

Oct. 20th P-20 Teacher Academies Subcommittee

Academy route would require a new structure for delivering academies and having them in IL. Chicago Deans committed to residency model. Advantage of not requiring the building of a new structure. Allow us to take advantage of existing programs, which are already doing what academies envision.

Residencies and what they can accomplish. How would academies fit in IL? Offer freedom for programs to operate with a different setup and different accountability system; more freedom on the front end in terms of who gets into a program, higher expectations on the back end (completion, performance and field metrics). Going through a process to revamp accountability system, a separate simultaneous system would be complex to set up. Much more flexibility than most states in IL.

How do we make sure that we can use either this existing model with new flexibilities, or the academies model to recruit candidates that we know could serve in hard-to-serve areas? Rural, highly urban, second language. Other shortage areas. Short-term, high-impact capacity creation.

We don't necessarily have to create academies to begin to integrate the guidelines/goals into traditional IL teacher prep programs.

- Residencies are readily available, expedient, alternatives that we can see leveraging, given the existing infrastructure.
- Academies would require build-out of new structures for oversight. Approval and oversight.
- The distinction with academies could be in terms of numbers of graduates/completers. Assumption is academies move more people through the pipeline than the residencies model.
- Support for flexibility that both enable.

Gravitating toward talking about residencies. Academies have to have a "significant clinical aspect" to them.

Team gravitating toward using structures existing within IL--flexibilities to teacher prep to adjust shortage areas.

Can go down the path of talking about opportunities residencies provide/recommendations to TLE group, or pursue academies?

- Stephanie: doesn't believe you can use set-aside for residencies only. Academy set-aside is specifically for academies. You could do residencies now with No Child Left Behind money. Academy's 2% carve out is only for academies, according to the law as she's looking at it.

- Cathy Mannen: MAY use for academies, but not MUST. If not, it can be used elsewhere.
- Ameer: ESSA is not requiring academies be a line of pursuit. Outstanding questions: can Title II funds be used for residencies at all?
 - Is there interest in specifically pursuing academies? No support for it.

What would we like to say about residencies to our counterparts in the other committee?

Career-changers: think strategically about who we target with residency options. We could reach out to veterans.

Any of that money speaking to stipends or forgivable loan models, specified number of years in designated schools.

Stephanie: academy seems like better structure. In academies, state wouldn't set up any input guidelines (GPA, etc.). Programs could make their own input structures, but outputs would be set by state/committee. "Academy is the better structure." Difference between them is false. Academy would allow for a more diverse student candidate population.

Flexibility: set aside basic skills requirement, for example. We might have interest in opening input guidelines, if that's an interest of this group.

We can think about the residency as a path of teacher preparation that speaks specifically to the need to mentor candidates into particular settings. Different, intentional preparation depending on location--then more widely applicable preparation, as well.

Not opposed to academies. We're more interested in pursuing the notion of residencies for precisely the reason of expedience and making use of current structures.

Deep commitment to clinical preparation (from institutions and LEA). Common attentiveness to needs of LEAs (type of school, content area). Recruitment. Can there be a relaxing of requirements for entry so that we can recruit candidates who could join a program for deep clinical preparation that is aligned to district needs?

Do we want to broaden our definition of who we can recruit? Specific recruiting for district needs: can we do that through existing structures? Do we need to have a change in regulation to do it? Or is the most expedient route to open academies, which allows us to keep rigorous clinical preparation, but also relax barriers to entry?

Is it worth it to pursue academies, or do we concentrate our energy on recommending to ISBE that the state provide opportunities for increased flexibility in recruitment? If you lift the bar for entry, but set more rigorous bars for exit, do you get a different type of candidate that could potentially serve your institution?

The underlying question to the above is--do we believe that increasing flexibility in recruitment is the key strategy to addressing the needs that we put on the table? High needs schools in specific geographic areas, high need content areas, valuing diversity, valuing cultural competency. Flexibility is one solution among many.

Increase in flexibility a component, but not the most important. Intensive and efficient pathway into clinical practice, grounded in clinical preparation using the apprentice model.

Define priorities for ISBE--no matter what model is decided on, the guiding principles should be clear.

Neither investment or opposition with regard to academies route.

It is not issues within the district/school that prevent retention. There's a social/economic context. How do we connect academies/residencies to economic development in these areas? Create conditions more empowering for learners there.

Components to recruitment can address retention issues. Residency: expectation of serving 4 years serving beyond residency for 5 year commitment. If you tie recruiting to the area, it could help. Collaborative effort for housing opportunities. Embed expectations of longevity. Create area-specific support networks.

