

**Kennesaw State University – Collaborative Clinical Practice**

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*I've had many student teachers before, and I always felt like a host in my own classroom. With this model, I feel that I've become part of the teacher educator team. There are so many teachable moments... for the children, my student teacher and myself. ~ Third Grade*

Collaborating Co-Teacher

## Introduction

As teacher educators in the United States, our capacity to prepare competent P-12 educators who are ready to meet the challenges of 21st century schooling has been called into question (Darling-Hammond, 2006). Low student achievement and high teacher attrition rates have resulted in a national call to prepare prospective and practicing teachers with the knowledge, skills, and dispositions to collaborate with colleagues and to provide an equitable and quality education for all students, particularly those from diverse backgrounds (Darling-Hammond, 2010). For example, the NCATE Blue Ribbon Panel on Clinical Preparation and Partnerships for Improved Student Learning (2010) recommends the transformation of clinical practice in order to better prepare prospective and practicing teacher with programs that create opportunities: (a) for partnerships with schools to advance shared responsibility for teacher preparation; (b) for prospective teachers to learn by doing; (c) for transforming curriculum, pedagogy, structure and delivery; and (d) to ensure prospective teachers will know how to collaborate with colleagues.

In response to this call as well as on-going challenges from the field, the teacher education faculty from Kennesaw State University (KSU) created formal partnerships with local school districts and designed, developed, implemented, and evaluated a collaborative model of practice that occurs throughout a yearlong clinical experience. Inherent in this model are two key partnerships that simultaneously support novice and practicing teacher development including pre-service co-teaching (Bacharach, Heck, & Dahlberg, 2010; Badiali & Titus, 2010) and classroom coaching (Knight, 2007).

## Context

Kennesaw State University (KSU) is located in metropolitan Atlanta and enrolls approximately 25,000 students. KSU is home to the Bagwell College of Education (BCOE), the largest preparer of P-12 teachers in the University of Georgia System. KSU's Collaborative Model of Clinical Practice (CCP) was initiated under the auspices of a Teacher Quality Partnership (TQP) grant funded by the United States Department of Education (USDOE). In 2009, the BCOE began collaborating with a large local school district to develop seven professional development schools (PDS) in an urban feeder path of five elementary schools, one middle school, and one high school. The overarching goal of this partnership was to improve P-16 student achievement in high needs schools by transforming teacher preparation. In many ways, KSU's reformed teacher preparation program has been "turned upside-down" and reflects the recommendations of NCATE's Blue Ribbon Panel. For example, through a shared partnership, the university and school district faculty designed the highly rigorous pre-baccalaureate curriculum that prepares P-12 students to effectively educate students who attend high needs schools. The *Pre-baccalaureate Urban Education (UE) Teacher Preparation Option* is co-administered, and co-taught by school and KSU faculty at the seven PDS sites. Given the site-based nature of this program, teacher candidates are offered continuous field experiences throughout their junior year. During their senior year, teacher candidates enroll in a yearlong clinical experience designed to enhance the learning of novice and practicing teachers as well as their classroom students through pre-service co-teaching (PSCT).

## Purpose

The purpose of this paper is to describe the CCP Model and its components: (a) professional development, (b) PSCT, (c) classroom coaching, and (d) inquiry. Further, brief results from a pilot study that utilized focus groups to inform the CCP Model are presented.

## Collaborative Clinical Practice

The CCP Model was founded in the previous work of faculty committed to creating a more clinically engaged teacher preparation program through formal yearlong partnerships with local school districts (Gray, Stockdale, & Monti, in press) and co-teaching (Strieker, Zong, Gillis, Wright, & Stockdale, 2012). This initiative to enhance candidates' knowledge and implementation of co-teaching practices has evolved significantly over the past year.

## Innovative Professional Development

During the fall of 2011, university and district faculty collaborated to create a research-based professional development series to prepare three levels of practitioners (i.e., novice teachers [NT], collaborating teachers [CT], and classroom coaches [CC]) to support the successful implementation of PSCT during spring 2012 (Strieker & Lozo, 2011). The professional development series was offered throughout the yearlong internship by means of seminars, site-based follow-up sessions, and job-embedded professional development provided by classroom coaches.

