

**EPAC Meeting
September 25, 2015
Office of Higher Education - Hartford, CT
9:00 AM – 12:00 PM**

EPAC Members Present: Sarah Barzee, Elsa Nunez, Mike Alfano, Ken DiPietro, Patricia Garcia, Sandy Grande, Jess House, Andrew Lachman, Jeff Leake, Greg Little, Colleen Palmer, Nate Quesnel, Janet Robinson, Larry Schaefer, Rich Schwab, Don Slater, Nate Snow, Allan Taylor, Bob Villanova, Jeff Villar

EPAC Members Absent: David Bosso, Gary Maynard, Karissa Neihoff, Joan Parris, Fran Rabinowitz, Jason Rojas, David Scata, Dani Thibodeau, Jim Thompson

Other Representatives: Jennifer Benevento (AFT-CT), Jennifer Curran (Wesleyan), Noah Dion (OHE), Ann Gruenberg (CABE), Suzanne Robinson (CEEDAR), Molly Siuty (CEEDAR), Tim Dove (CCSSO)

CSDE Staff: Shannon Marimón, Georgette Nemr, Nancy Pugliese, Charlene Tate Nichols, Katie Toohey, Mandy Turner

Meeting Facilitator: Mary Broderick

9:15	<p>Welcome and Introductions</p> <p>Sarah Barzee and Elsa Nuñez welcomed participants. Today’s meeting will focus on EPAC Principles 3 (clinical experience requirements) and 4 (district-program partnerships and shared responsibility).</p>
9:25	<p>Meeting Protocols and Future Meeting Dates</p> <p>Mary Broderick, facilitator, reviewed the agenda and the meeting norms for the day. EPAC members reviewed and approved minutes from May 29, 2015. A member requested that meeting handouts be provided as far in advance as possible.</p> <p>A decision-making process was proposed by the facilitator. This process will use consensus-building tools first. If consensus cannot be reached with those tools, then the facilitator will invite a motion to move for a vote. EPAC members must be present to vote.</p> <p>Members reviewed the charge and parameters of subcommittees. Subcommittees will develop a set of recommendations for implementing new elements of the program approval system. They will present recommendations to the full EPAC for review and comment. The full EPAC may approve or send the recommendations back to the subcommittee, and the charge for development/revisions resides with the subcommittee.</p> <p>Future meeting dates will be December 11, 2015 (9 – 11 a.m.); April 29, 2016 (9-noon); and October 7, 2016 (9 a.m. – 3 p.m.).</p>
9:40	<p>EPAC Work Updates and Timelines</p> <p>Katie Toohey, CSDE, provided a recap of progress that subcommittees are making towards EPAC goals:</p> <ul style="list-style-type: none"> • The Program Review Subcommittee will begin its work regarding Educator Preparation Regulations this fall and present its recommendations in Fall 2016 to EPAC and SBE. The program review process will launch in Spring 2016 and present its recommendations to EPAC and SBE in Spring 2017. The SBE has approved CSDE’s request to put a hiatus on approving new programs in the next two years, with the exception of programs that address shortage areas. • The Assessment Subcommittee is launching the edTPA implementation pilot this fall. Findings of the pilot will be prepared in the spring and recommendations will be presented to EPAC and SBE in Fall 2016. In addition to the four Connecticut State Universities, the University of Saint Joseph and Teach for America will also participate in

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- the pilot. Based on the pilot, full implementation might begin in Spring 2017.
- Teacher/Employer survey will be piloted at a small scale this fall, and a statewide pilot validation study will take place in spring 2016. EPAC will review findings of the study in Fall 2016, and full implementation is planned for spring 2017.
 - District/program surveys are on hold until AACTE’s Clinical Practice Commission criteria and recommendations for clinical practice is released in February 2016. A small scale pilot is planned for spring 2016, followed by a statewide pilot in Fall 2016. EPAC will review findings in Spring 2017.
 - Data and Accountability subcommittee will focus on building the infrastructure of the system in Fall 2015. EPAC will get a preview of this system in Spring 2016, with a plan to go live in Fall 2016.

9:50

Panel Discussion: Clinical Experiences & District Partnerships

Three panelists presented information about a partnership between Central Connecticut State University (CCSU) and Cromwell Public Schools. The purpose of the panel was to provide an example of EPAC Principles 3 and 4 in action.

Panelists:

- Dr. Michael Alfano, Dean of Education, CCSU
- Dr. Paula Talty, Superintendent, Cromwell Public Schools
- Ms. Alyssa Frohlinger, Grade 4 Teacher, Cromwell Public Schools

Ms. Frohlinger described her field experiences prior to her student teaching. These included internships that took her into classrooms in various districts, which helped her gain skills in lesson planning. Her student teaching experience gave her the foundational knowledge of instruction and experience working with parents. She wishes she could have learned more about working with special education students in her preparation program, and that her internships had included time for her to co-teach.

