**OHIO ALLIANCE for CLINICAL PREPARATION and PARTNERSHIPS**

**Alliance Structure Overview Proposal**

**Title:** Ohio Alliance for Clinical Preparation and Partnerships (OACPP)

**Authorizing Agency:** Ohio Board of Regents and the Ohio Department of Education

**Oversight / Lead Agency:** Ohio Association of Colleges for Teacher Education (OACTE)

**OACPP Organizational Overview:**

* **Purpose:** The Ohio Alliance for Clinical Preparation and Partnerships Committee is established for the purpose of advancing and promoting practices and policies to transform clinical preparation through collaborative partnerships among schools, districts, and higher education by:
	+ Creating and communicating a vision and goals for clinical practice;
	+ Sharing best practices, research and innovations;
	+ Identifying and addressing issues related to clinical practice;
	+ Advocating for policies needed to support clinical practice.
* **Committee Composition**
	+ Higher Education – Educator Preparation (8) (Selected / Appointed by OACTE)
		- 4 from State Educator Preparation Programs (one of which is a Field Director / Coordinator)
		- 4 from Private Educator Preparation Programs (one of which is a Field Director / Coordinator)
	+ PK – 12 Schools Representation (6+) – (Additional representation maybe determined – Selection / Appointment by the Ohio Leadership Committee)
		- Ohio School Board Association Representation
		- Ohio Association of Elementary Administrators Representation
		- Ohio Association of Secondary School Administrators Representation
		- Buckeye Association of School Administrators Representation
		- Ohio Federation of Teachers Representative
		- Ohio Education Association Representative
		- Coalition of Rural and Appalachian Schools
	+ Ohio Board of Regents (1) – Ex-officio
	+ Ohio Department of Education (1) – Ex-officio
* **Committee Leadership**
	+ Co-Chair – PK-12 and Higher Education
* **Committee Responsibilities**
	+ To review and revise the purpose of the committee
	+ To establish an organizational structure and process to fulfill purpose
	+ To provide coordination, communication and advocacy
	+ To establish yearly goals and provide oversight and assistance in accomplishing goals
	+ To provide updates and report on achievements to OACTE / State Leadership Committee / Key Constituents.
* **Subcommittee / Design Team Structure (Possible)** – Design Teams may be established to expand participation (Higher Ed. and PK-12) and to focus on specific areas. Committee members would be assigned to each Design Team to provide leadership, coordination and support. The nature or focus of the design teams may vary based on the goals/issues identified and prioritized by the Committee. Depending on the goal or issue, the task of the Design Team maybe to collect and share current practices or to establish a group to address (study / develop recommendations, etc.) the specific issue. The following are some of the issues that have been identified from the CAEP Alliance Survey High Priority Issues and from state discussions):
	+ Clinical Partnership Design Team
		- Who and how do we engage partners and stakeholders in this endeavor?
		- With the new clinical models what are the specific benefits to all (P-12 students, teacher candidates, schools, higher education and to the state), and what is the most effective way to communicate to key partners and stakeholders?
		- Do we have research to support the benefits?
		- How do we develop and communicate the vision and shared goals among the key partners and stakeholders?
		- What current partnership models exist and how can we promote?
		- How should partnership agreements be developed, formalized and sustained?
		- What specific roles and responsibilities need to be identified and assigned to each partner?
		- What are the best ways to keep the partners engaged in candidate selection and placements?
		- What are the most effective approaches to partnership governance and management?
		- What policies need to be in place to support and sustain dynamic partnerships?
		- Other Issues – to be identified
	+ Clinical Experience Design Team
		- What are the most effective ways to match candidate’s qualifications and areas for growth with potential placements?
		- How should placements be managed when large numbers of candidates need to be placed across a limited number of schools and districts?
		- Where and when should clinical experiences take place?
		- How do we ensure that placements help candidates to be prepared to teach diverse student populations?
		- How should the curriculum and field experience be blended and balanced?
		- What are the core practices to be demonstrated by teacher candidates during student teaching? How do we assess them?
		- What are the most promising instructional approaches for teaching the core practices?
		- What policies need to be in place to support and sustain integrated clinical experiences?
		- Other Issues – to be identified
	+ Clinical Educators Design Team
		- How should “clinical educator” be defined at the university/ provider institution and at the school district?
		- What should be the core qualifications, dispositions, and competencies of clinical educators?
		- How do we ensure the key competencies?
		- What strategies are effective in recruiting highly qualified clinical educators?
		- What professional learning / development should be provided to clinical educators as part of continuous improvement efforts?
		- How do we ensure that all participants are current in best practice?
		- What systems of support are needed to promote continuous improvement, candidate retention, clinical faculty retention, P-12 student growth, and collaboration?
		- What metrics should be used to evaluate clinical educators and who should be involved in evaluation?
		- What strategies and incentives can be effectively used to retain highly effective clinical educators?
		- What strategies and structures are needed for creating and managing clinically rich programs within a university setting?
		- What policies need to be in place to support the recruitment and retention of highly effective clinical educators?
		- Other Issues – to be identified

It should be noted that many of the questions and issues above are being addressed to varying degree – such as the White Paper entitled *Clinically Rich Teacher Preparation: A Collaborative Commitment to P-12 Student Learning.* We also have examples of innovated practice and partnerships from across the state as well as on-going research. The OACPP Committee can coordinate, communicate, and serve as an advocate for such initiatives. The OACPP committee can model the collaborative partnership needed to maximize P-12 student learning by providing high-quality clinical experiences.

Next Steps:

* Secure “buy in” from OBR and ODE on the concept
* Secure “buy in” from SUED and OAPCTE on the concept
* Secure OACTE approval to be the lead agency
* Finalize Committee structure and purpose
* Solicit committee participants
* Appoint / Select Co-Chairs
* Convene initial meeting of the committee
	+ Agenda
		- Introductions
		- CAEP Alliance Overview
		- Ohio Alliance Overview
		- Finalizing Committee Composition
		- Finalizing Committee Purpose and Goals
		- Discussion of Alliance Structure
		- Future meeting logistics
		- Next Steps