The initial professional development session emphasized broad principles and values related to diversity, inclusive classrooms, and the need for intentional relationship building between the co-teachers (NT and CT) as well as with diverse classroom students and their families. The session addressed the expectations for co-teaching throughout the clinical experience and introduced collaborative practices (Villa, Thousand, & Nevin, 2008) as well as the six co-teaching models that would be utilized (Cook, 2005). The interactive seminar also provided the co-teachers with opportunities to discuss their teaching philosophies, establish ground rules for their co-taught classroom, and practice co-planning a co-taught lesson. The three subsequent follow-up sessions were held at the school sites, and content focused on effective ways in which co-teaching strategies would facilitate increased positive classroom management, differentiated instruction, and formative assessment. Participants were given multiple opportunities to revisit the broad principles and apply their knowledge and skills to solve real problems of practice. This model carefully guided and supported the novice teachers' shift in autonomy from systematic observer to team teacher to teacher. Upon completion, the co-teachers received a *TQP Certificate on Collaboration and Co-teaching*.

## Pre-Service Co-Teaching

KSU researchers made critical assumptions regarding PSCT.

- An actively engaged CT models best practice, scaffolds instruction, and collaborates to facilitate positive student outcomes;
- PSCT serves as a *vehicle* for developing novice teacher's knowledge and skills to teach all students through collaborative practices, positive classroom management,

formative assessments, and differentiated instruction.

The CCP Model (see Figure 1) embraced the following definition to facilitate the initial vision of PSCT: “Two teachers (a cooperating teacher and a teacher candidate) working together with groups of students; sharing the planning, organization, delivery and assessment of instruction, as well as the physical space” (Heck, Bacharach, Mann, & Ofstedal, 2005). Whereas the content of the professional development described above drew heavily from literature describing co-teaching between two certified teachers (Cook & Friend, 1995; Murawski, 2009), it was adjusted to meet the needs of CTs and NTs. After completing the professional development series, 70 pairs of CTs and NTs engaged in PSCT. These pairs committed to implementing PSCT strategies in their classrooms during the semester as appropriate to meet their classroom students’ needs. Participants were encouraged to utilize the varied PSCT models and strategies to co-plan and co-teach daily.

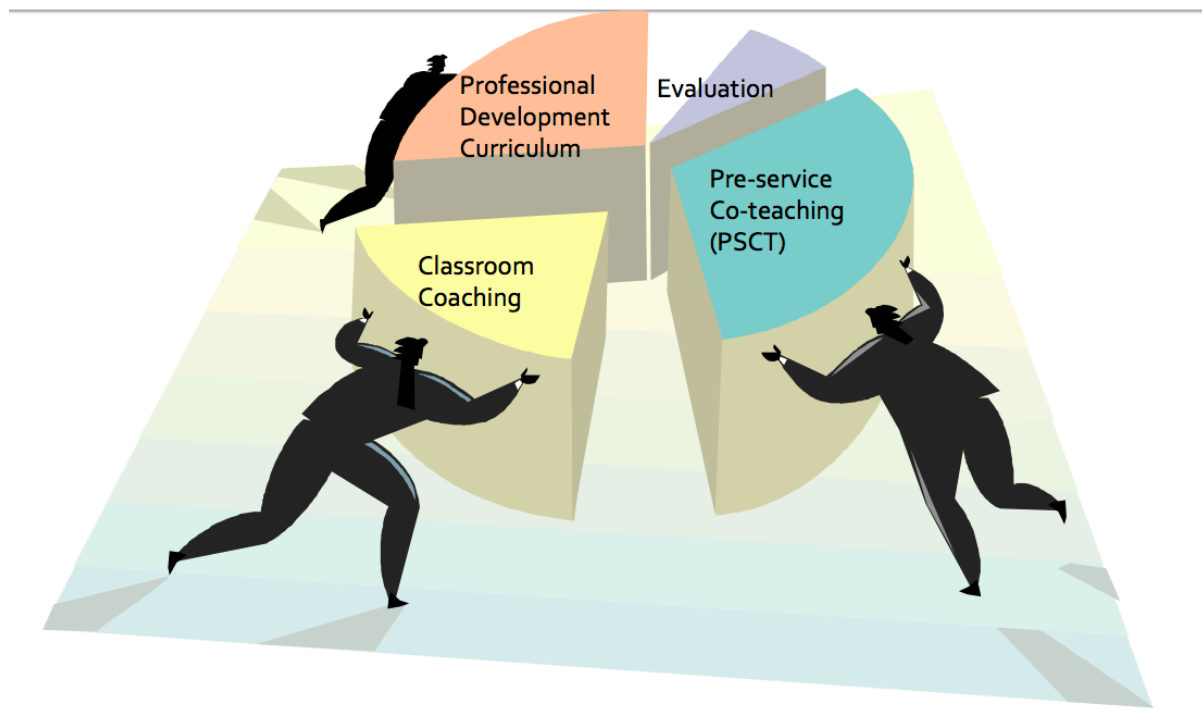


Figure 1. Collaborative Clinical Practice Model (Strieker, Heckert, & Blaver, 2012)

