

Special Education Tenets of Clinical Practice

*A Compendium to A Pivot Toward Clinical Practice,
Its Lexicon, and the Renewal of Educator Preparation*



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ABOUT AACTE: The American Association of Colleges for Teacher Education

AACTE is a national alliance of educator preparation programs dedicated to high-quality, evidence-based preparation that assures educators are profession-ready as they enter the classroom. Nearly 800 member institutions include public and private colleges and universities in every state, the District of Columbia, the Virgin Islands, and Guam. Through advocacy and capacity building, AACTE promotes innovative and effective practices that strengthen educator preparation.

AACTE members are committed to the clinical preparation of future educators. Given the unique expectations of special educators in settings across the service-delivery continuum, a clinical preparation for special educators is essential to their success. The Special Education Compendium to the AACTE Clinical Practice Commission's report outlines the tenets necessary to establish and identify as a highly effective clinical preparation program for special educators. AACTE's goal as an association is to build a portfolio of programs, products, and services to help educator preparation leaders thrive in this dynamic environment, and this compendium is an installment in that growing portfolio. Learn more at www.aacte.org.

INTRODUCTION



The AACTE Clinical Practice Commission (CPC) launched in June 2015 with the goals of establishing a shared lexicon, identifying model protocols and best practices, and developing actionable recommendations for the field to define and align high-quality clinical practice in teacher preparation and to advance operationalized practice. The AACTE CPC released a report in January 2018 that illustrated 10 evidence-based proclamations intended to capture the various ways to implement highly effective clinical practice across the country (see Appendix).

In collaboration with the CEEDAR (Collaboration for Effective Educator Development, Accountability and Reform) Center, AACTE engaged higher education and PK-12 leaders in applying the AACTE CPC frameworks for clinical educator preparation to address problems of practice encountered when preparing teacher candidates to meet the needs of students who require specialized supports. AACTE convened a Special Education Task Force in 2017 to identify critical areas and emergent issues in relation to the preparation of special education teachers, as inclusive practitioners and leaders, through the lens of clinical practice and the 10 AACTE CPC Proclamations.

The AACTE Special Education Task Force identified five key areas of consideration when developing a highly effective clinical preparation for special educators: preparation program, preparing interdisciplinary professionals, educational leadership, student assessment, and professional disposition. Tenets highlighting key considerations within these five areas were then defined by the AACTE Special Education Task Force. The special education clinical preparation tenets are aligned with the AACTE CPC Proclamations and are undergirded by substantive research in the areas of special education and inclusive teacher preparation. This publication is a compendium to the AACTE CPC report, *A Pivot Toward Clinical Practice, Its Lexicon, and the Renewal of Educator Preparation*. It is to be used to identify and define key areas of consideration in special education clinical preparation.

The AACTE CPC Proclamations are utilized by educator preparation programs (EPPs) across the country to emphasize and ensure a robust clinical preparation for teacher candidates. Clinical practice in the field of special education includes unique considerations for EPPs. Given the discipline's specific standards and expectations of special educators, the following table visually aligns the special education clinical practice tenets to the AACTE CPC Proclamations.

RECOMMENDATIONS

Highly Effective Special Education Clinical Preparation Tenets

THE CENTRAL PROCLAMATION

Clinical practice is central to high-quality teacher preparation.

- 1** Special education teacher preparation programs develop a scope and sequence of clinical practice experiences that are integrated into coursework from the beginning to the end of the program.
- 2** Special education teacher candidates are provided clinical practice experiences that are structured with an interdisciplinary focus including experiences that allow for practice working with educators, related service providers, mental health professionals, community organizations, parents and families.
- 3** School-based educational leaders are aware of and prepared to support preparation program policies for accreditation, as well as programmatic requirements that may include videotaping, access to records, and student assessments.

THE PEDAGOGY PROCLAMATION

As pedagogy is the science of teaching, the intentional integration of pedagogical training into an educator preparation program is the cornerstone of effective clinical practice.

- 1** Special education clinical practice opportunities and courses that address assessment are succinctly orchestrated to support and contextualize the learning of the special education teacher candidate.
- 2** Special education teacher candidates will engage in multiple opportunities to use authentic, evidence-based strategies to implement the knowledge of professional disposition skills when working with students with disabilities and other key stakeholders.
- 3** Special education teacher candidates have opportunities to practice being nimble, adaptive, responsive, and flexible within and across subject areas, contexts and related educational professional groups.



- 4** Special education teacher candidates are advised and assisted by special education mentor teachers that showcase evidenced-based practice solutions to issues impacting the social, emotional, and academic well-being of students with disabilities.

