I</td>
<td>Infant &amp; Toddler</td>
<td>10 hrs.</td>
<td>0-3</td>
</tr>
<tr>
<td>Field Experience II</td>
<td>In PreK/K and Grades 1-3. At least one placement in a diverse, urban setting is required.</td>
<td>8 wks &amp; 7 weeks, full-time 40 hours per week.</td>
<td>3-5 or 5-8</td>
</tr>
</tbody>
</table>

The completed chart above is just an example. In order to meet NAEYC Standard 7, the two field experiences selected for this chart must demonstrate that candidates have field or clinical assignments in at least two of the three early childhood age groups and in at least two different early education settings.

A **rubric** for reviewers is included in the Standards, Key Elements and Rubrics section of this document.

**Age groups are defined as:** Birth through age 3, 3 through 5 years, and 5 through 8 years

**Locations or Settings are defined as:** Primary or elementary school, child care center or home, and Head Start.

The narrative in NCATE Program Report Template “Section I – Context, Item 2 Description of the field and clinical experiences required for the program” should explain how the program ensures high quality field experiences. Quality field experiences support candidates to understand and apply the competencies reflected in the NAEYC standards as they observe, implement and receive constructive feedback in real world early learning settings. Programs are encouraged to consider the “indicators of strength” listed in the Supporting Explanation of Standard 7 when writing this narrative.
**STANDARD 7. FIELD EXPERIENCES**

Field experiences and clinical practice are planned and sequenced so that candidates develop the knowledge, skills and professional dispositions necessary to promote the development and learning of young children across the entire developmental period of early childhood – in at least two of the three early childhood age groups (birth – age 3, 3-5, 5-8) and in the variety of settings that offer early education (early school grades, child care centers and homes, Head Start programs).

**Key elements of Standard 7**

7a. Opportunities to observe and practice in at least two of the three early childhood age groups (birth – age 3, 3-5, 5-8)

7b. Opportunities to observe and practice in at least two of the three main types of early education settings (early school grades, child care centers and homes, Head Start programs)

<table>
<thead>
<tr>
<th>Does Not Met Expectations</th>
<th>Meets Expectations</th>
<th>Meets and Exceeds Expectations/Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program evidence <em>does not show</em> substantive field experiences with opportunities to observe and practice in relation to the standards across the early childhood developmental period and in multiple early learning settings</td>
<td>Program evidence <em>shows</em> that candidates are provided with substantive field experiences with opportunities to observe and practice in relation to the standards across the early childhood developmental period and in multiple early learning settings</td>
<td><em>There is strong evidence that</em> candidates are provided with extensive, developmental opportunities to gain <em>in-depth understanding</em> of the early childhood developmental period and of the variety of settings that offer early education.</td>
</tr>
<tr>
<td>• There are field experiences in only one of the early childhood age groups <em>and</em></td>
<td>• There are field experiences in at least two early childhood age groups <em>and</em></td>
<td>Using the column at left</td>
</tr>
<tr>
<td>• There are field experiences in only one early learning setting</td>
<td>• There are field experiences in at least two early childhood age groups <em>and</em></td>
<td>• There are field experiences in at least two early learning settings</td>
</tr>
</tbody>
</table>
| Program report indicates specific unique or innovative strengths in relation to this standard that respond to needs of candidates, to community or state context, or to critical
### Additional expectations for Advanced programs

<table>
<thead>
<tr>
<th>Does Not Met Expectations</th>
<th>Meets Expectations</th>
<th>Exceeds Expectations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program evidence does not show substantive field experiences with opportunities to observe and develop advanced understanding and practice in relation to the standards across the early childhood developmental period and in multiple early learning settings</td>
<td>Program evidence shows that candidates are provided with substantive field experiences with opportunities to observe and practice in relation to the standards across the early childhood developmental period and in multiple early learning settings</td>
<td>Program evidence shows that 1) The program meets all expectations for this standard at the Initial level and 2) Demonstrates specific strengths that are innovative, transformative, responsive to critical issues in the field, or indicate sustained and meaningful use of data to inform program improvements over a period of time.</td>
</tr>
</tbody>
</table>
| - There are field experiences in only one of the early childhood age groups and  
- There are field experiences in only one early learning setting | - There are field experiences in at least two early childhood age groups and  
- There are field experiences in at least two early learning settings | - There are field experiences in at least two early childhood age groups and  
- There are field experiences in at least two early learning settings |
| - There are field experiences in only one of the early childhood age groups and  
- There are field experiences in only one early learning setting | Program report indicates specific unique or issues in field including  
- Participation in innovative or transformative initiatives, partnerships or research projects or  
- Sustained and meaningful use of data to inform program planning over time, That support candidate learning and performance on the standard. |
innovative strengths in relation to this standard that respond to needs of candidates, to community or state context, or to critical issues in field including:

- Participation in innovative or transformative initiatives, partnerships or research projects or
- Sustained and meaningful use of data to inform program planning over time,
- That support candidate learning and performance on the standard.
Criterion 5: Quality of Field Experiences

The program’s field experiences support candidates’ learning in relation to the NAEYC standards.

**Rationale:** Candidates will understand and apply the competencies reflected in the NAEYC standards when they are able to observe, implement, and receive constructive feedback in real-life settings.

**Indicators of strength:**

- Field experiences are consistent with outcomes emphasized in NAEYC’s standards, are well planned and sequenced, and allow candidates to integrate theory, research, and practice.

- When the settings used for field experiences do not reflect standards of quality, candidates are provided with other models and/or experiences to ensure that they are learning to work with young children and families in ways consistent with the NAEYC standards.

- Faculty and other supervisors help candidates to make meaning of their experiences in early childhood settings and to evaluate those experiences against standards of quality.

- Adults who mentor and supervise candidates provide positive models of early childhood practice consistent with NAEYC’s standards.

- Field experiences expose candidates to a variety of cultural, linguistic, and ethnic settings for early childhood care and education.

- Field experiences provide opportunities for candidates to observe and practice in at least two of the three early childhood age groups (birth-age 3, 3-5, 5-8) and in at least two of the three main types of early education settings (early school grades, child care centers and homes, Head Start programs)

**Sources of evidence:**

1) **Report:**
   
a) **For all programs**, a one-to-two page description of program’s approach to using field experiences. **For renewing programs**, include a description of how Criterion 5 has changed since your initial self-study. Reflect on where you were and where you are now. What led to these changes? If there have been no changes, explain how Criterion 5 remains applicable and visible in your program.

   b) **For all programs**, program chart of field experiences

   c) **For all programs**, a one-page description of plans to address challenges and build on current strengths in this area.

2) **Site Visit:** Interviews with faculty, candidates, cooperating teachers, and other supervisors
a) For all programs, a one-to-two page description of program’s approach to using field experiences. For renewing programs, include a description of how Criterion 5 has changed since your initial self-study. Reflect on where you were and where you are now. What led to these changes? If there have been no changes, explain how Criterion 5 remains applicable and visible in your program.
b) *For all programs, program chart of field experiences*

Sample program chart of field experiences

<table>
<thead>
<tr>
<th></th>
<th>Location/Setting</th>
<th># Hours</th>
<th>Age Group</th>
<th>Assignments</th>
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<tbody>
<tr>
<td>Field Experience #1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Field Experience #2</td>
<td></td>
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</tbody>
</table>

**Note:** The chart above is just an example. Programs can choose to provide the same information in a different format.
c) For all programs, a one-page description of plans to address challenges and build on current strengths in this area.