Money for academies can be repurposed. 5% set-aside for the state. 1% administrative. 2% maximum (not set-aside) out of 5% for academies. Another 3% set-aside, for a total of 8% set-aside from federal money. 3% requirements: only spent on activities related to principals and other school leaders (5% can also be spent this way, but 3% can't be spent on teacher activities). \$2.1m split between about five areas. Teacher evaluation, national board certification, PD (core content, para, recalibration for evaluation training), KYAC (???), standards alignment.

Challenge: think quickly about what are the costs associated with the residency model. Would that be accomplished through tuition/financial aid through the university? Additional funds to compensate mentor teachers? Deep residual benefits of being a mentor teacher.

Costs: mentor teachers in schools, committed teacher candidates (less flexibility in early part of career in exchange for deeper knowledge and more impactful work).

Is there a way to link the residency with funds for principals, to create a unified system? Successful models: principals in building have been prepared in a particular way that helps support teachers and students in those specific schools/communities. If we only look at the teacher piece, we'll still have a leaky bucket.

Residencies won't utterly transform preparation--they will serve particularly acute needs. Larger cohort isn't the way to think about it--prioritize scope of local impact.

Competitive grant

- Districts apply in partnership with university
- Leadership model
- Stipulations based on ESSA and population.
- District and teacher training program apply together.
- Weighted in favor of application: commitment to using local funds in addition to state set-aside.

State providing guidance to locals:

- Stipend to mentor teachers.
- Providing for PD.
- Stipend to residents.
- Release time.
- Principal preparation.
- Mentor/resident coach.

Part of LEA commitment is paying tuition, or university-school partnership could be built around tuition waivers for residents.

- Creating networks.
- Induction support.
- Built-in evaluation process.

Better way of concentrating impact of the money.

Legislation was drafted at the federal level, where there is unevenness across states. We already have a high bar with edTPA.

Are we saying that residencies are our single largest recommendation to ISBE?

Local commitments: disseminate experience.

Affordable housing, childcare, property tax relief/high need areas, as incentives.

All of this flows from a local commitment to exploring the residency model, so it's still bounded under what we were charged to address.

Effective cooperating teachers may not share the same specific credentials. Exercise caution on the requirements we put in place. Don't lose sight of looking at residency model as a way of preparing effective teachers, as well as effective cooperating teachers. No input logic on cooperating teachers at this point. Count on an ability to learn from the competitive grant

process. Early participants can provide evidence about what are the meaningful supports for effective cooperating teachers/mentors.

Key points:

- Entertained questions of residencies and academies
- Left academies to the side in favor of residencies which don't require new build out, seem to be expedient, already have interested parties, accomplish same goals
- Clarification on use of funds
- Key principles important to these alternative ways of preparing teachers (high-performance standard for exit, models clinically embedded, longevity commitments, apprentice-mentor induction model, flexibility to be sensitive to local needs, innovations in recruiting interested parties, explored the use of funds to verify that state set-aside will support residencies in addition to leadership preparation)
- Residency models are sensitive to local priorities but are universally applicable
- Recommend braiding the state set-aside and local funds in a way that brings together a teacher residency model mentored by a master teacher/teacher leader, coupled in a setting looking to cultivate new principals and other school leaders (school based PD model for high impact on local settings)
- Competitive grant process based on school-EPP partnership that would share the commitment of local funds to maximize the resources there
- Incentivizing innovation and flexibility around admission with strong exit standards
- Guidance → LEAs what makes a competitive grant competitive = articulating release time for mentors, stipends for mentors/residents (teachers and leaders to be), designated liaison or mentor coach to coordinate work and provide PD to mentors, incentivize rural districts to collaborate and pool their funds to meet shared needs, attention and commitment to induction support, demonstrate stakeholder buy-in (superintendents, school boards, etc.)
- Questions: measures to support sustainability. Built-in evaluation process to learn from grant efforts and revise the model for residencies to support teachers and leaders.
- Commitment to disseminate the results of efforts.
- ISBE definition for "effective," lesson learned from grants.
- Innovations around housing/childcare, to help support goals

Recommendation about pathway to citizenship or changing licensure laws.

Four things of highest priority in competition:

- Stakeholder support
- Model includes instructional leadership, as well as teacher/leader/mentoring
- Residency includes immersion in clinical practice
- Articulation of effort toward sustainability

Variation across residency models driven by local needs and priorities.