RECOMMENDATIONS

THE SKILLS PROCLAMATION

Clinical practice includes, supports, and complements the innovative and requisite skills, strategies, and tools that improve teacher preparation by using high-leverage practices as part of a commitment to continuous renewal for all learning sites.

- 1 Special education teacher candidates are provided opportunities to learn and to teach content (e.g., academic, social-emotional, functional) within a continuum of service options and placements.
- 2 Special education teacher candidates are provided opportunities to observe, enact, and receive feedback when delivering systematic and explicit instruction.
- 3 Special education teacher candidates are provided opportunities to observe, enact, and receive feedback when using data-based decision making, collection, and analysis skills.
- 4 Special education clinical experiences are designed to provide opportunities for the special education teacher candidate to identify and administer appropriate assessments to a diverse range of students, and to interpret and communicate results to stakeholders in order to inform future practice.
- 5 Special education clinical experiences will provide special education teacher candidates the opportunity to observe, participate, and evaluate in collaborative environments promoting self-reflection and development of professional disposition skills.
- 6 Educational leaders provide opportunities that allow special education teacher candidates to practice supervising and managing adults, including engaging with and leading paraprofessionals.

THE PARTNERSHIP PROCLAMATION

Clinical partnerships are the foundation of highly effective clinical practice.

- 1 Special education teacher candidates are provided access to students with high- and low-incidence disabilities with a variety of key stakeholders with the intention of collaborating across a multitude of clinical experiences to address student's needs.
- 2 Special education preparation programs consider expanding partnerships to include clinical experiences in hospitals, residential treatment centers, vocational rehabilitation programs, and any other contexts where the delivery of special education services take place.
- 3 Educational leaders, in collaboration with the teacher preparation program, identify district professionals in the field of special education who are exhibiting evidenced-based practices who will serve as school-based special education mentor teachers.
- 4 Special and general education teacher candidates are engaged by collaborative clinical practice experiences.

RECOMMENDATIONS

THE INFRASTRUCTURE PROCLAMATION

Sustainable and shared infrastructure is required for successful clinical partnership.

- 1 Special education teacher candidates are mentored within their clinical experiences by experienced, licensed, and/or certified special education professionals.
- 2 Special education clinical settings provide special education mentor teachers with the time and resources necessary to appropriately mentor special education teacher candidates.
- 3 Special education teacher preparation programs collaborate with school-based settings to create, supervise, and sustain an environment, which results in the development of the special education teacher candidate's professional disposition skills.

THE DEVELOPMENTAL PROCLAMATION

Clinical partnerships are facilitated and supported through an understanding of the continuum of development and growth that typifies successful, mutually beneficial collaborations.

- 1 Special education clinical settings provide candidates with multiple opportunities to engage with students from a variety of cultural, linguistic, ethnic, and economically diverse backgrounds (including English learners with exceptionalities).
- 2 Special education clinical settings appropriately sequence, scaffold, and provide opportunities to learn about the variety of special education service delivery models.
- 3 Special education mentor teachers assist teacher candidates in developing leadership skills by inviting them to professional development opportunities that will assist candidates in meeting the needs of students they will encounter in practice.

THE EMPOWERMENT PROCLAMATION

As emerging professionals, teacher candidates are essential contributors and collaborators within clinical programs and partnerships.

- 1 Special education teacher candidates collaborate with general education teachers and other education professionals through evidenced-based models of co-teaching that are known to support the learning of all students.
- 2 Special education mentor teachers encourage and support the participation of special education teacher candidates in all collaborative processes necessary to be well prepared to work with colleagues and families (i.e., IEP development, co-teaching, case management).

RECOMMENDATIONS

THE MUTUAL BENEFIT PROCLAMATION

Boundary-spanners, school-based teacher educators, and university-based teacher educators play necessary, vital, and synergistic roles in clinical educator preparation.

- 1 Special education preparation programs recognize that preparing special education teacher candidates must be the responsibility of a team of school-based educators, district or local education agency partners, and university-based educators. Further, special education teacher candidates are provided time and access to stakeholders within both settings to fully realize their role as an interdisciplinary team member.

THE COMMON LANGUAGE PROCLAMATION

Coalescing the language of teacher preparation and teaching around a common lexicon facilitates a shared understanding of and reference to the roles, responsibilities, and experiences essential to high-quality clinical preparation.