### Classroom Coaching

Our concept of classroom coaching as well as the content of the professional development series for the CC drew heavily from the literature on executive coaching (Goldsmith, Lyons, & Freas, 2000), cognitive coaching (Costa & Garmston, 2002), and instructional coaching (Knight, 2007). For CCP purposes, classroom coaching is described as professional development provided by trained CCs. Classroom coaching was designed as another layer of support for the NT in their journey in becoming an effective teacher; however, CTs also benefit from this collaborative and reflective opportunity. During the spring, 13 CCs (comprised of KSU and district faculty) completed 4–5 classroom observations of a pair where they collected non-evaluative data focused on implementation of PSCT practices, such as the

PSCT models, classroom management, differentiation strategies and formats, assessment, and student and teacher engagement.

Following each observation, CCs engaged in debriefing sessions with participants focused on collaborative dialogue and reflection, analysis of teaching and learning, and personal goal setting. As the classroom coaches collaborated with participants, they engaged in a form of reflective analysis of the presenting problem or current situation. Specifically, during the *reflective* analysis, the coach guided the conversations by asking critical questions, rather than offering solutions or making recommendations (Bearwald, 2011). As the co-teachers reflected upon their teaching and student outcomes, they theorized the lesson with their coach, seeking to understand the theory-to-practice (or practice-to-theory) implications as they co-generated ideas for improving teaching and learning (Roth, Tobin, Camambo, & Dalland, 2004).

### **Inquiry: Focus Group Study**

The purpose of this pilot study was to explore novice and collaborating teachers' perceptions of the benefits and challenges/barriers to CCP, with an emphasis on PSCT. It was the researchers' intention to utilize the outcome data to further inform the CCP Model. Please note that focus groups are only one of the multiple methods being utilized to facilitate the ongoing development of the CCP Model.

### **Method**

**Participants.** Participants were elementary, middle, and high school novice and collaborating teachers. Participants were asked to voluntarily participate in the focus group interviews upon completion of PSCT during the novice teacher's final semester of clinical practice. Consequently, of the 70 PSCT pairs (CT and novice), 19 collaborating teachers participated ( $N = 19$ ; elementary school [ES]  $n = 10$ , middle school [MS]  $n = 2$ , high school [HS]  $n = 7$ ), whereas 22 novice teachers agreed to participate ( $N = 22$ ; ES  $n = 9$ , MS  $n = 4$ , HS  $n = 9$ ) in the focus group interviews.

**Focus group interviews.** Procedures and processes for the focus groups were created to facilitate accurate methods for data collection. An interview guide was prepared to ensure interview questions were consistently asked across focus groups. We conducted eight 90-minute focus groups (four groups of collaborating teachers and four groups of novice teachers). ES, MS, and HS levels primarily separated collaborating teachers and novice teachers. The number of focus group participants ranged from 9 to 1 participant(s) ( $M = 5.5$ ). Participants filled out demographic surveys and then participated in the interviews. Each focus group was audio-recorded and conducted by two facilitators. One facilitator moderated the discussion and the other summarized participants' big ideas on chart paper. Summarized responses were sent to participants for member checks with no changes noted.

**Data analysis.** The data sets collected for our study were a result of focus group interviews. The flow of analysis used to examine the qualitative data occurred in three steps (Miles & Huberman, 1994): (a) transcribing interview tapes and summarizing big ideas; (b) generating categories and themes; and (c) establishing trustworthiness (Lincoln & Guba, 1985). Using data collected during the interviews, one author and a research assistant used *a priori*

codes based on the research questions to independently establish initial categories. CT and novice teacher data were initially analyzed separately; however, because there were no significant differences in responses, they were combined for the remainder of the data analysis. Categories and themes were compared and revised through dialogue and agreement. Another author independently reviewed the coding scheme as a peer de-briefer.

## Results

The results were organized into themes (see Table 1) related to perceived benefits and themes regarding challenges of the CCP Model (with a focus on PSCT).

Table 1. *Focus Group Themes*

Theme	Brief Description
Mentor Modeling	CTs were able to provide consistent, immediate feedback.
Co-Learning/Reciprocal Relationships	CTs and NTs learned from each other and developed collaboration skills.
Shift in Power	NTs noted increased self-efficacy due to “feeling like a teacher” from the first day.
Meet Student Needs	CTs and NTs reported an increased ability to differentiate instruction to meet student needs.
Challenges of PSCT	CT buy-in, defined CC role, as well as clear purpose and expectations are important prerequisites.

