CLINICAL APPROACH TO THE INDUCTION OF TEACHERS INTO THE PROFESSION

Statement of the Problem

The practicum which is provided students as they enter the profession, whether it is in the form of the traditional practice teaching or an internship, coupled with their initial year's experience, is cited consistently by teachers as the single most important factor influencing their teaching careers. A quality practicum by its very nature requires several conditions:

1. It is associated with theoretical understanding of the nature of teaching.

2. It normally requires the cooperation of two or more agencies in providing a suitable situation under which the new teacher may gain experience. This usually is a cooperative arrangement between a college and a public school system.

3. It requires joint supervision by an experienced teacher and a representative from the college.

Very often situations under which the practicum is conducted are not ideal. The supervisor provided by the college seldom is involved in planning and conducting daily experiences provided the student teachers in public school settings. The supervising teacher often lacks skill and special training in supervision, and consistent help is notably lacking for first-year teaching. Little effort is made to provide comprehensive experience for trainees to gain insight into the total responsibility of the teacher which includes assessing the needs of students; planning sequential educational programs for them with long-range goals; evaluating their teaching acts in terms of these long-range goals; and evaluating pupil progress and modifying their

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programs to assure continuous progress on the part of each student. Also the theoretical part of the experience that precedes or accompanies the practicum is often remote and unrelated to the specific problems teachers meet day by day in their early experience. The supervising teacher in the classroom where the practicum is offered is usually not associated with seminars provided by the college and is therefore not influenced by them nor does he influence them. Generally, supervisors both from the college and from the public school system lack the skills of interpersonal relationship, lack understanding of teaching theory, and have not developed a systematic approach to supervision.

This proposal is designed to improve the quality of the practicum experience provided in the teacher's preparation program through (1) the development of a highly competent core of supervising teachers and (2) the planning of the practicum so that it is more an integral part of the total program rather than a tacked-on experience. To accomplish these ends the clear role and organizational definitions of the agencies and personnel carrying out the responsibilities for these agencies must be established. Further opportunities, too, for supervisory personnel to gain supervisory competence must be provided.

The proposal is based upon the concept of clinical supervision as envisioned by Dr. Morris L. Cogan who developed and refined the concept. It involves the supervisor's working directly with the supervisee, with a deliberate attempt to influence the supervisee's behavior through planning for long- and short-range objectives.

Steps in the clinical supervision cycle are observation of the supervisee's performance by the supervisor, analysis of the performance of the new teacher, planning the strategy for the conference by the supervisor, and holding the conference. The goal of the conference is to help the prospective teacher gain an insight into his own teaching performance so that the
plan for the next day can be made with a high degree of confidence. The cycle is repeated as often as it is effective and efficient in maximizing the total development of the prospective teacher's potential.

The in-service training which is essential to this plan consists of a series of practice sessions over an extended period of time. During these sessions trainees are involved in each step of the cycle under the direction of a team of experienced clinical professors.

**Plan of the Program**

The program plan is based upon the major needs required for the clinical approach to the induction of teachers into the profession.

1. Schools and colleges need to confer and agree upon the selection of a clinical professor who will assume joint college and public school responsibilities. The clinical professor who holds professorial or academic rank in the college will have the responsibility for conducting seminars, improving the skills of the classroom supervising teacher, and providing expert leadership in the conduct of the clinical cycle.

2. A core group of expert supervising teachers needs to be established. These supervisors need a high degree of training through summer practicums in supervision wherein summer schools are established and trainees are placed in student teaching situations with the classroom supervisors and clinical professors working together on the improvement of their own understandings and skills.

3. A systematic extension of the program by the clinical professor who not only performs the responsibility required by the college but also extends the skills of the supervising teachers by working with them throughout the school year needs to be developed.
4. A planned program on the part of the college for the selection, induction, and training of clinical professors with continuance of the training program to a degree that might lead toward a career in supervision recognized by both status and adequate rewards. Eventual recognition of such a training program by the college leading toward a doctorate in clinical supervision is a final need.

Present Program in Oregon

As a result of the Oregon Program, several colleges and school systems have begun a program of clinical supervision. During the past three years the State Department of Education, through the Oregon Program, sponsored meetings which were designed to develop a program of supervision believed to be more objective, more forceful, and having greater depth than previous programs. It brought Dr. Morris L. Cogan and Dr. Edward Bantel to Oregon and made them available to every area that was participating in the Oregon Program. It provided a one-week workshop featuring Dr. Ned A. Flanders and Dr. Edmond J. Amidon. It was also possible for selected personnel to train for supervisory positions by attending a six-week workshop on clinical supervision conducted by Dr. Morris Cogan in Pittsburgh.

After this initial training, clinical professors were selected to work in cooperation with the colleges and public schools to train prospective teachers.