- 1 Special education clinical practice experiences are aligned to standards that guide the profession (e.g., Council for Exceptional Children Standards, State standards).
- 2 Special education teacher candidates participate in clinical practice experiences that introduce and reinforce special education language nuanced by local contexts.
- 3 Special education mentor teachers are aware of their responsibility to assist special education teacher candidates in developing the ability to communicate professionally about students.
- 4 Special education clinical experiences will include the exposure to, and required mastery of, a comprehensive and collaborative lexicon that serves all students' cross-categorical identities.



THE EXPERTISE PROCLAMATION

Teaching is a profession requiring specialized knowledge and preparation. Educators are the pedagogical and content experts. It is through the assertion and application of this expertise that they can inform the process and vision for renewing educator preparation.

- 1 Special education teacher candidates are afforded opportunities to experience role parity as they participate on interdisciplinary teams in order to construct their own teacher identity.
- 2 Educational leaders are familiar with the laws and regulations protecting students with disabilities and provide special education teacher candidates opportunities to practice as advocates on behalf of students with disabilities.

RECOMMENDATIONS

Defining the Five Key Areas of Consideration When Developing A Highly Effective Clinical Preparation for Special Educators

Preparation Program

Learning to effectively instruct and support students with disabilities requires a complex skill set that cannot be learned from coursework or observation alone. Deliberate practice, including intentional learning experiences that are sustained, varied, and increase in complexity over time is needed. In addition, these learning experiences must provide special education teacher candidates with clear models of effective instruction as well as opportunities to analyze instruction through a feedback channel that includes personnel who provide supervision through the university and the school-based clinical practice setting. Thus, educator preparation programs must carefully consider the scope and sequence of coursework and embed clinical practice opportunities to ensure that special education teacher candidates are adequately prepared.

Interdisciplinary Professionals

One of the most important skills a special education teacher utilizes in practice is collaborating across contexts, content areas, and groups of stakeholders to meet the needs of all students. Special education teachers must take an interdisciplinary approach to their educational practice. Developing opportunities for special education teacher candidates to communicate, advocate, co-teach, and build relationships with school personnel and families is paramount to ensuring candidates are prepared to support students with disabilities in their future classrooms. Focusing on these areas in clinical practice will provide opportunities that span traditional boundaries between general and special education.

Educational Leadership

Educational leadership can be defined as working with and guiding teachers toward improving educational processes in elementary, secondary, and postsecondary institutions to advance and improve educational systems for all stakeholders, including special education populations. In special education, an educational leader must strongly support special education teacher candidates in the domains

of collaboration, assessment, social/emotional/behavioral, and instruction in order to create inclusive environments for all students.

Student Assessment

Assessment is the gateway to the provision of special education services. Special education teachers are expected to create and administer formative and summative assessment in an iterative manner to students with identified disabilities. Throughout their clinical practice experience, special education teacher candidates should use assessments to gather data, inform instruction, and monitor a student's progress. Being mindful of the historic disproportionality of students from culturally and linguistically diverse backgrounds receiving special education services, integrating assessment opportunities in clinical settings is particularly significant for special education teacher candidates.

Professional Disposition

Special education teachers must continuously adapt to serve the unique and varied needs of a wide range of students representative of diverse socio-cultural and socio-economic backgrounds as well as settings that range from restrictive hospitalized or residential programs to inclusive educational environments. Professional disposition skills are integral to becoming an effective special education teacher. Relationship building among key stakeholders aligned with ethical ideals such as equity, integrity, and inclusion are essential in guiding special education teacher candidates in clinical practice partnerships. Further, in accordance with a growth mindset perspective in the development of teacher identity and teacher skill, special education teacher candidates must be afforded opportunities for mentorship and reflection as they navigate critical decisions and interpersonal communications.

CONCLUSION

The AACTE Special Education Task Force developed the special education clinical practice tenets to be utilized by educator preparation programs that are currently providing clinical practice experiences to their special education teacher candidates as well as by programs who seek to develop clinical practice experiences for their candidates. In this manner, the compendium will be updated to include seminal and ongoing research aligned to each of the tenets. The evolution of the compendium will also include the identification of model clinical experiences provided by established educator preparation programs as guidance for new preparation programs that are in the planning process or in the nascent stages of clinical preparation. AACTE welcomes contributions from its membership in identifying model special education clinical practice programs, both traditional and non-traditional in nature.

AACTE Special Education Task Force Members

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Essential Proclamations and Tenets for Highly Effective Clinical Educator Preparation

1. THE CENTRAL PROCLAMATION Clinical practice is central to high-quality teacher preparation.

Clinical practice serves as the central framework through which all teacher preparation programming is conceptualized and designed. The process of learning to teach requires sustained and ongoing opportunities to engage in authentic performance within diverse learning environments, where course work complements and aligns with field experiences that grow in complexity and sophistication over time and enable candidates to develop the skills necessary to teach all learners.