Dr. Talty described the areas for collaboration between districts and higher education. She wishes principals and instructional leaders had more opportunities to visit pre-service courses, so that they could assist pre-service teachers with instructional strategies. Teachers often know the content, but delivering content to a diverse student body is a challenge. She also recommends that teacher candidates spend a year with the same students, as this helps them see how students make progress. Assessment practice is a gap that she sees in her teacher candidates. Districts cannot fill all those professional learning needs, so it needs to be addressed more by the IHE.

When Dr. Talty taught a teacher prep course, she could address the gaps she saw in teacher candidates at the field level. She advocates that teacher candidates need to have some of those experiences first (i.e., how to teach content, how to assess for learning) during their clinical experience, so that the lion’s share does not fall on the district that hires them. If districts could collaborate more with the professors, the course content could be shaped to address the needs that districts have in their classrooms.

Dr. Alfano stated that policy analysis is taking place regarding models of clinical practice that are effective. He is part of a commission that is helping field to come to consensus around nomenclature used to describe clinical experience (e.g., What exactly does an IHE mean by “internship”?), and they plan to build a glossary. They hope to deliver their recommendations in February 2016. CCSU is also undertaking a redesign of clinical experiences at undergrad and graduate levels, with a focus on articulating measurable, observable outcomes. As part of the redesign, they will articulate their formal arrangements with districts, so that they can capture

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those outcomes more reliably.

Dr. Alfano noted that it can be challenging to find a cooperating teacher because some teachers are concerned that bringing in a pre-service educator will hamper their ability to meet the needs of their students. The TEAM structure can also limit pre-service teachers' access to some of the best educators given the conditions placed upon who can work with student teachers. In cases like these, it is important to help teachers see the collaboration as a continuum of professional growth for both pre-service and in-service teachers. Regarding program approval, Dr. Alfano expressed that the innovation that IHEs bring to districts should be highlighted just as much as the checklist items that are currently the basis for making approval decisions.

Comments and Questions:

- *Question: Can EPAC think more creatively about how to run 5-year preparation programs?* Dr. Talty mentioned that they tend to hire graduates who did their clinical experiences in Cromwell. So their first year of teaching is treated almost like a 5th year of a clinical experience.
- *Question: How can teacher preparation programs help candidates with managing the logistics of fulfill the requirements of doing clinical experiences in rural, urban, and suburban settings?* Dr. Alfano stated that by defining the clinical experience more clearly, they can be more strategic in forming partnerships with districts that can help teacher candidates fulfill those requirements.
- *Comment:* There is potential tension between giving teaching candidates some continuity in one setting and the requirement to do their clinical experience in multiple, diverse settings. Sarah Barzee points out that the current regulations are being revised and could provide the flexibility that teacher candidates need for their clinical experiences.
- *Comment:* Districts must see the value that the clinical placements bring them. It can't be seen as more burdensome than beneficial. Dr. Talty stated that the intellectual discourse needed for teachers to discuss their practice happens when colleagues have had a chance to work together over time.

10:50 **Break**

11:00 **Table Group Discussions and Report Out**

1. What practical structures and policies would you recommend to ensure that EPAC meets Principles 3 & 4?

- Get buy-in from both sides. Mutually beneficial design.
- Openness to learning by all partners.
- Clear incentives for both sides – i.e., districts get a hiring pipeline and opportunities for authentic dialogue about teaching and learning, collaborating teachers get adjunct professor status, incentives that appeal to millennials.
- Have one IHE employee assigned to a district to develop the relationship
- Logistically practical (i.e., geographic proximity)
- Policies that describe what knowledge and competencies a collaborating teacher should have. How can these teachers be retained?
- Should clinical experiences be competency-based or should it be time-based?
- Should EPP be designed with an eye toward preparing candidates to specialize in areas they will need if they teach in a certain type of district?
- Post-graduation support provided by the EPP in collaboration with the district employing

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	<p>the candidate</p> <p>2. What are your recommendations for evaluating the quality of clinical experiences and district partnerships?</p> <ul style="list-style-type: none"> • Number of student teachers hired by the collaborating districts • Satisfaction of districts with the hires from the IHE • Number of years that the partnership has existed • Clear articulation about expectations
<p>11:50</p>	<p>Next Steps and Reflection</p> <ul style="list-style-type: none"> • Awaiting release of AACTE’s Clinical Practice Commission criteria and recommendations for clinical practice in February 2016. Then will begin working on the IHE/District Partnership Interview Protocol. • CSDE can compile a list of IHE/district partners and have IHE partners review before disseminating more broadly. <p>What worked well today:</p> <ul style="list-style-type: none"> • Having a shared focus and opportunity for participation • Panel discussion • Limiting the focus to two elements harnessed the group’s energy • Small group discussions • Good pace of activities <p>What we could have changed:</p> <ul style="list-style-type: none"> • 30 minutes doesn’t give enough time to think outside the box • Reporting didn’t always capture the important details that took place in small groups, so need a way to make sure those are recorded • Flipped meeting model: how to sift through the informational pieces at the start of the meeting and give more time to work in small groups? We might have reading material ahead of time or a brief summary that could be read at the start. • Would have liked to see a different perspective on clinical experiences (how did someone else approach it?)
<p>12:00</p>	<p>Adjourn</p>