According to agreement the clinical professor (1) is a resident in the school or in the schools of the district; (2) receives one half of his salary from the school district and one half from the college; (3) maintains tenure, retirement, and other benefits with the school system and thus is identified with the school system and its purposes; and (4) has full privileges and responsibilities as a member of the college staff.
The clinical professor was in each case appointed from districts in which he was serving as a full-time teacher. He now serves the district by working with supervising teachers and new teachers joining the staff. He serves the college by supervising teachers in training. In this manner he attempts to upgrade the supervisory skills and teaching skills of the classroom supervising teacher, and he sometimes supervises first-year teachers and interns to improve their level of performance. Thus he helps upgrade the instructional program in the schools in which he works.

The clinical professor is a resident of the school district; he is not a visitor and takes little time for travel which could otherwise interfere with his duties. As the college supervisor he helps the college build a group of highly skilled supervising teachers with whom student teachers may be placed, and he provides liaison with the college in all matters concerning the placement and supervision of student teachers.

The school system assumes the true responsibility of induction of members into the profession. The student teacher receives high level, intensive supervision from qualified personnel. The atmosphere of growth and professionalism permeates the staff involved in the program. Building principals or persons in charge of the supervision of teachers act as effective associates to the clinical professor.

The problems associated with this program are partly financial. The school district may recognize the need for such a program but at times may be pressed to find funds to support the supervisory personnel. Some school districts do not place a high enough priority on the responsibilities of inducting teachers into the profession to make funds available to assume their share of the cost. In these situations the clinical professor could become a catchall for a variety of responsibilities and duties not related to his main responsibility.
The added costs required to implement this program should not be borne solely by the school district which happens to be in close proximity to the college. The major finances required to sustain this program should be provided through state legislative appropriation or other revenues from agencies which have the principal responsibility for the training and inducting of teachers into the profession. School systems which are adjacent to the college bear a heavy burden in the number of prospective teachers they provide for within the teaching staff.

**Steps in Moving Toward This Plan**

This proposal envisions financial assistance from an outside source to demonstrate the value of clinical supervision.

1. It requires additional funds for the initial training of clinical professors in practice situations.

2. It requires financial assistance to the local school district to pay its share of the clinical professor appointees in some proportion to the number of teachers trained in that district who will serve outside the district for the major part of their careers.

3. It requires additional financing to provide remuneration for outstanding teachers who wish to remain in classroom teaching. The caliber of teachers needed and the training necessary require remuneration equivalent to that in positions of administration in the local school system or that received by higher ranking college personnel.

As funds are acquired, additional summer workshop practicums need to be planned to train promising clinical professors. Colleges will need to provide a systematic program for teaching the skills of clinical supervision in a program designed to lead toward a doctorate. As these programs become well estab-
lished, a program of interpretation and evaluation is needed in order to establish the worth of these programs in improved instruction. The programs need to be planned to include instruction in the teaching strategies and thought processes as developed by such people as (1) Dr. Hilda Taba and her staff at San Francisco State College that were found to be effective in attaining three cognitive tasks—concept development, integration of data, and interpretation of principles; (2) Dr. Richard Suchman in his strategies for Inquiry Training; (3) Dr. Paul Torrance and staff in the area of creativity; and (4) the strategy used by such people as Dr. James Gallagher who has identified a series of teaching strategies that are related to the development of divergent thinking, convergent thinking, and evaluative thinking as well as those behaviors of teachers that develop the cognitive memory aspect of the student's intellect.

As clinical professors with a high degree of training and sensitivity they should have the attitudes, insights, and skills that are associated with the type of work that is done in the National Training Laboratories in Maine, California, and Utah. Through such a program it would be envisioned that teachers would be inducted into the profession in such a manner that they would develop:

1. Self-insight (or "sensitivity" to self and others).
2. Understanding of conditions which inhibit or facilitate effective interpersonal, group, and intergroup functioning.
3. Understanding human behavior and especially the communication process.
4. Skills in diagnosing individual, group, and organizational behavior.
5. Confidence and desire to try to improve own performance.
6. An expanded consciousness and recognition of choice, or modification or restructuring of assumptions which ordinarily are taken for granted.
7. A spirit of inquiry, or tentativeness in reaching conclusions, and willingness to expose ideas, plans, and so on, to empirical testing.
8. Authenticity in interpersonal relations, or openness in expression of feelings.
9. A collaborative conception of the authority relationship, or redistribution of power.1

Buchanan, P.C., Evaluating the Effectiveness of Laboratory training in Industry.
Questions and Issues Suggested by the Proposal

1. What is the responsibility of a school system for assuming the role of inducting teachers into the profession? What are the rewards that accrue to the school system in providing such a program?

2. What is the proper relationship between the school system and the university for the responsibility of inducting teachers into the profession?

3. How much is the public willing to spend on training for the improvement of the quality of teachers in training? What is the relationship of the responsibility of the school systems adjacent to the colleges and universities in comparison with the responsibilities of other school systems which accrue the benefits of improved teacher education programs as provided in the system which provides the setting for the practice?

4. What is the proper degree of reward for career personnel who elect to develop a high degree of skill and proficiency in a specialized role such as clinical supervision offers?

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