### Benefits of PSCT: Keeping Each Other Afloat

The participants discussed the positive collaborative relationships developed during the implementation of CCP. Specifically, they reported the influence of *Mentor Modeling* and the development of *Reciprocal Relationships*.

**Mentor modeling.** Both the CTs and NTs noted the mentoring benefits that were prevalent during PSCT. The NTs reported, in comparison to the “traditional” model of student teaching, the CTs were there to help continuously provide ongoing mentoring and feedback. NTs were overwhelmingly positive about this instant feedback and modeling, noting that the ongoing support for behavior management and teaching strategies allowed them to immediately take on the role of the teacher without feeling “alone.” The CTs were equally supportive of this mentoring model because they felt it allowed them to maintain greater control over the quality of

their classroom instruction. Instead of “giving up” their classroom to a NT, they were able to “step in” and provide mentoring as they taught together. This allowed the NTs to grow and take on larger responsibilities within the classroom.

**Co-learning: Reciprocal relationships.** In addition to the ongoing mentoring, the CTs and NTs also expressed that as PSCT progressed, there was evidence of co-learning and reciprocity among the co-teaching team. As the NTs became more comfortable in the classroom and “learned the ropes” from the CTs, they became more confident and took more risks. The novice teachers reported that this risk-taking was only possible because they knew their CT was there to help out if any mistakes were made. Through these risks, the CTs expressed that they also learned new ideas and teaching strategies from their NTs so the learning was a reciprocal process for both co-teachers. As the relationship grew, CTs and NTs began experiencing a more collaborative relationship where co-planning and the co-generation of ideas became commonplace. A direct result of this was a reported increase in the development of collaboration skills. Further, participants communicated that the CCs offered an additional level of collaboration, providing both the CT and NT with valuable suggestions, new ideas, resources, and strategies to improve instruction.

### **Shift in Power Distribution**

As the participants reflected on PSCT, they commented on the various ways their relationships shifted over the course of the experience. CTs and NTs both noted the positive nature of the shifting power relationship dynamics. For example, NTs reported being frequently asked by their CTs, “What do you think?” Also, the NTs appreciated being considered an “equal” from the first day of class and expressed this helped increase their self-efficacy and confidence because the classroom students perceived them as another teacher with co-authority rather than as a student teacher. Another key finding that the participants communicated explained how the NT slowly moved into the lead position during co-teaching.

### **Increased Ability to Meet Student Needs**

Participants reported that PSCT encourages the CT and NT to collaborate to design instruction to better meet the diverse needs of all students through the frequent implementation of multiple pedagogical methods. Focus group data suggest the opportunity to individualize instruction increased for several reasons. First, both the CT and NT reported that having more than one teacher in the classroom allowed for multiple ways to structure grouping formats to allow for smaller teacher-to-student ratios. This allowed the co-teachers to use formative assessments more frequently to plan and implement instruction to meet individual students’ needs. In addition, classroom management was easier with two teachers, thus increasing active engagement and more time on task. Finally, participants cited that having two teachers in the classroom allowed students to benefit from two different teaching styles. Participants expressed that all of these factors contributed to their increased ability to meet student needs.

## Challenges of PSCT

With any type of new initiative, there will always be challenges to overcome, and this model was no exception. Participants were asked direct questions regarding their perceived challenges and were asked to provide suggestions for improving the model.

**Improving CT buy-in.** Though most of the CTs willingly participated in the PSCT model, there were a few that were “chosen” to participate by administration. These teachers resisted using the PSCT models, and their NTs reported this gave them a negative PSCT experience (compared to their peers).

**Clarifying purpose and expectations.** Some participants communicated that the purpose of the initiative was not clear. For example, some CTs expressed that the novice teacher needed to “stand on their own” and not co-teach because they would most likely not be a co-teacher in the future. Some NTs also echoed this view. Further, some participants voiced confusion of the role of the CC as opposed to the university supervisor. The CCs fulfilled a non-evaluative role, and this was in direct opposition to the supervisor’s role. Finally, participants reported concerns with the amount of face-to-face professional development hours required as well as some redundancy in the PD content.

## Conclusion

The KSU Collaborative Clinical Practice Model has evolved since its inception, and researchers are utilizing various methods to continue informed development and revisions. While this paper has reported on the results of a pilot focus group study, inquiry pervades our CCP Model, ranging from formal research projects and comprehensive program evaluation to content analysis of project artifacts. Whereas only some of the results are disseminated, all of it is used to inform the revisions to our model to assure that it meets the needs of our novice and collaborating teachers and the P-12 students who attend the schools where they work. Through the completion of this investigative work we have gleaned valuable insights related to the ongoing development and refinement of the CCP Model, including the following:

- A new definition and deeper understanding of PSCT;
- A revised professional development focus and delivery method;
- A clarification of the classroom coach role;
- A clarification of the purpose and expectations of CCP/PSCT.