2. THE PEDAGOGY PROCLAMATION As pedagogy is the science of teaching, the intentional integration of pedagogical training into an educator preparation program is the cornerstone of effective clinical practice.

The presence of strong, embedded pedagogical training is the hallmark of effective clinical educator preparation. Pedagogy serves as a guidepost for shared professional standards of best practices in teaching that in turn guide the development of clinical practice models.

3. THE SKILLS PROCLAMATION Clinical practice includes, supports, and complements the innovative and requisite skills, strategies, and tools that improve teacher preparation by using high-leverage practices as part of a commitment to continuous renewal for all learning sites.

University-based teacher educators, school-based teacher educators, and boundary-spanning teacher educators in successful clinical partnerships pioneer innovative roles and practices without the restrictions of traditional assumptions about educator preparation. Mechanisms for teacher preparation and professional teacher development are aligned, research based, and professionally embedded.

4. THE PARTNERSHIP PROCLAMATION Clinical partnerships are the foundation of highly effective clinical practice.

Clinical partnership, as distinct from clinical practice, is the vehicle by which the vision of renewing teacher preparation through clinical practice becomes operational. Effective clinical partnerships allow for mutually beneficial outcomes and are gateways to developing reflective practice while simultaneously renewing teaching and learning in PK-12 classrooms.

5. THE INFRASTRUCTURE PROCLAMATION Sustainable and shared infrastructure is required for successful clinical partnership.

Clear governance structures and sustainable funding models are key to establishing and maintaining successful clinical partnerships. Individual preparation programs and school districts have different needs and resources. The roles and responsibilities of both school and university partners must be clearly articulated and defined.

6. THE DEVELOPMENTAL PROCLAMATION Clinical partnerships are facilitated and supported through an understanding of the continuum of development and growth that typifies successful, mutually beneficial collaborations.

A metacognitive teaching progression is needed when establishing and growing clinical partnerships. This progression is nonlinear and requires diligent commitment by all partners. While successful partnerships share some common stages and actions, each partnership possesses unique characteristics specific to local contexts. Ongoing assessment of partnerships is necessary to ensure continued efficacy and sustainability.

APPENDIX

7. THE EMPOWERMENT PROCLAMATION

As emerging professionals, teacher candidates are essential contributors and collaborators within clinical programs and partnerships.

The needs and responsibilities of teacher candidates should be factored into the curricula and infrastructures of educator preparation programs and clinical partnerships. The progression of embedded teaching and learning experiences is essential to empowering teacher candidates to take active roles during their practicum experiences, as well as to be profession- and learner-ready once they matriculate into their own classrooms.

8. THE MUTUAL BENEFIT PROCLAMATION

Boundary-spanners, school-based teacher educators, and university-based teacher educators play necessary, vital, and synergistic roles in clinical educator preparation.

Both school-based and university-based teacher educators must be highly qualified professionals who value one another's expertise. Both also must reconceptualize their roles to effectively model best teaching practice, engage candidates as coteachers, and integrate course work into school-based experiences. The clinical coaching of candidates is a vital and intensive endeavor that requires strategic and coordinated support.

9. THE COMMON LANGUAGE PROCLAMATION

Coalescing the language of teacher preparation and teaching around a common lexicon facilitates a shared understanding of and reference to the roles, responsibilities, and experiences essential to high-quality clinical preparation.

Implementing a common lexicon for clinical educator preparation facilitates consistency in the preparation, support, and induction of new and aspiring educators, as well as an understanding of the shared responsibility for preparing future educators. A shared lexicon establishes a more unified profession and enables external stakeholders to better understand the aspirations and real-world practice of the teaching profession.

10. THE EXPERTISE PROCLAMATION

Teaching is a profession requiring specialized knowledge and preparation. Educators are the pedagogical and content experts. It is through the assertion and application of this expertise that they can inform the process and vision for renewing educator preparation.

While external stakeholders play a role in the development of policies and regulations that affect educator preparation and licensure, educators themselves must take the lead to guide, shape, and define the parameters and renewal of their profession. Schools and universities must recognize and support the vital role that educators play in preparing the next generation of teachers by setting appropriate policies for tenure, promotion, and compensation. External stakeholders and policy makers are also vital allies in securing support for efficacious models through dedicated funding streams and other arrangements.



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