We have adopted a definition of PSCT to reflect more accurately our understanding of PSCT and how the partnership principles and teacher reflection influence the PSCT relationships and outcomes:

When two or more teachers, novice and experienced, collaborate to teach a group of students and reflect on teaching and learning. It focuses on the K-12 student learning, and provides professional development for practicing teachers. For student teachers and experienced teachers, co-teaching emphasizes responsibility, reflection, respect, and equity in collaborative planning and teaching. (Gallo-Fox, Scantlebury, Wassel, Juck, & Gleason 2005)

Further, as demonstrated in the results of the focus group data, PSCT facilitates mentor



modeling and reciprocal relationships by requiring the NT and CT to “teach at one another’s elbow” (Roth & Tobin, 2002) and share responsibilities in all aspects of instruction by co-planning, co-teaching, co-assessing, and co-reflecting. This finding is very encouraging in light of the implication that this type of collaborative relationship may provide NTs and CTs with frequent opportunities to practice and improve critical collaboration skills. As reported by interview participants, the NT is not left to “sink or swim” on his or her own; rather, he or she has direct access to an experienced professional who is able to engage in on-going dialog and instant feedback about the teaching and learning process. This finding is promising as the continuous presence of an experienced cooperating teacher increases the novice teacher’s access to information, social networking, and teaching resources; this ultimately increases the quality of the clinical experience and the individual’s ability to teach (Roth et al., 2004).

We believe the model also provides opportunities for the CT to improve his or her own professional practice and fully participate in the development of the NT, rather than simply acting as a classroom host. This encourages a paradigm shift in hierarchy that builds NT’s self-efficacy and allows him or her access to co-authority as well as the chance to “take the lead” during co-teaching. Finally, we understand that PSCT provides NTs frequent opportunities to co-plan and co-assess in order to gain confidence and practice with implementing small groups and individualized instruction to meet the diverse needs of classroom students.

As our model has evolved, we have also become increasingly aware of the roles and significance of reflective practice and equitable partnerships. Reflective practice is viewed as an important component of professional development, a problem-solving strategy and a means of assessment (Osterman & Kottkamp, 2004). Through reflective practice, NTs work closely with their CTs and CCs to examine and resolve important issues related to their emerging practice. Given this, we intentionally integrated reflective practice opportunities as well as explicitly incorporated Knight’s (2007) Partnership Principles into the refined PD content. These revisions are critical as we realize the classroom environment as well as CCP relationships must support reflective, trusting, equitable, and open communication that encourages mutual respect and risk taking in order for participants to achieve maximum benefit from their CCP experiences. Ultimately, we hope the CC and CT will facilitate a safe learning environment where the NT can openly discuss her perceptions of her current reality and have clear choices in collaboratively developing a plan to improve her personal effectiveness as a teacher.

Based on feedback received during the focus groups, the professional development content was revised and transformed into an on-line learning format: *A Partnership Approach to Pre-service Co-Teaching*. A Moodle environment supported by the KSU IT team is currently utilized to house the self-enrolling course. The content is divided into four learning modules: (a) An Introduction to PSCT, (b) PSCT to Support Classroom Management, (c) PSCT and Assessment, and (d) PSCT to Support Differentiated Instruction. The modules require CTs and NTs to complete collaborative activities focused on reflection and practical application including the creation of co-planned lessons.

Overall, the NTs and CTs both stated that the benefits of PSCT far outweighed any challenges. In fact, some expressed, “We can’t go back! We love this!” However, as noted, challenges to the CCP model emerged. One such challenge is the need to improve CT buy-in. We now believe it is critical to ensure that CTs elect to participate in this model and are not forced to do so by administration. An additional challenge was the clarification of the CC role. Classroom coaching is non-evaluative and non-supervisory; therefore, it was in direct contrast to evaluations completed by the university supervisor who had the power to make high-stakes

decisions relative to the novice teacher's standing in the teacher preparation program (Tschannen-Moran & Tschannen-Moran, 2011). We are currently collaborating with our placement office to increase the supervisor's understanding of the CCP Model and its impact on the NT and CT expectations during clinical practice as well as the CC's role. We hope to negotiate an outcome that is mutually beneficial to all stakeholders. Finally, we have intentionally revised the professional development for all participants to ensure it provides explicit information regarding the purpose and expectations of the CCP Model.

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